



Medi-Cal

Condado de San Diego | January 2022



Promise
Health
Plan

Asistencia en distintos idiomas

English

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

الشعار بالعربية (Arabic)

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

Հայերեն (Armenian)

Ուժեղ օգնություն է հարկավոր Ձեր լեզվով, զանգահարեք 1-855-699-5557 (TTY՝ 711) հեռախոսահամարով: Կան նաև օժանդակ միջոցներ ու ծառայություններ հաշմանդամություն ունեցող անձանց համար, օրինակ Բրայլի գրատիպով ու խոշորատառ տպագրված նյութեր: Զանգահարեք 1-855-699-5557 (TTY՝ 711) հեռախոսահամարով: Այդ ծառայություններն անվճար են:

ប្រាសាទកម្ពុជា (Cambodian)

ចំណាំ: បើសិនអ្នកត្រូវការជំនួយ ជាភាសារបស់អ្នក សូមទូរស័ព្ទទៅលេខ 1-855-699-5557 (TTY: 711) ។ ជំនួយ និងសេវា សំរាប់ជនពិការ ដូចជាឯកសារសរសេរជាអក្សរប្រើល សំរាប់ជនពិការភ្នែក ឬឯកសារជាអក្សរពុម្ពធំៗ ក៏មានដែរ។ ទូរស័ព្ទមកលេខ 1-855-699-5557 (TTY: 711)។ សេវាទាំងនេះមិនគិតថ្លៃឡើយ។

中文 (Chinese)

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

فارسی Farsi

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

भाषा (Hindi)

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



Llame a Atención al Cliente de Blue Shield Promise al (855) 699-5557 (TTY 711). El horario de atención de Blue Shield Promise es de lunes a viernes, de 8:00 a. m. a 6:00 p. m. La llamada es gratis. O llame a la línea de retransmisión de California al 711. Visítenos en Internet en blueshieldca.com/promise/medi-cal. La información incluida en el Directorio de Proveedores puede cambiar.

Hmoob (Hmong)

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

日本語 (Japanese)

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

한국어(Korean)

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

ພາສາລາວ (Laotian)

ປະກາດ: ຖ້າທ່ານຕ້ອງການຄວາມຊ່ວຍເຫຼືອໃນພາສາຂອງທ່ານໃຫ້ໃຫ້ທາງເບີ 1-855-699-5557 (TTY: 711). ຍັງມີຄວາມຊ່ວຍເຫຼືອແລະການບໍລິການສໍາລັບຄົນພິການ ເຊັ່ນເອກະສານທີ່ເປັນອັກສອນນູນແລະ ມີໂຕຮິມໃຫຍ່ ໃຫ້ໃຫ້ທາງເບີ 1-855-699-5557 (TTY: 711). ການບໍລິການເຫຼົ່ານີ້ບໍ່ຕ້ອງເສຍຄ່າໃຊ້ຈ່າຍໃດໆ.

Mienh (Mien)

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

ਪੰਜਾਬੀ (Punjabi)

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



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Русский (Russian)

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

Español (Spanish)

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

Tagalog (Tagalog)

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

ภาษาไทย (Thai)

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

ภาษาไทย (Ukrainian)

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

Tiếng Việt (Vietnamese)

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



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A. Introducción

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

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


Cómo cambiar de PCP

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

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

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

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

		www.blueshieldca.com/promise	
Member: JOHN DOE Member ID: AAA123456789		Customer Care (855) 699-5557 (TTY: 711) Provider Services (800) 468-9935 Transportation (800) 433-2178 Nurse Help Line (800) 609-4166 Behavioral Health (855) 321-2211 (TTY: 711)	<small>This member has limited benefits outside of the plan service area and outside of California. Provider: This card is for identification purposes only, and does not prove eligibility for services. Provider medical care is provided solely through Blue Shield of California Promise Health Plan services. Please the following with your HEALTHCARE provider in their service area for member related services. CA Providers: Call Provider Customer Service to obtain medical and hospital admission or authorization or a prior authorization request.</small>
City: 123456789 Health Plan Group #: 9999999 Effective Date: MM/DD/YYYY	Information Information Line 2 PCP Name 1234 Street City, ST Zip	<small>Blue Shield of California Promise Health Plan is a health plan provided to eligible members by contract and is not a health plan. If the member is covered by EMERGENCY care through the plan, the member is not eligible for Blue Shield of California Promise Health Plan as soon as possible. Non-Emergency services are covered after the member is covered by the plan. Blue Shield of California Promise Health Plan is an independent licensee of the Blue Shield Association.</small>	

Servicios de farmacia a través de Medi-Cal Rx

El Departamento de Servicios de Atención Médica (DHCS) administra los servicios de farmacia para los miembros de Medi-Cal. Para servicios de farmacia, puede llamar a Medi-Cal Rx Call Línea central (1-800-977-2273)



Llame a Atención al Cliente de Blue Shield Promise al **(855) 699-5557** (TTY 711). El horario de atención de Blue Shield Promise es de lunes a viernes, de 8:00 a. m. a 6:00 p. m. La llamada es gratis. O llame a la línea de retransmisión de California al 711. Visítenos en Internet en blueshieldca.com/promise/medi-cal. La información incluida en el Directorio de Proveedores puede cambiar.

veinticuatro horas al día, siete días a la semana o 711 para TTY, de lunes a viernes, de 8 a.m. a 5 p.m.) La mayoría de las farmacias aceptan Med-Cal Rx. Puede comunicarse con la Línea de ayuda para miembros de Medi-Cal (1-800-541-5555, TTY 1-800-430-7077) para preguntar si su farmacia aceptará Medi-Cal Rx. Si necesita ayuda para encontrar una farmacia, use el localizador de farmacias de Medi-Cal Rx en línea en www.Medi-CalRx.dhcs.ca.gov o llame a la línea del centro de llamadas de Medi-Cal Rx al 1-800-977-2273.

Cómo usar este Directorio

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

Información importante sobre las listas del Directorio

Este Directorio de Proveedores está actualizado a la fecha que aparece en la portada. Es posible que se hayan agregado o quitado PCP después de la impresión de este Directorio. No garantizamos que todos los PCP aún acepten miembros nuevos. Para obtener la información más actualizada sobre los PCP en su área, puede visitar blueshieldca.com/promise o llamar

gratis a Atención al Cliente de Blue Shield Promise al **(855) 699-5557** [TTY: **711**]. O visite nuestra oficina de lunes a viernes, de 8:00 a. m. a 6:00 p. m. No es necesario tener una cita previa. Nuestro personal cuenta con miembros que hablan su idioma. También puede visitar nuestro sitio web en blueshieldca.com/promise.

Divulgaciones y otra información importante

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

Para obtener más información sobre nuestros proveedores, incluida la información sobre sus estudios académicos y su experiencia (por ejemplo, la facultad de medicina a la que fueron, las residencias que hicieron y la matrícula profesional que tienen), llame a Atención al Cliente de Blue Shield Promise o use la herramienta de búsqueda de proveedores disponible en nuestro sitio web en blueshieldca.com/promise.

Es posible que necesite autorizaciones o referencias para tener acceso a algunos proveedores.



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Blue Shield Promise brinda acceso completo e igualitario a los servicios cubiertos, incluso para los inscritos que tienen alguna discapacidad. Todos los proveedores reciben y deben hacer un entrenamiento en competencia cultural.

Servicios de intérpretes

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

- Personal bilingüe para brindarle ayuda en su idioma.
- Servicios de intérpretes, incluso en lenguaje de señas estadounidense, para todas sus necesidades de atención de la salud, sin costo para usted. No tiene que pedirles a sus amigos o familiares que hagan de intérpretes. Usted puede obtener

servicios de intérpretes las 24 horas, cualquier día de la semana, para lo siguiente:

Servicios médicos: visitas al médico, servicios fuera del horario de atención, servicios de atención urgente, servicios de farmacias y clases de educación sobre la salud.

Servicios no médicos: servicio al cliente, quejas de los miembros y reuniones informativas para miembros.

- Materiales en otros formatos, como braille, audio o letra grande. Solo debe llamar a su grupo médico o a Atención al Cliente de Blue Shield Promise. Si ya hizo una cita, asegúrese de pedir un intérprete al menos diez (10) días hábiles antes de su cita.



Llame a Atención al Cliente de Blue Shield Promise al **(855) 699-5557** (TTY 711). El horario de atención de Blue Shield Promise es de lunes a viernes, de 8:00 a. m. a 6:00 p. m. La llamada es gratis. O llame a la línea de retransmisión de California al 711. Visítenos en Internet en blueshieldca.com/promise/medi-cal. La información incluida en el Directorio de Proveedores puede cambiar.

AVISO DE NO DISCRIMINACIÓN

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

Blue Shield of California Promise Health Plan proporciona:

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

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

(800) 605-2556 (Los Angeles)

(855) 699-5557 (San Diego)

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

Blue Shield of California Promise Health Plan Customer Care

601 Potrero Grande Dr., Monterey Park, CA 91755

(800) 605-2556 (Los Angeles)

(855) 699-5557 (San Diego)

TTY: 711



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CÓMO PRESENTAR UNA QUEJA

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

- Por teléfono: Comuníquese con el Coordinador de Derechos Civiles de Blue Shield of California Promise Health Plan, de lunes a viernes, de 8:00 a.m. a 6:00 p.m., llamando al (844) 883-2233. Si usted no puede oír o hablar bien, llame a la línea TYY/TDD 711.
- Por escrito: Llene un formulario de queja o escriba una carta, y envíelo(a) a:

Blue Shield of California Promise Health Plan Civil Rights Coordinator
601 Potrero Grande Dr.
Monterey Park, CA 91755
- En persona: Vaya al consultorio de su médico o a Blue Shield of California Promise Health Plan y diga que desea presentar una queja.
- Por vía electrónica: Visite el sitio web de Blue Shield of California Promise Health Plan www.blueshieldca.com/promise/medi-cal.

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

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

- Por teléfono: Llame al **916-440-7370**. Si no puede hablar u oír bien, llame al **711 (Servicio de Retransmisión de Telecomunicaciones)**.
- Por escrito: Llene un formulario de queja o envíe una carta a:



Llame a Atención al Cliente de Blue Shield Promise al **(855) 699-5557** (TTY 711). El horario de atención de Blue Shield Promise es de lunes a viernes, de 8:00 a. m. a 6:00 p. m. La llamada es gratis. O llame a la línea de retransmisión de California al 711. Visitenos en Internet en blueshieldca.com/promise/medi-cal. La información incluida en el Directorio de Proveedores puede cambiar.

U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201

Los formularios de queja están disponibles en
<http://www.hhs.gov/ocr/office/file/index.html>.

Por vía electrónica: Visite el Portal de Quejas de la Oficina de Derechos Civiles en
<https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>.



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Red de proveedores de Blue Shield Promise

Definiciones e información general

Asociación de Práctica Independiente (IPA, por sus siglas en inglés): Es un modelo de atención de la salud que tiene un contrato con un grupo de médicos para que brinden servicios de atención de la salud.

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

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

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

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

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

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

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

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

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

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



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Indicadores de accesibilidad física en el Directorio de Proveedores

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

E = Sala de exámenes

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

EB = Instalaciones externas

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

IB = Instalaciones internas

Las puertas son amplias para permitir el ingreso de personas en silla de ruedas o scooter, y tienen picaportes fáciles de usar. Las rampas internas son anchas y tienen pasamanos. Las escaleras, si las hay, tienen pasamanos. Si hay elevadores, están disponibles para los pacientes y el público en general durante todo el tiempo que está abierto el edificio. Además, tienen sonidos fáciles de oír y botones en braille al alcance de la mano, como también espacio suficiente para que las personas en silla de ruedas o scooter puedan girar. Si hay una plataforma elevadora, es posible usarla sin necesidad de obtener ayuda.

P = Estacionamiento

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

R = Baño

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

T = Camilla y balanza

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



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Directorio de Proveedores de Blue Shield Promise

Medi-Cal – Condado de San Diego



Explicaciones de los códigos de accesibilidad

P: Estacionamiento

EB: Instalaciones externas

IB: Instalaciones internas

W: Silla de ruedas

R: Baño

E: Sala de exámenes

T: Camilla y balanza



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Cómo leer las listas de proveedores

La siguiente información puede ayudarlo a elegir su PCP.

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

Ejemplo:

1. Pediatría
2. Doe, Jane, Doctor en Medicina (MD)
3. N.º de id. del proveedor:
00A2123456
4. Mujer
5. N.º de licencia: 00A123456
6. NPI: 0123456789
7. Inglés, español, vietnamita, farsi, coreano, chino, árabe
8. Sí
9. Good Samaritan Hospital
10. Pediatría
11. Northeast County Community Clinic
12. 601 Potrero Grande Drive, Monterey Park, CA 91755
13. (855) 699-5557
14. (855) 699-5557
15. www.northeastclinic.com
16. doctordoe@gmail.com
17. Sí/No
18. 0-18
19. Limitado. P, EB, IB, E
20. L a V, 8 A. M. - 5 P. M.



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Reglas para recibir atención a tiempo

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



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B. Clínicas de salud federalmente calificadas

ALPINE

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802
1620 ALPINE BLVD STE 110
ALPINE, CA 91901-1103
Phone: (619) 662-4100
Fax:

After Hours Phone: (619) 662-4100
License number: 090000681
NPI: 1770124315
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-SA 9AM-5PM

American Sign Language (ASL): No
Accessibility: Medical
Group/IPA: Ihp-san Ysidro Health Center
Website: www.mtnhealth.org
Email:

SAN YSIDRO HEALTH ALPINE PEDIATRICS MED CLINIC

Provider ID: 541825
2733 ALPINE BLVD STE 200
ALPINE, CA 91901-2253
Phone: (619) 445-5664
Fax: (619) 445-3531
After Hours Phone: (619) 445-5664
License number: 550002514
NPI: 1770178444

Accepting New Patients: Yes
Min/Max Age: 0/18
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-F 8AM-5PM, SA

9AM-5PM
American Sign Language (ASL): No
Accessibility: EB, IB, WMedical
Group/IPA: Ihp-san Ysidro Health Center
Website: www.syhealth.org
Email:

BORREGO SPRINGS

BORREGO MEDICAL CLINIC

Provider ID: 185179
4343 YAQUI PASS RD
BORREGO SPRINGS, CA 92004
Phone: (760) 767-5051
Fax: (760) 767-4552
After Hours Phone: (760) 767-5051

License number: 080000651
NPI: 1134144165
Accepting New Patients: Yes
Min/Max Age: 0/999
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Cultural Competency: No
Hours: M-F 8AM-5PM, SA 9AM-5PM
American Sign Language (ASL): No
Accessibility: WMedical
Group/IPA: Borrego Community Health Foundtion
Website: n
Email:

CAMPO

SAN YSIDRO HEALTH MOUNTAIN HEALTH FAMILY MEDICINE

Provider ID: 519686
1388 BUCKMAN SPRINGS RD

CAMPO, CA 91906-2028
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
License number: 090000660
NPI: 1174164719
Accepting New Patients: Yes
Min/Max Age: 0/120
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-SA 9AM-5PM
American Sign Language (ASL): No
Accessibility: Medical
Group/IPA: Ihp-san Ysidro Health Center
Website:
Email:

CARLSBAD

NCHS CARLSBAD FAMILY MEDICINE

Provider ID: 480120
1295 CARLSBAD VILLAGE DR # 100
CARLSBAD, CA 92008-1950
Phone: (760) 720-7766
Fax: (760) 720-7204
After Hours Phone: (760) 720-7766
License number: 080000630
NPI: 1245246917
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-F 8AM-5PM, SA 8AM-2PM
American Sign Language (ASL): No
Accessibility: Medical

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

B. Clínicas de salud federalmente calificadas

Group/IPA: Ihp-north County
Health Services
Website:
Email:

CHULA VISTA

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2500
Fax: (619) 397-1161
After Hours Phone: (619)
515-2500
License number:
NPI: 1346480837
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Cultural Competency: No
Hours: M-SA 9AM-5PM
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
T, MEMedical Group/IPA: Family
Health Centers Of San Diego
Website: www.fhcsd.org
Email:

CHULA VISTA PEDIATRICS

Provider ID: 482034
855 3RD AVE STE 2200
CHULA VISTA, CA 91911-1353
Phone: (619) 662-4100
Fax: (619) 662-4196
After Hours Phone: (619)
662-4100
License number:
NPI: 1326486861
Accepting New Patients: Yes
Min/Max Age: None

Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-F 9AM-4PM, SA
9AM-5PM
American Sign Language (ASL):
No
♿ Accessibility: Medical
Group/IPA: Ihp-san Ysidro Health
Center
Website: www.ihpsocal.org
Email:

FAMILY HLTH CTR SAN DIEGO-RICE FAM HC

Provider ID: 417641
352 L ST
CHULA VISTA, CA 91911-1208
Phone: (619) 515-2325
Fax: (619) 420-0660
After Hours Phone: (619)
515-2325
License number: 550002305
NPI: 1083959464
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-F 8AM-5PM, SA
9AM-5PM
American Sign Language (ASL):
No
♿ Accessibility: Medical
Group/IPA: Family Health
Centers Of San Diego
Website: www.fhcsd.org
Email:

OTAY FAMILY HEALTH CLINIC

Provider ID: 314546
1637 3RD AVE STE H
CHULA VISTA, CA 91911-5823

Phone: (619) 662-4100
Fax: (619) 336-2323
After Hours Phone: (619)
662-4100
License number:
NPI: 1922051812
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-F 8AM-5PM, SA
9AM-5PM
American Sign Language (ASL):
No
♿ Accessibility: WMedical
Group/IPA: Ihp-san Ysidro Health
Center
Website: www.ihpsocal.org
Email:

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
678 3RD AVE
CHULA VISTA, CA 91910-5736
Phone: (619) 662-4100
Fax: (619) 425-1184
After Hours Phone: (619)
662-4100
License number:
NPI: 1326486861
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-F 8AM-5PM, SA
9AM-5PM
American Sign Language (ASL):
No
♿ Accessibility: WMedical
Group/IPA: Ihp-san Ysidro Health
Center
Website: www.ihpsocal.org

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

B. Clínicas de salud federalmente calificadas

Email:

EL CAJON

CENTRO MEDICO EL CAJON

Provider ID: 478971
 133 W MAIN ST STE 100
 EL CAJON, CA 92020-3325
 Phone: (619) 873-8940
 Fax: (619) 401-0522
 After Hours Phone: (619) 873-8940
 License number: 550000430
 NPI: 1154480069
 Accepting New Patients: Yes
 Min/Max Age: 0/999
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Cultural Competency: No
 Hours: M-SA 9AM-5PM
 American Sign Language (ASL):
 No
 Accessibility: WMedical
 Group/IPA: Borrego Community
 Health Foundtion
 Website:
 Email:

CHASE AVENUE FAMILY HEALTH CTRS INC

Provider ID: 206354
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
 Phone: (619) 515-2499
 Fax: (619) 593-7164
 After Hours Phone: (619) 515-2499
 License number:
 NPI: 1104861681
 Accepting New Patients: Yes
 Min/Max Age: None
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Cultural Competency: No
 Hours: M-SA 9AM-5PM

American Sign Language (ASL):
 No
 Accessibility: MEMedical
 Group/IPA: Family Health
 Centers Of San Diego
 Website: www.fhcsd.org
 Email:

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2498
 Fax: (619) 269-0191
 After Hours Phone: (619) 515-2498
 License number: 550003553
 NPI: 1932561198
 Accepting New Patients: Yes
 Min/Max Age: None
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Cultural Competency: No
 Hours: M-F 8:30AM-5:30PM, SA
 9AM-5PM
 American Sign Language (ASL):
 No
 Accessibility: Medical
 Group/IPA: Family Health
 Centers Of San Diego
 Website: www.fhcsd.org
 Email:

LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501
 1032 BROADWAY
 EL CAJON, CA 92021-7416
 Phone: (619) 795-5991
 Fax: (619) 795-5992
 After Hours Phone: (619) 795-5991
 License number: 550003567
 NPI: 1134590086

Accepting New Patients: Yes
 Min/Max Age: None
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Cultural Competency: No
 Hours: M-F 8:30AM-5:30PM, SA
 9AM-5PM
 American Sign Language (ASL):
 No
 Accessibility: WMedical
 Group/IPA: La Maestra Family
 Clinic
 Website: www.lamaestra.org
 Email:

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267
 165 S 1ST ST
 EL CAJON, CA 92019-4795
 Phone: (619) 312-0347
 Fax: (619) 749-5480
 After Hours Phone: (619) 312-0347
 License number:
 NPI: 1336353721
 Accepting New Patients: Yes
 Min/Max Age: None
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Cultural Competency: No
 Hours: M-SA 9AM-5PM
 American Sign Language (ASL):
 No
 Accessibility: WMedical
 Group/IPA: La Maestra Family
 Clinic
 Website: www.lamaestra.org
 Email:

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267
 165 S 1ST ST
 EL CAJON, CA 92019-4795

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

B. Clínicas de salud federalmente calificadas

Phone: (619) 312-0347
 Fax: (619) 749-5480
 After Hours Phone: (619) 312-0347
 License number:
 NPI: 1053526756
 Accepting New Patients: Yes
 Min/Max Age: None
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Cultural Competency: No
 Hours: M-SA 9AM-5PM
 American Sign Language (ASL):
 No
 ♿ Accessibility: WMedical
 Group/IPA: La Maestra Family
 Clinic
 Website: www.lamaestra.org
 Email:

NEIGHBORHOOD HEALTHCARE EL CAJON

Provider ID: 206272
 855 E MADISON AVE
 EL CAJON, CA 92020-3819
 Phone: (619) 440-2751
 Fax: (360) 462-2746
 After Hours Phone: (619) 440-2751
 License number: 090000156
 NPI: 1760667950
 Accepting New Patients: Yes
 Min/Max Age: None
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hours: M-F 8AM-5PM, SA
 9AM-5PM
 American Sign Language (ASL):
 No
 ♿ Accessibility: WMedical
 Group/IPA: Ihp-neighborhood
 Healthcare
 Website: www.ihpsocal.org

Email:
**SAN YSIDRO HEALTH
 CHALDEAN AND MIDDLE
 EASTERN SOCIAL SVS**
 Provider ID: 329504
 436 S MAGNOLIA AVE STE 101
 EL CAJON, CA 92020-5219
 Phone: (619) 662-4100
 Fax: (619) 401-7411
 After Hours Phone: (619) 662-4100
 License number:
 NPI: 1568845741
 Accepting New Patients: Yes
 Min/Max Age: None
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Cultural Competency: No
 Hours: M-F 8AM-5PM, SA
 9AM-5PM
 American Sign Language (ASL):
 No
 ♿ Accessibility: WMedical
 Group/IPA: Ihp-san Ysidro Health
 Center
 Website: www.ihpsocal.org
 Email:

ENCINITAS

**NCHS WOMENS HEALTH
 SERVICES**
 Provider ID: 480243
 1130 2ND ST
 ENCINITAS, CA 92024-5008
 Phone: (760) 753-7842
 Fax: (760) 736-8740
 After Hours Phone: (760) 753-7842
 License number: 080000638
 NPI: 1245246917
 Accepting New Patients: Yes
 Min/Max Age: None
 Site English Spoken: Yes

Site Language(s) Spoken:
 Cultural Competency: No
 Hours: M-TH 8AM-5PM, F
 8:30AM-5:30PM, SA 9AM-5PM
 American Sign Language (ASL):
 No
 ♿ Accessibility: Medical
 Group/IPA: Ihp-north County
 Health Services
 Website:
 Email:

ESCONDIDO

CENTRO MEDICO ESCONDIDO

Provider ID: 419344
 1121 E WASHINGTON AVE
 ESCONDIDO, CA 92025-2214
 Phone: (760) 871-0606
 Fax: (858) 634-6918
 After Hours Phone: (760) 871-0606
 License number: 550001260
 NPI: 1023349883
 Accepting New Patients: Yes
 Min/Max Age: 0/999
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Cultural Competency: No
 Hours: SA,SU 8AM-12PM, M-F
 8AM-8PM
 American Sign Language (ASL):
 No
 ♿ Accessibility: P, EB, IB, E, R,
 WMedical Group/IPA: Borrego
 Community Health Foundtion
 Website: n
 Email:

NEIGHBORHOOD HEALTHCARE ESCONDIDO

Provider ID: 206270
 460 N ELM ST
 ESCONDIDO, CA 92025-3002

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

B. Clínicas de salud federalmente calificadas

Phone: (760) 520-8100
Fax: (360) 462-2752
After Hours Phone: (760) 520-8100
License number: 080000397
NPI: 1598703647
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-F 8AM-5PM, SA 8AM-12PM
American Sign Language (ASL): No
♿ Accessibility: WMedical
Group/IPA: lhp-neighborhood Healthcare
Website: www.ihpsocal.org
Email:

NEIGHBORHOOD HEALTHCARE GRAND AVE

Provider ID: 206269
1001 E GRAND AVE
ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (360) 462-2749
After Hours Phone: (760) 520-8200
License number: 080000483
NPI: 1487826772
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-F 8AM-5PM, SA 9AM-5PM
American Sign Language (ASL): No
♿ Accessibility: WMedical
Group/IPA: lhp-neighborhood Healthcare
Website: www.ihpsocal.org

Email:
NEIGHBORHOOD HEALTHCARE GRAND AVE
Provider ID: 206269
1001 E GRAND AVE
ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (360) 462-2749
After Hours Phone: (760) 520-8200
License number: 550000697
NPI: 1487826772
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-F 8AM-5PM, SA 9AM-5PM
American Sign Language (ASL): No
♿ Accessibility: WMedical
Group/IPA: lhp-neighborhood Healthcare
Website: www.ihpsocal.org
Email:

NEIGHBORHOOD HEALTHCARE GRAND AVE

Provider ID: 206269
1001 E GRAND AVE
ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (360) 462-2749
After Hours Phone: (760) 520-8200
License number: 080000397
NPI: 1487826772
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-F 8AM-5PM, SA

9AM-5PM
American Sign Language (ASL): No
♿ Accessibility: WMedical
Group/IPA: lhp-neighborhood Healthcare
Website: www.ihpsocal.org
Email:

NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL

Provider ID: 424775
426 N DATE ST
ESCONDIDO, CA 92025-3409
Phone: (760) 690-5900
Fax: (360) 462-2747
After Hours Phone: (760) 690-5900
License number: 550000511
NPI: 1437335353
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-F 8AM-5PM, SA 9AM-5PM
American Sign Language (ASL): No
♿ Accessibility: Medical
Group/IPA: lhp-neighborhood Healthcare
Website:
Email:

NEIGHBORHOOD HEALTHCARE PEDS AND PRENATAL

Provider ID: 206266
425 N DATE ST
ESCONDIDO, CA 92025-3413

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

B. Clínicas de salud federalmente calificadas

Phone: (760) 520-8340
Fax: (360) 462-2752
After Hours Phone: (760) 520-8340
License number:
NPI: 1265618185
Accepting New Patients: Yes
Min/Max Age: 000/21
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-F 8AM-5PM, SA 9AM-5PM
American Sign Language (ASL): No
♿ Accessibility: WMedical Group/IPA: Ihp-neighborhood Healthcare
Website: www.ihpsocal.org
Email:

NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY

Provider ID: 206271
728 E VALLEY PKWY
ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax: (360) 462-2748
After Hours Phone: (760) 737-6900
License number: 080000158
NPI: 1720264641
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M,TU,TH,F 8AM-5PM, W 9AM-5PM, SA 9AM-5PM
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, WMedical Group/IPA: Ihp-neighborhood Healthcare

Website:
Email:
SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE
Provider ID: 519481
255 N ASH ST STE 101
ESCONDIDO, CA 92027-3069
Phone: (760) 745-5832
Fax:
After Hours Phone: (760) 745-5832
License number:
NPI: 1801438239
Accepting New Patients: Yes
Min/Max Age: 0/120
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-SA 9AM-5PM
American Sign Language (ASL): No
♿ Accessibility: Medical Group/IPA: Ihp-san Ysidro Health Center
Website:
Email:

FALLBROOK

FALLBROOK FAMILY HLTH CTR
Provider ID: 183910
1328 S MISSION RD
FALLBROOK, CA 92028-4006
Phone: (760) 451-4720
Fax: (760) 451-4700
After Hours Phone: (760) 451-4720
License number: 080000150
NPI: 1982756086
Accepting New Patients: Yes
Min/Max Age: 0/999
Site English Spoken: Yes

Site Language(s) Spoken: Spanish
Cultural Competency: No
Hours: M-SA 8AM-5PM
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T, WMedical Group/IPA: Ihp-community Health System
Website:
Email:

IMPERIAL BEACH

IMPERIAL BEACH HEALTH CENTER

Provider ID: 179678
949 PALM AVE
IMPERIAL BEACH, CA 91932-1503
Phone: (619) 429-3733
Fax: (619) 628-5550
After Hours Phone: (619) 429-3733
License number: 090000119
NPI: 1790718351
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Cultural Competency: No
Hours: M,TH 8AM-8PM, TU,W,F 8AM-5PM, SA 9AM-5PM
American Sign Language (ASL): No
♿ Accessibility: P, EB, E, R, WMedical Group/IPA: Ihp-imperial Beach Health Center
Website: www.ihpsocal.org
Email:

JULIAN

JULIAN MEDICAL CENTER

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

B. Clínicas de salud federalmente calificadas

Provider ID: 185180
*2721 WASHINGTON ST
JULIAN, CA 92036-9233
Phone:* (760) 765-1223
Fax: (760) 765-1278
After Hours Phone: (760)
765-1223
License number: 080000651
NPI: 1700946969
Accepting New Patients: Yes
Min/Max Age: 0/999
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-SA 9AM-5PM
American Sign Language (ASL):
No
♿ *Accessibility:* WMedical
Group/IPA: Borrego Community
Health Foundtion
Website:
Email:

LA MESA

LA MESA PEDIATRICS
Provider ID: 480827
*8881 FLETCHER PKWY STE
200
LA MESA, CA 91942-3135
Phone:* (619) 464-6434
Fax: (619) 464-5109
After Hours Phone: (619)
464-6434
License number: 550000430
NPI: 1033759311
Accepting New Patients: Yes
Min/Max Age: 0/21
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-SA 9AM-5PM
American Sign Language (ASL):
No
♿ *Accessibility:* WMedical

Group/IPA: Borrego Community
Health Foundtion
Website:
Email:

LAKESIDE

**NEIGHBORHOOD
HEALTHCARE LAKESIDE**
Provider ID: 353843
*10039 VINE ST
LAKESIDE, CA 92040-3120
Phone:* (858) 218-3000
Fax: (360) 462-2744
After Hours Phone: (858)
218-3000
License number: 080000483
NPI: 1932384120
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-F 8AM-5PM, SA
9AM-5PM
American Sign Language (ASL):
No
♿ *Accessibility:* WMedical
Group/IPA: Ihp-neighborhood
Healthcare
Website: www.ihpsocal.org
Email:

LEMON GROVE

**LEMON GROVE FAMILY
HEALTH CENTER**
Provider ID: 419139
*7592 BROADWAY
LEMON GROVE, CA
91945-1604
Phone:* (619) 515-2550
Fax: (619) 825-9577
After Hours Phone: (619)
515-2550

License number: 550001268
NPI: 1427282466
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-F 9AM-5PM, SA
9AM-5PM
American Sign Language (ASL):
No
♿ *Accessibility:* P, EB, IB, E,
T
Medical Group/IPA: Family
Health Centers Of San Diego
Website:
Email:

NATIONAL CITY

**FAMILY HEALTH CTR SD
NATIONAL CITY**
Provider ID: 418930
*1000 EUCLID AVE
NATIONAL CITY, CA
91950-3856
Phone:* (619) 515-2399
Fax: (619) 269-0053
After Hours Phone: (619)
515-2399
License number: 550000465
NPI: 1417409228
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M,W,F 8:30AM-3:30PM,
TU,TH 10:30AM-5:30PM, SA
9AM-5PM
American Sign Language (ASL):
No
♿ *Accessibility:* Medical
Group/IPA: Family Health
Centers Of San Diego
Website: www.fhcsd.org

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B. Clínicas de salud federalmente calificadas

Email:

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270

217 HIGHLAND AVE

NATIONAL CITY, CA

91950-1518

Phone: (619) 434-7308

Fax: (619) 434-7310

After Hours Phone: (619)

434-7308

License number:

NPI: 1053526756

Accepting New Patients: Yes

Min/Max Age: None

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

Hours: M-W,F,SA 9AM-5PM, TH

8AM-2PM

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, R,

WMedical Group/IPA: La

Maestra Family Clinic

Website: www.lamaestra.org

Email:

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270

217 HIGHLAND AVE

NATIONAL CITY, CA

91950-1518

Phone: (619) 434-7308

Fax: (619) 434-7310

After Hours Phone: (619)

434-7308

License number:

NPI: 1336353721

Accepting New Patients: Yes

Min/Max Age: None

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

Hours: M-W,F,SA 9AM-5PM, TH

8AM-2PM

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, R,

WMedical Group/IPA: La

Maestra Family Clinic

Website: www.lamaestra.org

Email:

OPERATION SAMAHAN - NATIONAL C

Provider ID: 417102

2743 HIGHLAND AVE

NATIONAL CITY, CA

91950-7410

Phone: (844) 200-2426

Fax: (619) 474-3919

After Hours Phone: (844)

200-2426

License number: 090000183

NPI: 1801907449

Accepting New Patients: Yes

Min/Max Age: None

Site English Spoken: Yes

Site Language(s) Spoken:

Tagalog, Lao, Spanish

Cultural Competency: No

Hours: M-TH 8AM-6PM, F

8AM-5PM, SA 9AM-5PM

American Sign Language (ASL):

No

♿ Accessibility: WMedical

Group/IPA: Operation Samahan

Website:

www.operationsamahan.org

Email:

OPERATION SAMAHAN GRANGER SCHOOL BASED

Provider ID: 418302

2101 GRANGER AVE

NATIONAL CITY, CA

91950-6208

Phone: (844) 200-2426

Fax: (619) 434-8999

After Hours Phone: (844)

200-2426

License number: 550002622

NPI: 1205134517

Accepting New Patients: Yes

Min/Max Age: None

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

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

9AM-5PM

American Sign Language (ASL):

No

♿ Accessibility: Medical

Group/IPA: Operation Samahan

Website:

www.operationsamahan.org

Email:

SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412

1136 D AVE

NATIONAL CITY, CA

91950-3412

Phone: (619) 662-4100

Fax: (619) 336-2323

After Hours Phone: (619)

662-4100

License number:

NPI: 1003869363

Accepting New Patients: Yes

Min/Max Age: None

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

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

9AM-5PM

American Sign Language (ASL):

No

♿ Accessibility: WMedical

Group/IPA: Ihp-san Ysidro Health

Center

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

B. Clínicas de salud federalmente calificadas

Website: www.ihpsocal.org

Email:

SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418

2400 E 8TH ST STE A
NATIONAL CITY, CA
91950-2956

Phone: (619) 662-4100

Fax: (619) 259-2807

After Hours Phone: (619)

662-4100

License number:

NPI: 1598907487

Accepting New Patients: Yes

Min/Max Age: None

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

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

9AM-5PM

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, R,

T, WMedical Group/IPA: Ihp-san

Ysidro Health Center

Website: www.ihpsocal.org

Email:

SAN YSIDRO HEALTH SOUTH BAY

Provider ID: 361428

330 E 8TH ST
NATIONAL CITY, CA
91950-2312

Phone: (619) 662-4100

Fax: (619) 259-2807

After Hours Phone: (619)

662-4100

License number:

NPI: 1851757215

Accepting New Patients: Yes

Min/Max Age: None

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

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

9AM-5PM

American Sign Language (ASL):

No

♿ Accessibility: WMedical

Group/IPA: Ihp-san Ysidro Health

Center

Website: www.ihpsocal.org

Email:

OCEANSIDE

NCHS MISSION MESA COMMUNITY HEALTH CENTER

Provider ID: 480247

2210 MESA DR STE 300
OCEANSIDE, CA 92054-3701

Phone: (760) 966-3306

Fax: (760) 736-8740

After Hours Phone: (760)

966-3306

License number: 080000531

NPI: 1245246917

Accepting New Patients: Yes

Min/Max Age: None

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

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

8AM-4:30PM

American Sign Language (ASL):

No

♿ Accessibility: Medical

Group/IPA: Ihp-north County

Health Services

Website:

Email:

NORTH COUNTY HEALTH SERVICE-LA MISSION

Provider ID: 480315

3220 MISSION AVE STE 1

OCEANSIDE, CA 92058-1354

Phone: (760) 433-3155

Fax: (760) 736-8740

After Hours Phone: (760)

433-3155

License number: 080000240

NPI: 1245246917

Accepting New Patients: Yes

Min/Max Age: None

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

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

9AM-5PM

American Sign Language (ASL):

No

♿ Accessibility: Medical

Group/IPA: Ihp-north County

Health Services

Website:

Email:

OCEANSIDE-CARLSBAD COMMUNITY CLINIC

Provider ID: 296476

605 CROUCH ST BLDG C
OCEANSIDE, CA 92054-4415

Phone: (760) 757-4566

Fax: (760) 736-8740

After Hours Phone: (760)

757-4566

License number:

NPI: 1245246917

Accepting New Patients: Yes

Min/Max Age: None

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

Cultural Competency: No

Hours: M-SA 8AM-5PM

American Sign Language (ASL):

No

♿ Accessibility: WMedical

Group/IPA: Ihp-north County

Health Services

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

B. Clínicas de salud federalmente calificadas

Website: www.ihpsocal.org

Email:

VISTA COMMUNITY CLINIC

Provider ID: 206341

4700 N RIVER RD

OCEANSIDE, CA 92057-6043

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

License number: 080000002

NPI: 1316501562

Accepting New Patients: Yes

Min/Max Age: 0/999

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

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

9AM-4PM

American Sign Language (ASL):

No

♿ Accessibility: WMedical

Group/IPA: Ihp-vista Community
Clinic

Website:

www.vistacommunityclinic.org

Email:

VISTA COMMUNITY CLINIC

Provider ID: 206341

4700 N RIVER RD

OCEANSIDE, CA 92057-6043

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

License number: 080000002

NPI: 1851300123

Accepting New Patients: Yes

Min/Max Age: 0/999

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

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

9AM-4PM

American Sign Language (ASL):

No

♿ Accessibility: WMedical

Group/IPA: Ihp-vista Community
Clinic

Website:

www.vistacommunityclinic.org

Email:

VISTA COMMUNITY CLINIC

HORNE STREET

Provider ID: 402436

517 N HORNE ST

OCEANSIDE, CA 92054-2518

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)

631-5000

License number: 080000745

NPI: 1437245412

Accepting New Patients: Yes

Min/Max Age: 0/999

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

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

9AM-4PM

American Sign Language (ASL):

No

♿ Accessibility: WMedical

Group/IPA: Ihp-vista Community
Clinic

Website:

Email:

VISTA COMMUNITY CLINIC

PIER VIEW WAY

Provider ID: 402434

818 PIER VIEW WAY

OCEANSIDE, CA 92054-2803

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)

631-5000

License number: 080000510

NPI: 1649363375

Accepting New Patients: Yes

Min/Max Age: 0/999

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

Hours: M,TU,TH,F 8AM-5PM, W

8AM-7PM, SA 9AM-4PM

American Sign Language (ASL):

No

♿ Accessibility: WMedical

Group/IPA: Ihp-vista Community
Clinic

Website: www.ihpsocal.org

Email:

POWAY

NEIGHBORHOOD

HEALTHCARE GOLD FAMILY

HEALTH CENTER

Provider ID: 481187

13010 POWAY RD

POWAY, CA 92064

Phone: (858) 218-3000

Fax: (360) 462-2742

After Hours Phone: (858)

218-3000

License number: 550004321

NPI: 1023518768

Accepting New Patients: Yes

Min/Max Age: None

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

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

9AM-5PM

American Sign Language (ASL):

No

♿ Accessibility: Medical

Group/IPA: Ihp-neighborhood
Healthcare

Website:

Email:

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

B. Clínicas de salud federalmente calificadas

PAUMA VALLEY

NEIGHBORHOOD HEALTHCARE PAUMA VALLEY

Provider ID: 206267
16650 HIGHWAY 76
PAUMA VALLEY, CA
92061-9524
Phone: (760) 742-9919
Fax: (858) 633-4696
After Hours Phone: (760)
742-9919
License number: 080000611
NPI: 1407031693

Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-F 8AM-4:30PM, SA
9AM-5PM
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
T, W Medical Group/IPA:
Ihp-neighborhood Healthcare
Website: www.ihpsocal.org
Email:

RAMONA

NORTH COUNTY HEALTH SERVICES RAMONA

Provider ID: 449438
220 ROTANZI ST
RAMONA, CA 92065-2583
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760)
736-6767
License number:
NPI: 1245246917
Accepting New Patients: Yes

Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-F 8AM-5PM, SA
8AM-12PM
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E,
R Medical Group/IPA: Ihp-north
County Health Services
Website: www.ihpsocal.org
Email:

SAN DIEGO

CITY HEIGHTS FAMILY HEALTH CENTERS INC

Provider ID: 206353
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax: (619) 546-9800
After Hours Phone: (619)
515-2400

License number:
NPI: 1023054004
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Vietnamese
Cultural Competency: No
Hours: M-SA 9AM-5PM
American Sign Language (ASL):
No
♿ Accessibility: ME Medical
Group/IPA: Family Health
Centers Of San Diego
Website: www.fhcsd.org
Email:

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2560
Fax: (619) 263-2499
After Hours Phone: (619)
515-2560
License number:
NPI: 1982747671
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-SA 9AM-5PM
American Sign Language (ASL):
No
♿ Accessibility: ME Medical
Group/IPA: Family Health
Centers Of San Diego
Website: www.fhcsd.org
Email:

DOWNTOWN FAMILY CTR AT CONNECTIONS

Provider ID: 417782
1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
Phone: (619) 515-2430
Fax: (619) 578-2410
After Hours Phone: (619)
515-2430
License number: 550002251
NPI: 1588901045
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-F 8AM-5PM, SA
9AM-5PM
American Sign Language (ASL):
No
♿ Accessibility: Medical
Group/IPA: Family Health
Centers Of San Diego

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B. Clínicas de salud federalmente calificadas

Website: www.fhcsd.org

Email:

FAMILY HEALTH CTR IBARRA

Provider ID: 417987

4874 POLK AVE

SAN DIEGO, CA 92105-2026

Phone: (619) 515-2426

Fax: (619) 255-8002

After Hours Phone: (619)

515-2426

License number: 550003108

NPI: 1477953933

Accepting New Patients: Yes

Min/Max Age: None

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

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

9AM-5PM

American Sign Language (ASL):

No

♿ Accessibility: Medical

Group/IPA: Family Health

Centers Of San Diego

Website: www.fhcsd.org

Email:

FAMILY HEALTH CTR IBARRA

Provider ID: 417987

4874 POLK AVE

SAN DIEGO, CA 92105-2026

Phone: (619) 515-2426

Fax: (619) 255-8002

After Hours Phone: (619)

515-2426

License number: 550003108

NPI: 1841476553

Accepting New Patients: Yes

Min/Max Age: None

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

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

9AM-5PM

American Sign Language (ASL):

No

♿ Accessibility: Medical

Group/IPA: Family Health

Centers Of San Diego

Website: www.fhcsd.org

Email:

FAMILY HEALTH CTR OF SD-ELM ST

Provider ID: 419167

140 ELM ST

SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520

Fax: (619) 231-0431

After Hours Phone: (619)

515-2520

License number: 550002061

NPI: 1316419070

Accepting New Patients: Yes

Min/Max Age: None

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

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

9AM-5PM

American Sign Language (ASL):

No

♿ Accessibility: IB, E, RMedical

Group/IPA: Family Health

Centers Of San Diego

Website: www.fhcsd.org

Email:

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

Provider ID: 418142

5160 FEDERAL BLVD

SAN DIEGO, CA 92105-5429

Phone: (619) 515-2454

Fax: (619) 794-2696

After Hours Phone: (619)

515-2454

License number: 550003556

NPI: 1336525906

Accepting New Patients: Yes

Min/Max Age: None

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

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

9AM-5PM

American Sign Language (ASL):

No

♿ Accessibility: Medical

Group/IPA: Family Health

Centers Of San Diego

Website: www.fhcsd.org

Email:

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529

2325 COMMERCIAL ST STE

1400

SAN DIEGO, CA 92113-1195

Phone: (619) 515-2422

Fax: (619) 269-0053

After Hours Phone: (619)

515-2422

License number: 550003113

NPI: 1235521782

Accepting New Patients: Yes

Min/Max Age: None

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

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

9AM-5PM

American Sign Language (ASL):

No

♿ Accessibility: Medical

Group/IPA: Family Health

Centers Of San Diego

Website: www.fhcsd.org

Email:

FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE

Provider ID: 417429

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B. Clínicas de salud federalmente calificadas

1550 BROADWAY # 2
SAN DIEGO, CA 92101-5713
Phone: (619) 515-2525
Fax: (619) 501-5814
After Hours Phone: (619) 515-2525
License number: 550002865
NPI: 1952729303
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM
American Sign Language (ASL): No
♿ Accessibility: Medical Group/IPA: Family Health Centers Of San Diego
Website: www.fhcsd.org
Email:

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2444
Fax: (858) 488-1394
After Hours Phone: (619) 515-2444
License number: 080000115
NPI: 1386689701
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-W,F 8:30AM-5:30PM, TH 9AM-6PM, SA 9AM-5PM
American Sign Language (ASL): No
♿ Accessibility: Medical Group/IPA: Family Health

Centers Of San Diego
Website: www.fhcsd.org
Email:

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax: (619) 501-9645
After Hours Phone: (619) 515-2545
License number: 550003099
NPI: 1629456900
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM
American Sign Language (ASL): No
♿ Accessibility: Medical Group/IPA: Family Health Centers Of San Diego
Website: www.fhcsd.org
Email:

KING CHAVEZ HEALTH CENTER

Provider ID: 451167
950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100
Fax: (619) 662-4158
After Hours Phone: (619) 662-4100
License number:
NPI: 1538262092
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:

Cultural Competency: No
Hours: M-F 8AM-5PM, SA 8AM-4PM
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T, W
Medical Group/IPA: Ihp-san Ysidro Health Center
Website: www.ihpsocal.org
Email:

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608
Phone: (619) 255-9155
Fax: (619) 795-9849
After Hours Phone: (619) 255-9155
License number:
NPI: 1053526756
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-F 8AM-5PM, SA 9AM-5PM
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, W
Medical Group/IPA: La Maestra Family Clinic
Website: www.lamaestra.org
Email:

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

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B. Clínicas de salud federalmente calificadas

Phone: (619) 255-9155
Fax: (619) 795-9849
After Hours Phone: (619)
255-9155

License number:

NPI: 1336353721

Accepting New Patients: Yes

Min/Max Age: None

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

Hours: M-F 8AM-5PM, SA
9AM-5PM

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E,

WMedical Group/IPA: La

Maestra Family Clinic

Website: www.lamaestra.org

Email:

LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

6973 LINDA VISTA RD

SAN DIEGO, CA 92111-6342

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858)
279-0925

License number:

NPI: 1780665877

Accepting New Patients: Yes

Min/Max Age: None

Site English Spoken: Yes

Site Language(s) Spoken:

Vietnamese, Spanish, Chinese,
Lithuanian

Cultural Competency: No

Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,

T, WMedical Group/IPA: lhp-san

Diego Family Care

Website: www.sdfamilycare.org

Email:

LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

6973 LINDA VISTA RD

SAN DIEGO, CA 92111-6342

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858)
279-0925

License number:

NPI: 1609905215

Accepting New Patients: Yes

Min/Max Age: None

Site English Spoken: Yes

Site Language(s) Spoken:

Vietnamese, Spanish, Chinese,
Lithuanian

Cultural Competency: No

Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,

T, WMedical Group/IPA: lhp-san
Diego Family Care

Website: www.sdfamilycare.org

Email:

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax: (619) 234-2447

After Hours Phone: (619)
515-2300

License number:

NPI: 1447281936

Accepting New Patients: Yes

Min/Max Age: None

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

Hours: M-SA 9AM-5PM

American Sign Language (ASL):
No

♿ Accessibility: MEMedical

Group/IPA: Family Health

Centers Of San Diego

Website: www.fhcsd.org

Email:

MID-CITY COMMUNITY CLINIC

Provider ID: 233532

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105-1690

Phone: (619) 280-2058

Fax: (858) 633-4682

After Hours Phone: (619)
280-2058

License number:

NPI: 1962483040

Accepting New Patients: Yes

Min/Max Age: 0/22

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

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

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E,

WMedical Group/IPA: lhp-san

Diego Family Care

Website: www.sdfamilycare.org

Email:

MID-CITY COMMUNITY CLINIC

Provider ID: 233597

4290 POLK AVE

SAN DIEGO, CA 92105-1524

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B. Clínicas de salud federalmente calificadas

Phone: (619) 563-0507
Fax: (858) 633-4681
After Hours Phone: (619) 563-0507
License number:
NPI: 1962483040
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-F 8AM-5PM, SA 8AM-2PM
American Sign Language (ASL): No
♿ Accessibility: WMedical
Group/IPA: lhp-san Diego Family Care
Website: www.sdfamilycare.org
Email:

NESTOR COMMUNITY HEALTH CENTER

Provider ID: 214492
1016 OUTER RD
SAN DIEGO, CA 92154-1351
Phone: (619) 429-3733
Fax: (619) 628-5550
After Hours Phone: (619) 429-3733
License number: 550001474
NPI: 1215246996
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Cultural Competency: No
Hours: M,F 8AM-5PM, TU-TH 8AM-8PM, SA 9AM-5PM
American Sign Language (ASL): No
♿ Accessibility: P, IB, E, R, T, WMedical
Group/IPA: lhp-imperial Beach Health Center

Website:
Email:
NORTH PARK FAMILY HEALTH CENTERS
Provider ID: 206362
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 501-0627
After Hours Phone: (619) 515-2424
License number:
NPI: 1700821303
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-SA 9AM-5PM
American Sign Language (ASL): No
♿ Accessibility: MEMedical
Group/IPA: Family Health Centers Of San Diego
Website: www.fhcsd.org
Email:

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831
3514 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 683-7586
After Hours Phone: (619) 515-2424
License number: 090000469
NPI: 1700821303
Accepting New Patients: Yes
Min/Max Age: 0/18
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-TH 8AM-5PM, F,SA

9AM-5PM
American Sign Language (ASL): No
♿ Accessibility: MEMedical
Group/IPA: Family Health Centers Of San Diego
Website: www.fhcsd.org
Email:

OPERATION SAMAHAN - MIRA MESA

Provider ID: 417101
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126-2375
Phone: (844) 200-2426
Fax: (858) 578-4417
After Hours Phone: (844) 200-2426
License number: 080000146
NPI: 1871680397
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Tagalog
Cultural Competency: No
Hours: M-F 8AM-4:30PM, SA 9AM-5PM
American Sign Language (ASL): No
♿ Accessibility: WMedical
Group/IPA: Operation Samahan
Website: www.operationsamahan.org
Email:

OPERATION SAMAHAN - MIRA MESA

Provider ID: 432308
9855 ERMA RD STE 105
SAN DIEGO, CA 92131-1007
Phone: (844) 200-2426
Fax: (858) 536-8034
After Hours Phone: (844) 200-2426

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B. Clínicas de salud federalmente calificadas

License number: 080000146
NPI: 1861933897
Accepting New Patients: No
Min/Max Age: 0/999
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-SA 9AM-5PM
American Sign Language (ASL):
No
♿ Accessibility: Medical
Group/IPA: Operation Samahan
Website:
www.operationsamahan.org
Email:

OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535
9995 CARMEL MOUNTAIN RD
STE B10 AND B11
SAN DIEGO, CA 92129-2889
Phone: (844) 200-2426
Fax: (858) 695-9074
After Hours Phone: (844)
200-2426
License number: 550002478
NPI: 1699216622
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M,TU,TH,F
8:30AM-5:30PM, W 10AM-7PM,
SA 9AM-5PM
American Sign Language (ASL):
No
♿ Accessibility: Medical
Group/IPA: Operation Samahan
Website:
www.operationsamahan.org
Email:

OPERATION SAMAHAN

RANCHO PENASQUITOS
Provider ID: 418535
9995 CARMEL MOUNTAIN RD
STE B10 AND B11
SAN DIEGO, CA 92129-2889
Phone: (844) 200-2426
Fax: (858) 695-9074
After Hours Phone: (844)
200-2426
License number: 550003857
NPI: 1699216622
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M,TU,TH,F
8:30AM-5:30PM, W 10AM-7PM,
SA 9AM-5PM
American Sign Language (ASL):
No
♿ Accessibility: Medical
Group/IPA: Operation Samahan
Website:
www.operationsamahan.org
Email:

SAN DIEGO AMERICAN INDIAN HEALTH CENTER

Provider ID: 207382
2630 1ST AVE
SAN DIEGO, CA 92103-6599
Phone: (619) 234-2158
Fax: (619) 234-0505
After Hours Phone: (619)
234-2158
License number: 090000168
NPI: 1003902917
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Korean
Cultural Competency: No
Hours: M-F 8AM-5PM, SA

9AM-5PM
American Sign Language (ASL):
No
♿ Accessibility: WMedical
Group/IPA: Ihp-san Diego
American Indian Health Center
Website: www.sdaihc.org
Email:

SAN DIEGO FAMILY CARE

Provider ID: 482070
7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858)
279-0925
License number:
NPI: 1457724858
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Lithuanian, Vietnamese,
Spanish, Chinese
Cultural Competency: No
Hours: M,W-F 8:30AM-5:30PM,
TU 8:30AM-8:30PM, SA
9AM-4PM
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
WMedical Group/IPA: Ihp-san
Diego Family Care
Website: www.sdfamilycare.org
Email:

SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE

Provider ID: 517403
316 25TH ST
SAN DIEGO, CA 92102-3016

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B. Clínicas de salud federalmente calificadas

Phone: (619) 238-5551
Fax: (619) 238-3807
After Hours Phone: (619) 238-5551
License number:
NPI: 1598308926
Accepting New Patients: Yes
Min/Max Age: 0/120
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-F 8AM-5PM, SA 9AM-5PM
American Sign Language (ASL): No
♿ Accessibility: Medical
Group/IPA: Ihp-san Ysidro Health Center
Website:
Email:

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432
Phone: (619) 662-4100
Fax: (619) 595-0258
After Hours Phone: (619) 662-4100
License number:
NPI: 1326225632
Accepting New Patients: No
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-F 8AM-5PM, SA 9AM-5PM
American Sign Language (ASL): No
♿ Accessibility: WMedical
Group/IPA: Ihp-san Ysidro Health Center
Website: www.ihpsocal.org

Email:
SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED
Provider ID: 517998
4690 EL CAJON BLVD
SAN DIEGO, CA 92115-4403
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
License number: 550003882
NPI: 1205477841
Accepting New Patients: Yes
Min/Max Age: 0/120
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-SA 9AM-5PM
American Sign Language (ASL): No
♿ Accessibility: Medical
Group/IPA: Ihp-san Ysidro Health Center
Website:
Email:

SHERMAN HEIGHTS FAMILY HLTH CTRS INC

Provider ID: 356145
2391 ISLAND AVE
SAN DIEGO, CA 92102-2941
Phone: (619) 515-2435
Fax: (619) 515-2435
After Hours Phone: (619) 515-2435
License number:
NPI: 1174549232
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-SA 9AM-5PM

American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T, MEMedical Group/IPA: Family Health Centers Of San Diego
Website:
Email:

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583
1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638
Phone: (619) 233-8500
Fax: (619) 687-1067
After Hours Phone: (619) 233-8500
License number: 090000297
NPI: 1598122871
Accepting New Patients: No
Min/Max Age: 0/999
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-F 8AM-5:30PM, SA 9AM-5PM
American Sign Language (ASL): No
♿ Accessibility: Medical
Group/IPA: Ihp-st Vincent De Paul Villa
Website:
Email:

SAN MARCOS

NORTH COUNTY HEALTH SERVICES SAN MARCOS

Provider ID: 206426
150 VALPREDA RD
SAN MARCOS, CA 92069-2973

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

B. Clínicas de salud federalmente calificadas

Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760)
736-6767

License number:

NPI: 1245246917

Accepting New Patients: Yes

Min/Max Age: None

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

Hours: M-SA 8AM-5PM

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, R,

T, WMedical Group/IPA:

Ihp-north County Health Services

Website: www.ihpsocal.org

Email:

SAN YSIDRO

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

4050 BEYER BLVD

SAN YSIDRO, CA 92173-2007

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)

662-4100

License number:

NPI: 1952364747

Accepting New Patients: Yes

Min/Max Age: None

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

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

9AM-5PM

American Sign Language (ASL):

No

♿ Accessibility: WMedical

Group/IPA: Ihp-san Ysidro Health

Center

Website: www.ihpsocal.org

Email:

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

4004 BEYER BLVD

SAN YSIDRO, CA 92173-2007

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)

662-4100

License number:

NPI: 1952364747

Accepting New Patients: Yes

Min/Max Age: None

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

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

8:30AM-2PM

American Sign Language (ASL):

No

♿ Accessibility: Medical

Group/IPA: Ihp-san Ysidro Health

Center

Website: www.ihpsocal.org

Email:

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

3364 BEYER BLVD

SAN YSIDRO, CA 92173-1322

Phone: (619) 662-4100

Fax: (619) 600-4870

After Hours Phone: (619)

662-4100

License number:

NPI:

Accepting New Patients: Yes

Min/Max Age: None

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

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

9AM-5PM

American Sign Language (ASL):

No

♿ Accessibility: WMedical

Group/IPA: Ihp-san Ysidro Health

Center

Website: www.ihpsocal.org

Email:

SPRING VALLEY

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

8788 JAMACHA RD

SPRING VALLEY, CA

91977-4035

Phone: (619) 515-2555

Fax: (619) 462-5584

After Hours Phone: (619)

515-2555

License number:

NPI: 1508801069

Accepting New Patients: Yes

Min/Max Age: None

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

Hours: M-SA 9AM-5PM

American Sign Language (ASL):

No

♿ Accessibility: MEMedical

Group/IPA: Family Health

Centers Of San Diego

Website: www.fhcsd.org

Email:

VISTA

VCC DURIAN

Provider ID: 411518

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

B. Clínicas de salud federalmente calificadas

105 DURIAN ST STE A
VISTA, CA 92083-6206
Phone: (844) 308-5003
Fax: (760) 414-3892
After Hours Phone: (844)
308-5003
License number: 080000328
NPI: 1851300123
Accepting New Patients: Yes
Min/Max Age: 0/999
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-F 8:30AM-5PM, SA
9AM-5PM
American Sign Language (ASL):
No
♿ Accessibility: Medical
Group/IPA: Ihp-vista Community
Clinic
Website:
Email:

VCC DURIAN

Provider ID: 411518
105 DURIAN ST STE A
VISTA, CA 92083-6206
Phone: (844) 308-5003
Fax: (760) 414-3892
After Hours Phone: (844)
308-5003
License number: 1851300123
NPI: 1851300123
Accepting New Patients: Yes
Min/Max Age: 0/999
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-F 8:30AM-5PM, SA
9AM-5PM
American Sign Language (ASL):
No
♿ Accessibility: Medical
Group/IPA: Ihp-vista Community
Clinic

Website:
Email:
VISTA COMMUNITY CLINIC
Provider ID: 206338
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
License number: 080000002
NPI: 1851300123
Accepting New Patients: Yes
Min/Max Age: 0/999
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-TH 8AM-8PM, F
8AM-5PM, SA 9AM-4PM
American Sign Language (ASL):
No
♿ Accessibility: WMedical
Group/IPA: Ihp-vista Community
Clinic
Website:
www.vistacommunityclinic.org
Email:

VISTA COMMUNITY CLINIC

Provider ID: 206338
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
License number: 080000002
NPI: 1316501562
Accepting New Patients: Yes
Min/Max Age: 0/999
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-TH 8AM-8PM, F

8AM-5PM, SA 9AM-4PM
American Sign Language (ASL):
No
♿ Accessibility: WMedical
Group/IPA: Ihp-vista Community
Clinic
Website:
www.vistacommunityclinic.org
Email:

VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339
134 GRAPEVINE RD
VISTA, CA 92083-4004
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
License number: 080000328
NPI: 1851300123
Accepting New Patients: Yes
Min/Max Age: 0/999
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M,W-F 8AM-5PM, TU
10:30AM-7:30PM, SA 9AM-5PM
American Sign Language (ASL):
No
♿ Accessibility: WMedical
Group/IPA: Ihp-vista Community
Clinic
Website:
Email:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

ALPINE <hr/> CERTIFIED NURSE PRACTITIONER	CENTER 1620 ALPINE BLVD STE 110 ALPINE, CA 91901-1103 <i>Phone:</i> (619) 662-4100 <i>Fax:</i> <i>After Hours Phone:</i> (619) 662-4100 <i>Website:</i> www.mtnhealth.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM	<i>☯ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM DUBE, BIANCA P <i>Provider ID:</i> 517802 <i>Provider Gender:</i> Female <i>License number:</i> C172036 <i>NPI:</i> 1740535152 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No IHP-SAN YSIDRO HEALTH CENTER 1620 ALPINE BLVD STE 110 ALPINE, CA 91901-1103 <i>Phone:</i> (619) 662-4100 <i>Fax:</i> <i>After Hours Phone:</i> (619) 662-4100 <i>Website:</i> www.mtnhealth.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM
KAHL, NICHOLAS D <i>Provider ID:</i> 517802 <i>Provider Gender:</i> Male <i>License number:</i> NP95006360 <i>NPI:</i> 1821306598 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No IHP-SAN YSIDRO HEALTH CENTER 1620 ALPINE BLVD STE 110 ALPINE, CA 91901-1103 <i>Phone:</i> (619) 662-4100 <i>Fax:</i> <i>After Hours Phone:</i> (619) 662-4100 <i>Website:</i> www.mtnhealth.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM	<hr/> FAMILY PRACTICE BAUTISTA, LUIS G <i>Provider ID:</i> 517802 <i>Provider Gender:</i> Male <i>License number:</i> A97270 <i>NPI:</i> 1295712206 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Fresno Community Hospital, St Agnes Medical Center <i>Board Certified Specialty:</i> No IHP-SAN YSIDRO HEALTH CENTER 1620 ALPINE BLVD STE 110 ALPINE, CA 91901-1103 <i>Phone:</i> (619) 662-4100 <i>Fax:</i> <i>After Hours Phone:</i> (619) 662-4100 <i>Website:</i> www.mtnhealth.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No	ST CLAIR BROWN, TANEN T <i>Provider ID:</i> 517802 <i>Provider Gender:</i> Female <i>License number:</i> 20A17296 <i>NPI:</i> 1487040739 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No IHP-SAN YSIDRO HEALTH CENTER 1620 ALPINE BLVD STE 110 ALPINE, CA 91901-1103
TODD, MIKAYLA S <i>Provider ID:</i> 517802 <i>Provider Gender:</i> Female <i>License number:</i> NP95005999 <i>NPI:</i> 1316478092 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No IHP-SAN YSIDRO HEALTH	<i>Hours:</i> M-SA 9AM-5PM	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Phone: (619) 445-6200
 Fax:
 After Hours Phone: (619) 445-6200
 Website: www.mtnhealth.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM

FQHC

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE,

Provider ID: 517802
 Provider Gender:
 License number: 090000681
 NPI: 1770124315
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty:
 IHP-SAN YSIDRO HEALTH CENTER
 1620 ALPINE BLVD STE 110
 ALPINE, CA 91901-1103
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619) 662-4100
 Website: www.mtnhealth.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM

SAN YSIDRO HEALTH ALPINE PEDIATRICS MED CLINIC,

Provider ID: 541825
 Provider Gender:
 License number: 550002514
 NPI: 1770178444
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty:
 IHP-SAN YSIDRO HEALTH CENTER
 2733 ALPINE BLVD STE 200
 ALPINE, CA 91901-2253
 Phone: (619) 445-5664
 Fax: (619) 445-3531
 After Hours Phone: (619) 445-5664
 Website: www.syhealth.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 ♿ Accessibility: EB, IB, W
 Hours: M-F 8AM-5PM, SA 9AM-5PM

INTERNAL MEDICINE

MUELLER, LAUREL A

Provider ID: 517802
 Provider Gender: Female
 License number: 20A18030
 NPI: 1639601172
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 1620 ALPINE BLVD STE 110
 ALPINE, CA 91901-1103

Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619) 662-4100
 Website: www.mtnhealth.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM

PEDIATRICS

STENSMAN, LARS M

Provider ID: 517802
 Provider Gender: Male
 License number: A158569
 NPI: 1659638062
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Danish
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 1620 ALPINE BLVD STE 110
 ALPINE, CA 91901-1103
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619) 662-4100
 Website: www.mtnhealth.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM

STENSMAN, LARS M

Provider ID: 541825

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C. Directorio de proveedores de atención primaria

Provider Gender: Male
License number: A158569
NPI: 1659638062
Provider English Spoken: Yes
Provider Language(s) Spoken: Danish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
2733 ALPINE BLVD STE 200
ALPINE, CA 91901-2253
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility: EB, IB, W
Hours: M-F 8AM-5PM, SA 9AM-5PM

PHYSICIANS ASSISTANT

BAISLEY, SHAWN M

Provider ID: 517802
Provider Gender: Male
License number: PA52347
NPI: 1376936120
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
1620 ALPINE BLVD STE 110
ALPINE, CA 91901-1103

Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.mtnhealth.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM

SHARPE, NORMA A

Provider ID: 517802
Provider Gender: Female
License number: PA20490
NPI: 1619100237
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
1620 ALPINE BLVD STE 110
ALPINE, CA 91901-1103
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.mtnhealth.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM

BORREGO SPRINGS

CARDIOVASCULAR DISEASE

SCHWARTZ, JOSEPH A

Provider ID: 185179
Provider Gender: Male
License number: A36637
NPI: 1295747038
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Long Beach Memorial Med Ctr, Providence St Mary Medical Center
Board Certified Specialty: No
BORREGO COMMUNITY HEALTH FOUNDTION
4343 YAQUI PASS RD
BORREGO SPRINGS, CA 92004
Phone: (760) 767-5051
Fax: (760) 767-4552
After Hours Phone: (760) 767-5051
Website: n
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM

DERMATOLOGY

GREENWAY, HUBERT T

Provider ID: 185179
Provider Gender: Male
License number: C39104
NPI: 1366419004
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Green Hospital
Board Certified Specialty: No
BORREGO COMMUNITY

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

HEALTH FOUNDTION
4343 YAQUI PASS RD
BORREGO SPRINGS, CA
92004

Phone: (760) 767-5051

Fax:

After Hours Phone: (760)
767-5051

Website: n

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA
9AM-5PM

ZELAC, DANIEL E

Provider ID: 185179

Provider Gender: Male

License number: G85319

NPI: 1891709903

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Rady

Childrens Hospital San Diego,

Scripps Green Hospital

Board Certified Specialty: No

BORREGO COMMUNITY

HEALTH FOUNDTION

4343 YAQUI PASS RD

BORREGO SPRINGS, CA

92004

Phone: (760) 767-5051

Fax: (760) 767-4552

After Hours Phone: (760)

767-5051

Website: n

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA
9AM-5PM

FQHC

BORREGO MEDICAL CLINIC,

Provider ID: 185179

Provider Gender:

License number: 080000651

NPI: 1134144165

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty:

BORREGO COMMUNITY

HEALTH FOUNDTION

4343 YAQUI PASS RD

BORREGO SPRINGS, CA

92004

Phone: (760) 767-5051

Fax: (760) 767-4552

After Hours Phone: (760)

767-5051

Website: n

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA
9AM-5PM

GENERAL PRACTICE

HUOT, JAMES M

Provider ID: 185179

Provider Gender: Male

License number: G83499

NPI: 1033122296

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

BORREGO COMMUNITY

HEALTH FOUNDTION

4343 YAQUI PASS RD

BORREGO SPRINGS, CA

92004

Phone: (760) 767-5051

Fax: (760) 767-4552

After Hours Phone: (760)

767-5051

Website: n

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA
9AM-5PM

SURGERY COLON SURGERY

GOETZ, LAURA H

Provider ID: 185179

Provider Gender: Female

License number: A86535

NPI: 1710941729

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps

Green Hospital, Scripps

Memorial Hospital Encinitas

Board Certified Specialty: No

BORREGO COMMUNITY

HEALTH FOUNDTION

4343 YAQUI PASS RD

BORREGO SPRINGS, CA

92004

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Phone: (760) 767-5051

Fax:

After Hours Phone: (760)
767-5051

Website: n

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA
9AM-5PM

CAMPO

FAMILY PRACTICE

KAUFHOLD, ANNE D

Provider ID: 519686

Provider Gender: Female

License number: A88893

NPI: 1164508073

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital Chula Vista

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH

CENTER

1388 BUCKMAN SPRINGS RD

CAMPO, CA 91906-2028

Phone: (619) 445-6200

Fax:

After Hours Phone: (619)

445-6200

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/120

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

ROGERS, MATTHEW W

Provider ID: 519686

Provider Gender: Male

License number: 20A18400

NPI: 1639606130

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH
CENTER

1388 BUCKMAN SPRINGS RD

CAMPO, CA 91906-2028

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/120

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

ST CLAIR BROWN, TANEN T

Provider ID: 519686

Provider Gender: Female

License number: 20A17296

NPI: 1487040739

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH

CENTER

1388 BUCKMAN SPRINGS RD

CAMPO, CA 91906-2028

Phone: (619) 445-6200

Fax:

After Hours Phone: (619)
445-6200

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/120

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

FQHC

SAN YSIDRO HEALTH MOUNTAIN HEALTH FAMILY MEDICINE,

Provider ID: 519686

Provider Gender:

License number: 090000660

NPI: 1174164719

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty:

IHP-SAN YSIDRO HEALTH

CENTER

1388 BUCKMAN SPRINGS RD

CAMPO, CA 91906-2028

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/120

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

PHYSICIANS ASSISTANT

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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C. Directorio de proveedores de atención primaria

SHARPE, NORMA A

Provider ID: 519686
 Provider Gender: Female
 License number: PA20490
 NPI: 1619100237
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 1388 BUCKMAN SPRINGS RD
 CAMPO, CA 91906-2028
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619)
 662-4100
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/120
 American Sign Language (ASL):
 No
 Accessability:
 Hours: M-SA 9AM-5PM

CARLSBAD

FAMILY PRACTICE

RAHNAMAYI, BAHAR

Provider ID: 550239
 Provider Gender: Female
 License number: A113410
 NPI: 1255561122
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Farsi
 Cultural Competency: No
 Hospital Affiliation: Scripps
 Memorial Hospital
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC

1905 CALLE BARCELONA STE
 211
 CARLSBAD, CA 92009-8452
 Phone: (858) 799-0933
 Fax: (858) 795-1195
 After Hours Phone: (858)
 799-0933
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessability:
 Hours: M-SA 9AM-5PM

WALKER, SHAYNA T

Provider ID: 480120
 Provider Gender: Female
 License number: A107393
 NPI: 1760688295
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps
 Memorial Hospital Encinitas
 Board Certified Specialty: No
 IHP-NORTH COUNTY HEALTH
 SERVICES
 1295 CARLSBAD VILLAGE DR
 # 100
 CARLSBAD, CA 92008-1950
 Phone: (760) 720-7766
 Fax:
 After Hours Phone: (760)
 720-7766
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessability:
 Hours: M-F 8AM-5PM, SA
 8AM-2PM

FQHC

NCHS CARLSBAD FAMILY MEDICINE,

Provider ID: 480120
 Provider Gender:
 License number: 080000630
 NPI: 1245246917
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty:
 IHP-NORTH COUNTY HEALTH
 SERVICES
 1295 CARLSBAD VILLAGE DR
 # 100
 CARLSBAD, CA 92008-1950
 Phone: (760) 720-7766
 Fax: (760) 720-7204
 After Hours Phone: (760)
 720-7766
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessability:
 Hours: M-F 8AM-5PM, SA
 8AM-2PM

INTERNAL MEDICINE

JEFFERIS, LAUREN R

Provider ID: 480120
 Provider Gender: Female
 License number: A80674
 NPI: 1346354776
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No

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C. Directorio de proveedores de atención primaria

IHP-NORTH COUNTY HEALTH SERVICES
1295 CARLSBAD VILLAGE DR
100

CARLSBAD, CA 92008-1950
Phone: (760) 720-7766

Fax:

After Hours Phone: (760)

720-7766

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

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

8AM-2PM

PONIACHIK, SAMUEL I

Provider ID: 480120

Provider Gender: Male

License number: G74757

NPI: 1467485078

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-NORTH COUNTY HEALTH

SERVICES

1295 CARLSBAD VILLAGE DR

100

CARLSBAD, CA 92008-1950

Phone: (760) 720-7766

Fax:

After Hours Phone: (760)

720-7766

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

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

8AM-2PM

OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE E

Provider ID: 480120

Provider Gender: Female

License number: A93248

NPI: 1174703680

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Tri City

Medical Ctr

Board Certified Specialty: No

IHP-NORTH COUNTY HEALTH

SERVICES

1295 CARLSBAD VILLAGE DR

100

CARLSBAD, CA 92008-1950

Phone: (760) 720-7766

Fax:

After Hours Phone: (760)

720-7766

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

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

8AM-2PM

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital Encinitas,

Sharp Memorial Hospital, Scripps

Memorial Hospital

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

3257 CAMINO DE LOS

COCHES STE 202

CARLSBAD, CA 92009-8915

Phone: (760) 633-3640

Fax: (760) 633-3644

After Hours Phone: (760)

633-3640

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

GRANT, COLETTE L

Provider ID: 433808

Provider Gender: Female

License number: G65865

NPI: 1073638680

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Southwest Healthcare System

Wildomar, Southwest Healthcare

System Murrieta

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

3257 CAMINO DE LOS

COCHES STE 202

CARLSBAD, CA 92009-8915

PEDIATRICS

BURGAMY, ELIZABETH B

Provider ID: 326275

Provider Gender: Female

License number: A99859

NPI: 1164609558

Provider English Spoken: Yes

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C. Directorio de proveedores de atención primaria

Phone: (760) 633-3640

Fax:

After Hours Phone: (760)
633-3640

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

IYENGAR, RADHA A

Provider ID: 480120

Provider Gender: Female

License number: A49273

NPI: 1265448112

Provider English Spoken: Yes

Provider Language(s) Spoken:

Hindi, Spanish, Tamil

Cultural Competency: No

Hospital Affiliation: Tri City

Medical Ctr

Board Certified Specialty: No
IHP-NORTH COUNTY HEALTH
SERVICES

1295 CARLSBAD VILLAGE DR
100

CARLSBAD, CA 92008-1950

Phone: (760) 720-7766

Fax:

After Hours Phone: (760)
720-7766

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

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

JACOBSON, MICHAEL B

Provider ID: 326268

Provider Gender: Male

License number: A88422

NPI: 1831284249

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Sharp Memorial Hospital, Sharp

Mary Birch Hosp For Women

And Newborns, Grossmont

Hospital, Scripps Memorial

Hospital, Scripps Memorial

Hospital Encinitas

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

3257 CAMINO DE LOS

COCHES STE 202

CARLSBAD, CA 92009-8915

Phone: (760) 633-3640

Fax: (760) 633-3644

After Hours Phone: (760)

633-3640

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

METSCH, RANDALL B

Provider ID: 325891

Provider Gender: Male

License number: G69565

NPI: 1619948635

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Scripps Memorial Hospital

Encinitas, Scripps Memorial
Hospital

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3257 CAMINO DE LOS

COCHES STE 202

CARLSBAD, CA 92009-8915

Phone: (760) 633-3640

Fax: (760) 633-3644

After Hours Phone: (760)

633-3640

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

MUTH, NATALIE D

Provider ID: 328451

Provider Gender: Female

License number: A116344

NPI: 1497982888

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Tri City

Medical Ctr, Scripps Memorial

Hospital Encinitas, Scripps

Memorial Hospital

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

3257 CAMINO DE LOS

COCHES STE 202

CARLSBAD, CA 92009-8915

Phone: (760) 633-3640

Fax: (760) 633-3644

After Hours Phone: (760)

633-3640

Website:

Email:

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C. Directorio de proveedores de atención primaria

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

TANAKA, MARY S

Provider ID: 465387

Provider Gender: Female

License number: A116057

NPI: 1295962686

Provider English Spoken: Yes

Provider Language(s) Spoken:

Thai

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3257 CAMINO DE LOS

COCHES STE 202

CARLSBAD, CA 92009-8915

Phone: (760) 633-3640

Fax: (760) 633-3644

After Hours Phone: (760)

633-3640

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

ZACHRY, ALISON D

Provider ID: 480120

Provider Gender: Female

License number: A131678

NPI: 1922402858

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego, Tri

City Medical Ctr

Board Certified Specialty: No

IHP-NORTH COUNTY HEALTH SERVICES

1295 CARLSBAD VILLAGE DR

100

CARLSBAD, CA 92008-1950

Phone: (760) 720-7766

Fax:

After Hours Phone: (760)

720-7766

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:*

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

8AM-2PM

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

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

9AM-5PM

CHAPIN, DENISE L

Provider ID: 206355

Provider Gender: Female

License number: NP23687

NPI: 1952737033

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2500

Fax:

After Hours Phone: (619)

515-2500

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* P, EB, IB, E, R,

T, ME

Hours: M-SA 9AM-5PM

IBARRA, MARTHA A

Provider ID: 427322

Provider Gender: Female

CHULA VISTA

CERTIFIED NURSE PRACTITIONER

ANTHONY, SHARON

Provider ID: 427322

Provider Gender: Female

License number: NP95015566

NPI: 1053887760

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH CENTER

678 3RD AVE

CHULA VISTA, CA 91910-5736

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

License number: NP12112
NPI: 1114957289
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
678 3RD AVE
CHULA VISTA, CA 91910-5736
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM

ROSS, CRYSTAL H

Provider ID: 427322
Provider Gender: Female
License number: NP95015413
NPI: 1548683378
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
678 3RD AVE
CHULA VISTA, CA 91910-5736
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:

Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM

SOTO, ROBIN J

Provider ID: 417641
Provider Gender: Female
License number: NP11778
NPI: 1487688099
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
352 L ST
CHULA VISTA, CA 91911-1208
Phone: (619) 515-2325
Fax:
After Hours Phone: (619) 515-2325
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM

ROSS, CRYSTAL H

Provider ID: 427322
Provider Gender: Female
License number: NP95015413
NPI: 1548683378
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
678 3RD AVE
CHULA VISTA, CA 91910-5736
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:

VEGA, TERESA

Provider ID: 206355
Provider Gender: Female
License number: NP95001705
NPI: 1912304569
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish

Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2500
Fax:
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM

CERTIFIED REGISTERED NURSE MIDWIFE

BOSTON, LAURA H

Provider ID: 206355
Provider Gender: Female
License number: NM792
NPI: 1174553259
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2500
Fax:
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Email:

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C. Directorio de proveedores de atención primaria

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, R, T, ME

Hours: M-SA 9AM-5PM

CHIROPRACTOR

HASHEM, SHIVA

Provider ID: 206355

Provider Gender: Female

License number: DC26269

NPI: 1952950776

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2500

Fax:

After Hours Phone: (619)

515-2500

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, R, T, ME

Hours: M-SA 9AM-5PM

KAZEM, HARON H

Provider ID: 427322

Provider Gender: Male

License number: DC33295

NPI: 1306221262

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi, Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH

CENTER

678 3RD AVE

CHULA VISTA, CA 91910-5736

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

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

9AM-5PM

PLANTE, CHARLES F

Provider ID: 427322

Provider Gender: Male

License number: DC31963

NPI: 1760464960

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH

CENTER

678 3RD AVE

CHULA VISTA, CA 91910-5736

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

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

9AM-5PM

REYNOSO, ALFONSO

Provider ID: 427322

Provider Gender: Male

License number: DC20760

NPI: 1285921627

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH

CENTER

678 3RD AVE

CHULA VISTA, CA 91910-5736

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

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

9AM-5PM

ENDOCRINOLOGY METABOLISM DIABETES

PHILIS-TSIMIKAS, ATHENA

Provider ID: 427322

Provider Gender: Female

License number: A50477

NPI: 1922105964

Provider English Spoken: Yes

Provider Language(s) Spoken:

Greek

Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Hospital Affiliation: Scripps Memorial Hospital Encinitas, Scripps Green Hospital, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
 678 3RD AVE
 CHULA VISTA, CA 91910-5736
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM

VINCENT, LAUREN C

Provider ID: 427322
Provider Gender: Female
License number: A134303
NPI: 1053757997
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
 678 3RD AVE
 CHULA VISTA, CA 91910-5736
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:

Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM

FAMILY PRACTICE

ALANIZ, MATEO A

Provider ID: 427322
Provider Gender: Male
License number: A124388
NPI: 1700175577
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
 678 3RD AVE
 CHULA VISTA, CA 91910-5736
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM

ALB, OVIDIU

Provider ID: 32250
Provider Gender: Male
License number: C52597
NPI: 1356335731

Provider English Spoken: Yes
Provider Language(s) Spoken: Romanian, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Sharp Chula Vista Med Ctr
Board Certified Specialty: No
HEALTH EXCEL IPA INC
 480 4TH AVE STE 202
 CHULA VISTA, CA 91910-4412
Phone: (619) 427-3361
Fax: (619) 427-6821
After Hours Phone: (619) 427-3361
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM

ALB, SIMONA D

Provider ID: 31908
Provider Gender: Female
License number: A98085
NPI: 1578641874
Provider English Spoken: Yes
Provider Language(s) Spoken: Romanian, Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
HEALTH EXCEL IPA INC
 480 4TH AVE STE 202
 CHULA VISTA, CA 91910-4412
Phone: (619) 427-3361
Fax: (619) 427-6821
After Hours Phone: (619) 427-3361
Website:
Email:
Medi-Cal Open Panel: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

ALJAWADI, GEORGIA

Provider ID: 140271

Provider Gender: Female

License number: 20A11376

NPI: 1013116714

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Tagalog

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
HEALTH EXCEL IPA INC

480 4TH AVE STE 202

CHULA VISTA, CA 91910-4412

Phone: (619) 427-3361

Fax: (619) 427-6821

After Hours Phone: (619)

427-3361

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

AMANAT, SOROOSH

Provider ID: 427322

Provider Gender: Male

License number: A153022

NPI: 1003279621

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi, Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH
CENTER

678 3RD AVE

CHULA VISTA, CA 91910-5736

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA
9AM-5PM

ARCE GOMEZ, LAURA E

Provider ID: 427322

Provider Gender: Female

License number: A123604

NPI: 1053532986

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Tagalog

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH

CENTER

678 3RD AVE

CHULA VISTA, CA 91910-5736

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA
9AM-5PM

CAMPOS, MELISSA

Provider ID: 427322

Provider Gender: Female

License number: A138474

NPI: 1427475318

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital

Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH

CENTER

678 3RD AVE

CHULA VISTA, CA 91910-5736

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA
9AM-5PM

CHERY, FARAH Y

Provider ID: 206355

Provider Gender: Female

License number: A108681

NPI: 1114183688

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: El Centro
Regional Medical Center, Sharp
Chula Vista Med Ctr

Board Certified Specialty: No

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C. Directorio de proveedores de atención primaria

FAMILY HEALTH CENTERS OF
SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2500

Fax:
After Hours Phone: (619)
515-2500

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,
T, ME

Hours: M-SA 9AM-5PM

CHERY, FARAH Y

Provider ID: 417641

Provider Gender: Female

License number: A108681

NPI: 1114183688

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: El Centro

Regional Medical Center, Sharp
Chula Vista Med Ctr

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

352 L ST

CHULA VISTA, CA 91911-1208

Phone: (619) 515-2325

Fax:

After Hours Phone: (619)

515-2325

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-F 8AM-5PM, SA
9AM-5PM

DEIS, CRISTINA E

Provider ID: 314546

Provider Gender: Female

License number: A123170

NPI: 1639478811

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH
CENTER

1637 3RD AVE STE H

CHULA VISTA, CA 91911-5823

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA
9AM-5PM

DOOHAN, NOEMI C

Provider ID: 427322

Provider Gender: Female

License number: A89396

NPI: 1972603884

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ukiah Valley

Med Ctr, Uc Davis Medical Ctr,
Scripps Mercy Hospital

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH

CENTER

678 3RD AVE

CHULA VISTA, CA 91910-5736

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA
9AM-5PM

DY, DIANE J

Provider ID: 206355

Provider Gender: Female

License number: A153344

NPI: 1467807560

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2500

Fax:

After Hours Phone: (619)

515-2500

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,
T, ME

Hours: M-SA 9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

ELSAYED, MOHAMMED K

Provider ID: 19561

Provider Gender: Male

License number: A100765

NPI: 1821033424

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, German, Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Chula

Vista Med Ctr, Scripps Mercy

Hospital Chula Vista, Scripps

Memorial Hospital, Paradise

Valley Hospital, Scripps Mercy

Hospital

Board Certified Specialty: No

HEALTH EXCEL IPA INC

330 OXFORD ST STE 106

CHULA VISTA, CA 91911-3118

Phone: (619) 409-1802

Fax: (619) 409-1831

After Hours Phone: (619)

409-1802

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* P, EB, IB, E, R,

T, W

Hours: M-SA 9AM-5PM

ELSAYED, MOHAMMED K , MD

Provider ID: 19561

Provider Gender: Male

License number: A100765

NPI: 1821033424

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, German, Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Chula

Vista Med Ctr, Scripps Mercy

Hospital Chula Vista, Scripps

Memorial Hospital, Paradise

Valley Hospital, Scripps Mercy

Hospital

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

330 OXFORD ST STE 106

CHULA VISTA, CA 91911-3118

Phone: (619) 409-1802

Fax: (619) 409-1831

After Hours Phone: (619)

409-1802

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* P, EB, IB, E, R,

T, W

Hours: M-SA 9AM-5PM

ELSAYED, MOHAMMED K

Provider ID: 19561

Provider Gender: Male

License number: A100765

NPI: 1821033424

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, German, Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Chula

Vista Med Ctr, Scripps Mercy

Hospital Chula Vista, Scripps

Memorial Hospital, Paradise

Valley Hospital, Scripps Mercy

Hospital

Board Certified Specialty: No

IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD

330 OXFORD ST STE 106

CHULA VISTA, CA 91911-3118

Phone: (619) 409-1802

Fax: (619) 409-1831

After Hours Phone: (619)

409-1802

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* P, EB, IB, E, R,

T, W

Hours: M-SA 9AM-5PM

FLORES, MARIBEL C

Provider ID: 314546

Provider Gender: Female

License number: A95959

NPI: 1124104815

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH

CENTER

1637 3RD AVE STE H

CHULA VISTA, CA 91911-5823

Phone: (619) 205-1360

Fax:

After Hours Phone: (619)

205-1360

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

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

9AM-5PM

GALLOWAY, SAMUEL J

Provider ID: 427322

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Provider Gender: Male
License number: A144055
NPI: 1770966988
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 678 3RD AVE
 CHULA VISTA, CA 91910-5736
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
 9AM-5PM

GARCIA, KARLA J

Provider ID: 427322
Provider Gender: Female
License number: A120672
NPI: 1154647410
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital, Scripps Mercy Hospital
 Chula Vista
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 678 3RD AVE
 CHULA VISTA, CA 91910-5736

Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
 9AM-5PM

HASSANEIN, TAREK I

Provider ID: 414710
Provider Gender: Male
License number: A54452
NPI: 1801854450
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Arabic, French, German,
 Spanish, Urdu
Cultural Competency: No
Hospital Affiliation: Parkview
 Community Hospital Medical
 Center, Sharp Coronado Hosp
 And Healthcare Ctr, Sharp Chula
 Vista Med Ctr, Saddleback
 Memorial Med Ctr, Scripps Mercy
 Hospital Chula Vista, Riverside
 Community Hosp, Childrens
 Hospital At Mission, Grossmont
 Hospital, Hoag Hospital Irvine,
 Doctors Hosp Of West Covina
 Inc
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 1323 3RD AVE
 CHULA VISTA, CA 91911-4302
Phone: (619) 409-6900
Fax: (619) 409-6901
After Hours Phone: (619)
 409-6900

Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM

HUBLEY, PAUL E

Provider ID: 206355
Provider Gender: Male
License number: A73172
NPI: 1568496974
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2500
Fax:
After Hours Phone: (619)
 515-2500
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* P, EB, IB, E, R,
 T, ME
Hours: M-SA 9AM-5PM

JIMENEZ, KRYSTAL A

Provider ID: 427322
Provider Gender: Female
License number: A159831
NPI: 1922531250
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 678 3RD AVE
 CHULA VISTA, CA 91910-5736
Phone: (619) 682-4100
Fax:
After Hours Phone: (619) 682-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM

LAW, KAREN

Provider ID: 427322
Provider Gender: Female
License number: A138534
NPI: 1205253150
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 678 3RD AVE
 CHULA VISTA, CA 91910-5736
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):

No
 ☯ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM
MCKENNETT, MARIANNE A
Provider ID: 427322
Provider Gender: Female
License number: G57243
NPI: 1376639666
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 678 3RD AVE
 CHULA VISTA, CA 91910-5736
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM

MERRILL, SARAH E
Provider ID: 427322
Provider Gender: Female
License number: A123492
NPI: 1225399512
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 678 3RD AVE
 CHULA VISTA, CA 91910-5736
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No

MENON, POOJA S
Provider ID: 427322
Provider Gender: Female
License number: A123263
NPI: 1053600064
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:

Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 678 3RD AVE
 CHULA VISTA, CA 91910-5736
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM

MERRILL, SARAH E
Provider ID: 427322
Provider Gender: Female
License number: A123492
NPI: 1225399512
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 678 3RD AVE
 CHULA VISTA, CA 91910-5736
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No

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C. Directorio de proveedores de atención primaria

♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
 9AM-5PM

MOYA, MARY R

Provider ID: 427322
Provider Gender: Female
License number: A80185
NPI: 1093844417
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital, Scripps Mercy Hospital
 Chula Vista

Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 678 3RD AVE
 CHULA VISTA, CA 91910-5736
Phone: (619) 662-4100

Fax:
After Hours Phone: (619)
 662-4100
Website: www.ihpsocal.org
Email:

Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No

♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
 9AM-5PM

NGUYEN, CARIE C

Provider ID: 427322
Provider Gender: Female
License number: A106103
NPI: 1174781132
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH
 CENTER
 678 3RD AVE
 CHULA VISTA, CA 91910-5736
Phone: (619) 662-4100

Fax:
After Hours Phone: (619)
 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No

♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
 9AM-5PM

NGUYEN, LINH T

Provider ID: 206355
Provider Gender: Female
License number: A144995
NPI: 1619357993
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital

Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2500

Fax:
After Hours Phone: (619)
 515-2500
Website: www.fhcsd.org
Email:

Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No

♿ *Accessibility:* P, EB, IB, E, R,

T, ME
Hours: M-SA 9AM-5PM

NGUYEN, LINH T

Provider ID: 417641
Provider Gender: Female
License number: A144995
NPI: 1619357993
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital

Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2325

Fax:
After Hours Phone: (619)
 515-2325
Website: www.fhcsd.org
Email:

Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No

♿ *Accessibility:*
Hours: M-F 8AM-5PM, SA
 9AM-5PM

NOVOTNY, RICHARD W

Provider ID: 427322
Provider Gender: Male
License number: A143811
NPI: 1588002877
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr
Board Certified Specialty: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

IHP-SAN YSIDRO HEALTH CENTER
678 3RD AVE
CHULA VISTA, CA 91910-5736
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM

OSEGUERA, MARIA D

Provider ID: 91607
Provider Gender: Female
License number: G79997
NPI: 1487627907
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
2452 FENTON ST STE 301
CHULA VISTA, CA 91914-4552
Phone: (619) 946-4073
Fax: (619) 946-7243
After Hours Phone: (619) 946-4073
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:

Hours: M-SA 9AM-5PM
PALOMINO, MARY A
Provider ID: 427322
Provider Gender: Female
License number: A115699
NPI: 1770718975
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
678 3RD AVE
CHULA VISTA, CA 91910-5736
Phone: (619) 662-4100
Fax:

After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM

PEREZ, PERLITA A

Provider ID: 206355
Provider Gender: Female
License number: A119689
NPI: 1174810972
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2500
Fax:
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM

PIEROS, JANELLE J

Provider ID: 427322
Provider Gender: Female
License number: 20A13225
NPI: 1386935914
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
678 3RD AVE
CHULA VISTA, CA 91910-5736
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

PISINGER, PATRICIA Provider ID: 427322 Provider Gender: Female License number: A69264 NPI: 1861428302 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital Board Certified Specialty: No IHP-SAN YSIDRO HEALTH CENTER 678 3RD AVE CHULA VISTA, CA 91910-5736 Phone: (619) 662-4100 Fax: After Hours Phone: (619) 662-4100 Website: www.ihpsocal.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-F 8AM-5PM, SA 9AM-5PM	480 4TH AVE STE 202 CHULA VISTA, CA 91910-4412 Phone: (619) 427-3361 Fax: (619) 427-6821 After Hours Phone: (619) 427-3361 Website: Email: Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM	NPI: 1003293507 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 Phone: (619) 515-2325 Fax: After Hours Phone: (619) 515-2325 Website: www.fhcsd.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: P, EB, IB, E, R, T, ME Hours: M-SA 9AM-5PM
POLAK, CLARA L Provider ID: 19942 Provider Gender: Female License number: A66649 NPI: 1790749208 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital Board Certified Specialty: No HEALTH EXCEL IPA INC	RABAGO, MAURELLEN B Provider ID: 369984 Provider Gender: Female License number: A146307 NPI: 1720421076 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No HEALTH EXCEL IPA INC 480 4TH AVE STE 202 CHULA VISTA, CA 91910-4412 Phone: (619) 427-3361 Fax: (619) 827-0551 After Hours Phone: (619) 427-3361 Website: Email: Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM	RAJ, ASHA P Provider ID: 417641 Provider Gender: Female License number: 20A15683 NPI: 1003293507 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST CHULA VISTA, CA 91911-1208 Phone: (619) 515-2500 Fax: After Hours Phone: (619) 515-2500 Website: www.fhcsd.org
RAJ, ASHA P Provider ID: 206355 Provider Gender: Female License number: 20A15683		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-F 8AM-5PM, SA
 9AM-5PM

RAWI, BASHIR A

Provider ID: 168833
Provider Gender: Male
License number: A48140
NPI: 1003964834
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Arabic, Farsi, Spanish, Urdu
Cultural Competency: No
Hospital Affiliation: Sharp Chula
 Vista Med Ctr, Sharp Coronado
 Hosp And Healthcare Ctr,
 Scripps Mercy Hospital Chula
 Vista
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 1323 3RD AVE
 CHULA VISTA, CA 91911-4302
Phone: (619) 409-6900
Fax: (619) 409-6901
After Hours Phone: (619)
 409-6900
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:* P, EB, IB, E, R
Hours: M-SA 9AM-5PM

RAWI, BASHIR A , MD

Provider ID: 168833
Provider Gender: Male
License number: A48140

NPI: 1003964834
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Arabic, Farsi, Spanish, Urdu
Cultural Competency: No
Hospital Affiliation: Sharp Chula
 Vista Med Ctr, Sharp Coronado
 Hosp And Healthcare Ctr,
 Scripps Mercy Hospital Chula
 Vista
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 1323 3RD AVE
 CHULA VISTA, CA 91911-4302
Phone: (619) 409-6900
Fax: (619) 409-6901
After Hours Phone: (619)
 409-6900
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* P, EB, IB, E, R
Hours: M-SA 9AM-5PM

RAWI, BASHIR A , MD

Provider ID: 168834
Provider Gender: Male
License number: A48140
NPI: 1003964834
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Arabic, Farsi, Spanish, Urdu
Cultural Competency: No
Hospital Affiliation: Sharp Chula
 Vista Med Ctr, Sharp Coronado
 Hosp And Healthcare Ctr,
 Scripps Mercy Hospital Chula
 Vista
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 256 LANDIS AVE STE 202
 CHULA VISTA, CA 91910-2650

Phone: (619) 522-0399
Fax: (619) 409-6901
After Hours Phone: (619)
 522-0399
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:* EB, E, R
Hours: M-SA 9AM-5PM

REDDY, DIVYA K

Provider ID: 427322
Provider Gender: Female
License number: A130224
NPI: 1669766473
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Hindi, Kannada, Telugu
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 678 3RD AVE
 CHULA VISTA, CA 91910-5736
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
 9AM-5PM

ROSENBLATT, EUGENE M

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Provider ID: 427322
Provider Gender: Male
License number: 20A9060
NPI: 1427123991
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER
678 3RD AVE
CHULA VISTA, CA 91910-5736
Phone: (619) 662-4100

Fax:
After Hours Phone: (619)
662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM

SERPAS, SHAILA

Provider ID: 427322
Provider Gender: Female
License number: G74728
NPI: 1124039136
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital Chula Vista, Scripps
Mercy Hospital
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER
678 3RD AVE
CHULA VISTA, CA 91910-5736

Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM

SHAHTAJI, ALAN P

Provider ID: 427322
Provider Gender: Male
License number: 20A11087
NPI: 1972751089
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER
678 3RD AVE
CHULA VISTA, CA 91910-5736
Phone: (619) 662-4100

Fax:
After Hours Phone: (619)
662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM

STILLWELL, CARLA T

Provider ID: 145651
Provider Gender: Female
License number: A114687
NPI: 1447540083
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: Yes
HEALTH EXCEL IPA INC
480 4TH AVE STE 202
CHULA VISTA, CA 91910-4412
Phone: (619) 427-3361

Fax: (619) 427-6821
After Hours Phone: (619)
427-3361
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM

SWARTZ, JOHN R

Provider ID: 427322
Provider Gender: Male
License number: G72486
NPI: 1396754131
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital Chula Vista, Scripps
Mercy Hospital
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER
678 3RD AVE
CHULA VISTA, CA 91910-5736

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C. Directorio de proveedores de atención primaria

Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM

TALAVERA, GREGORY A

Provider ID: 427322
Provider Gender: Male
License number: A40061
NPI: 1740337161
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER
678 3RD AVE
CHULA VISTA, CA 91910-5736
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM

TOLEDO-NADER, CAROLL

Provider ID: 427322

Provider Gender: Male
License number: A41486
NPI: 1427126648
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Scripps
Mercy Hospital
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER
678 3RD AVE

CHULA VISTA, CA 91910-5736

Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM

TREJO, RAUL

Provider ID: 427322
Provider Gender: Male
License number: A77936
NPI: 1174534184
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital Chula Vista
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER
678 3RD AVE
CHULA VISTA, CA 91910-5736

Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM

WHITLEY, NICHOLAS R

Provider ID: 427322
Provider Gender: Male
License number: A118250
NPI: 1629394721
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital Chula Vista
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER
678 3RD AVE
CHULA VISTA, CA 91910-5736
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM

YELANICH, MELISSA R

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Provider ID: 362093
Provider Gender: Female
License number: A122649
NPI: 1881905362
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 480 4TH AVE STE 202
 CHULA VISTA, CA 91910-4412
Phone: (619) 427-3361
Fax: (619) 827-0551
After Hours Phone: (619)
 427-3361
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM

YOON, RYAN R

Provider ID: 427322
Provider Gender: Male
License number: A114600
NPI: 1942435144
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital, Scripps Mercy Hospital
 Chula Vista
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 678 3RD AVE
 CHULA VISTA, CA 91910-5736
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
 662-4100

Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
 9AM-5PM

FQHC

CHULA VISTA FAMILY HLTH CTR,

Provider ID: 206355
Provider Gender:
License number:
NPI: 1346480837
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2500
Fax: (619) 397-1161
After Hours Phone: (619)
 515-2500
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
♿ Accessibility: P, EB, IB, E, R,
 T, ME
Hours: M-SA 9AM-5PM

CHULA VISTA PEDIATRICS,

Provider ID: 482034
Provider Gender:
License number:

NPI: 1326486861
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
 IHP-SAN YSIDRO HEALTH
 CENTER
 855 3RD AVE STE 2200
 CHULA VISTA, CA 91911-1353
Phone: (619) 662-4100
Fax: (619) 662-4196
After Hours Phone: (619)
 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-F 9AM-4PM, SA
 9AM-5PM

FAMILY HLTH CTR SAN DIEGO-RICE FAM HC,

Provider ID: 417641
Provider Gender:
License number: 550002305
NPI: 1083959464
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2325
Fax: (619) 420-0660
After Hours Phone: (619)
 515-2325
Website: www.fhcsd.org
Email:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-F 8AM-5PM, SA
9AM-5PM

OTAY FAMILY HEALTH CLINIC,

Provider ID: 314546
Provider Gender:
License number:
NPI: 1922051812
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
IHP-SAN YSIDRO HEALTH CENTER
1637 3RD AVE STE H
CHULA VISTA, CA 91911-5823
Phone: (619) 662-4100
Fax: (619) 336-2323
After Hours Phone: (619)
662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM

SAN YSIDRO HEALTH CHULA VISTA,

Provider ID: 427322
Provider Gender:
License number:
NPI: 1326486861
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
IHP-SAN YSIDRO HEALTH CENTER
678 3RD AVE
CHULA VISTA, CA 91910-5736
Phone: (619) 662-4100
Fax: (619) 425-1184
After Hours Phone: (619)
662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM

GENERAL DENTISTRY

PHAM, QUYNH V

Provider ID: 427322
Provider Gender: Female
License number: DDS102880
NPI: 1366917353
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
678 3RD AVE
CHULA VISTA, CA 91910-5736
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None

American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM

HEMATOLOGY / ONCOLOGY

QUIROZ, ELISA K

Provider ID: 427322
Provider Gender: Female
License number: A162816
NPI: 1932558301
Provider English Spoken: Yes
Provider Language(s) Spoken:
Portuguese, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Green Hospital, Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
678 3RD AVE
CHULA VISTA, CA 91910-5736
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM

INTERNAL MEDICINE

CHEN, TSUH YIN

Provider ID: 427322
Provider Gender: Female

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C. Directorio de proveedores de atención primaria

License number: C55563
NPI: 1093803520
Provider English Spoken: Yes
Provider Language(s) Spoken:
Portuguese, Spanish
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER
678 3RD AVE
CHULA VISTA, CA 91910-5736
Phone: (619) 662-4100

Fax:
After Hours Phone: (619)
662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM

DALHOUMI, SARAH

Provider ID: 427322
Provider Gender: Female
License number: A121861
NPI: 1033435383
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER
678 3RD AVE
CHULA VISTA, CA 91910-5736

Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM

DE LA ROSA, RENATO, MD

Provider ID: 282068
Provider Gender: Male
License number: A65330
NPI: 1114966777
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
754 MEDICAL CENTER CT STE
103
CHULA VISTA, CA 91911-6655
Phone: (619) 397-5001
Fax: (619) 397-4460
After Hours Phone: (619)
397-5001
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

ESPINOSA-MELENDZ, ENRIQUE, MD

Provider ID: 355904
Provider Gender: Male
License number: C42745
NPI: 1881651156
Provider English Spoken: Yes
Provider Language(s) Spoken:
French, Portuguese, Spanish
Cultural Competency: No
Hospital Affiliation: Paradise
Valley Hospital, Sharp Chula
Vista Med Ctr, Scripps Mercy
Hospital Chula Vista, Alvarado
Hospital Llc, Scripps Mercy
Hospital
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
480 4TH AVE STE 507
CHULA VISTA, CA 91910-4414
Phone: (619) 477-7779
Fax: (619) 477-6499
After Hours Phone: (619)
477-7779
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

FERNANDEZ, RODRIGO J

Provider ID: 536713
Provider Gender: Male
License number: A44441
NPI: 1366539793
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr, Scripps Mercy
Hospital Chula Vista, Scripps
Memorial Hospital, Scripps
Mercy Hospital

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Board Certified Specialty: No
HEALTH EXCEL IPA INC
450 4TH AVE STE 201
CHULA VISTA, CA 91910-4428
Phone: (619) 476-9054
Fax: (619) 476-9056
After Hours Phone: (619)
476-9054

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

FERNANDEZ, RODRIGO J

Provider ID: 536713

Provider Gender: Male

License number: A44441

NPI: 1366539793

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Tagalog

Cultural Competency: No

Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Scripps Mercy Hospital

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

450 4TH AVE STE 201

CHULA VISTA, CA 91910-4428

Phone: (619) 476-9054

Fax: (619) 476-9056

After Hours Phone: (619)

476-9054

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

FLORES, ROCIO M , MD

Provider ID: 490002

Provider Gender: Female

License number: A69424

NPI: 1881607067

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy Hospital, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

296 H ST STE 201

CHULA VISTA, CA 91910-4779

Phone: (619) 271-5551

Fax: (619) 271-5556

After Hours Phone: (619)

271-5551

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

FLORES, ROCIO M

Provider ID: 490002

Provider Gender: Female

License number: A69424

NPI: 1881607067

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy Hospital, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital

Chula Vista

Board Certified Specialty: No
HEALTH EXCEL IPA INC
296 H ST STE 201
CHULA VISTA, CA 91910-4779
Phone: (619) 271-5551

Fax: (619) 271-5556

After Hours Phone: (619)

271-5551

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 21/999

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

FLORES, ROCIO M

Provider ID: 490002

Provider Gender: Female

License number: A69424

NPI: 1881607067

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy Hospital, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD

296 H ST STE 201

CHULA VISTA, CA 91910-4779

Phone: (619) 271-5551

Fax: (619) 271-5556

After Hours Phone: (619)

271-5551

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM	Hosp <i>Board Certified Specialty:</i> No IHP-SAN YSIDRO HEALTH CENTER 678 3RD AVE CHULA VISTA, CA 91910-5736 <i>Phone:</i> (619) 662-4100 <i>Fax:</i> <i>After Hours Phone:</i> (619) 662-4100 <i>Website:</i> www.ihpsocal.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM	♿ <i>Accessibility:</i> P, EB, IB, E, R, T <i>Hours:</i> M-SA 9AM-5PM
FUENTES, MARIA G <i>Provider ID:</i> 234312 <i>Provider Gender:</i> Female <i>License number:</i> A83896 <i>NPI:</i> 1811070261 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 717 3RD AVE CHULA VISTA, CA 91910-5803 <i>Phone:</i> (619) 941-1545 <i>Fax:</i> (619) 941-1558 <i>After Hours Phone:</i> (619) 941-1545 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM	LOPEZ, JOSE R <i>Provider ID:</i> 66795 <i>Provider Gender:</i> Male <i>License number:</i> A43301 <i>NPI:</i> 1568667228 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Tagalog <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr <i>Board Certified Specialty:</i> Yes HEALTH EXCEL IPA INC 2648 MAIN ST STE A CHULA VISTA, CA 91911-4664 <i>Phone:</i> (619) 575-5000 <i>Fax:</i> (619) 575-5060 <i>After Hours Phone:</i> (619) 575-5000 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 18/999 <i>American Sign Language (ASL):</i> No	MONDRAGON, GUSTAVO A <i>Provider ID:</i> 368816 <i>Provider Gender:</i> Male <i>License number:</i> A40640 <i>NPI:</i> 1619080041 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Paradise Valley Hospital, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 480 4TH AVE STE 500 CHULA VISTA, CA 91910-4414 <i>Phone:</i> (619) 656-5252 <i>Fax:</i> (619) 656-5250 <i>After Hours Phone:</i> (619) 656-5252 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 18/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM
HAMMETT, ERIN K <i>Provider ID:</i> 427322 <i>Provider Gender:</i> Female <i>License number:</i> 20A14025 <i>NPI:</i> 1467884098 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Coronado Hosp And Healthcare Ctr, Santa Barbara Cottage Hosp, Goleta Valley Cottage	MOOLANI, UJJALA K <i>Provider ID:</i> 545348 <i>Provider Gender:</i> Female <i>License number:</i> C149530 <i>NPI:</i> 1528221421 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 450 4TH AVE STE 201	

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C. Directorio de proveedores de atención primaria

CHULA VISTA, CA 91910-4428

Phone: (619) 476-9054

Fax: (619) 476-9056

After Hours Phone: (619)
476-9054

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

PENA, JOSE R

Provider ID: 367695

Provider Gender: Male

License number: C50688

NPI: 1437170008

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Chula
Vista Med Ctr, Grossmont
Hospital, Scripps Mercy Hospital
Chula Vista, Scripps Mercy
Hospital

Board Certified Specialty: No
HEALTH EXCEL IPA INC

374 H ST STE 103

CHULA VISTA, CA 91910-5547

Phone: (619) 691-1766

Fax: (619) 691-1767

After Hours Phone: (619)

691-1766

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

UWEDJOJEVWE, LETICIA M

Provider ID: 380242

Provider Gender: Female

License number: A80329

NPI: 1891882221

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista

Board Certified Specialty: No

HEALTH EXCEL IPA INC

340 4TH AVE STE 10

CHULA VISTA, CA 91910-3813

Phone: (619) 934-2215

Fax: (619) 500-5955

After Hours Phone: (619)

934-2215

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

UWEDJOJEVWE, LETICIA M

Provider ID: 380242

Provider Gender: Female

License number: A80329

NPI: 1891882221

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista

Board Certified Specialty: No

IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD

340 4TH AVE STE 10

CHULA VISTA, CA 91910-3813

Phone: (619) 934-2215

Fax: (619) 500-5955

After Hours Phone: (619)
934-2215

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

VELAZQUEZ CAMARENA, MARIA D

Provider ID: 427322

Provider Gender: Female

License number: A56153

NPI: 1518965714

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital Chula Vista

Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER

678 3RD AVE

CHULA VISTA, CA 91910-5736

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA
9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

OBSTETRICS / GYNECOLOGY	Hospital Chula Vista, Sharp Mary	<i>Phone:</i> (619) 515-2500
ALIMONOS, LYSISTRATI A	Birch Hosp For Women And	<i>Fax:</i>
<i>Provider ID:</i> 206355	Newborns	<i>After Hours Phone:</i> (619)
<i>Provider Gender:</i> Female	<i>Board Certified Specialty:</i> No	515-2500
<i>License number:</i> 20A14919	FAMILY HEALTH CENTERS OF	<i>Website:</i> www.fhcsd.org
<i>NPI:</i> 1619397031	SAN DIEGO	<i>Email:</i>
<i>Provider English Spoken:</i> Yes	251 LANDIS AVE	<i>Medi-Cal Open Panel:</i> Yes
<i>Provider Language(s) Spoken:</i>	CHULA VISTA, CA 91910-2628	<i>Min/Max Age:</i> None
Spanish	<i>Phone:</i> (619) 515-2500	<i>American Sign Language (ASL):</i>
<i>Cultural Competency:</i> No	<i>Fax:</i>	No
<i>Hospital Affiliation:</i> Grossmont	<i>After Hours Phone:</i> (619)	♿ <i>Accessibility:</i> P, EB, IB, E, R,
Hospital, Scripps Mercy Hospital	515-2500	T, ME
<i>Board Certified Specialty:</i> No	<i>Website:</i> www.fhcsd.org	<i>Hours:</i> M-SA 9AM-5PM
FAMILY HEALTH CENTERS OF	<i>Email:</i>	CARTER, KHALIL J
SAN DIEGO	<i>Medi-Cal Open Panel:</i> Yes	<i>Provider ID:</i> 206355
251 LANDIS AVE	<i>Min/Max Age:</i> None	<i>Provider Gender:</i> Male
CHULA VISTA, CA 91910-2628	<i>American Sign Language (ASL):</i>	<i>License number:</i> A113001
<i>Phone:</i> (619) 515-2500	No	<i>NPI:</i> 1225231582
<i>Fax:</i>	♿ <i>Accessibility:</i> P, EB, IB, E, R,	<i>Provider English Spoken:</i> Yes
<i>After Hours Phone:</i> (619)	T, ME	<i>Provider Language(s) Spoken:</i>
515-2500	<i>Hours:</i> M-SA 9AM-5PM	Spanish
<i>Website:</i> www.fhcsd.org	CAMPBELL, ELIZABETH C	<i>Cultural Competency:</i> No
<i>Email:</i>	<i>Provider ID:</i> 206355	<i>Hospital Affiliation:</i> Scripps Mercy
<i>Medi-Cal Open Panel:</i> Yes	<i>Provider Gender:</i> Female	Hospital, Grossmont Hospital
<i>Min/Max Age:</i> None	<i>License number:</i> 20A6763	<i>Board Certified Specialty:</i> No
<i>American Sign Language (ASL):</i>	<i>NPI:</i> 1932147329	FAMILY HEALTH CENTERS OF
No	<i>Provider English Spoken:</i> Yes	SAN DIEGO
♿ <i>Accessibility:</i> P, EB, IB, E, R,	<i>Provider Language(s) Spoken:</i>	251 LANDIS AVE
T, ME	Spanish	CHULA VISTA, CA 91910-2628
<i>Hours:</i> M-SA 9AM-5PM	<i>Cultural Competency:</i> No	<i>Phone:</i> (619) 515-2500
BUECHNER, CHARLENE A	<i>Hospital Affiliation:</i> Grossmont	<i>Fax:</i>
<i>Provider ID:</i> 206355	Hospital, Scripps Mercy Hospital,	<i>After Hours Phone:</i> (619)
<i>Provider Gender:</i> Female	Palomar Medical Center,	515-2500
<i>License number:</i> A68463	Palomar Health Downtown	<i>Website:</i> www.fhcsd.org
<i>NPI:</i> 1376663831	Campus, Pomerado Hospital,	<i>Email:</i>
<i>Provider English Spoken:</i> Yes	Rady Childrens Hospital San	<i>Medi-Cal Open Panel:</i> Yes
<i>Provider Language(s) Spoken:</i>	Diego, Sharp Coronado Hosp	<i>Min/Max Age:</i> None
Spanish	And Healthcare Ctr	<i>American Sign Language (ASL):</i>
<i>Cultural Competency:</i> No	<i>Board Certified Specialty:</i> No	No
<i>Hospital Affiliation:</i> Sharp	FAMILY HEALTH CENTERS OF	♿ <i>Accessibility:</i> P, EB, IB, E, R,
Memorial Hospital, Scripps	SAN DIEGO	T, ME
Mercy Hospital, Scripps Mercy	251 LANDIS AVE	<i>Hours:</i> M-SA 9AM-5PM
	CHULA VISTA, CA 91910-2628	CERVANTES, SANDRA M

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Provider ID: 206355
Provider Gender: Female
License number: A118095
NPI: 1073701041
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2500
Fax:
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM

DE MIK, TRAVIS J
Provider ID: 206355
Provider Gender: Male
License number: A108228
NPI: 1629277322
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628

Phone: (619) 515-2500
Fax:
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM

FOLCH TORRES-AGUIAR, BEATRIZ M
Provider ID: 206355
Provider Gender: Female
License number: A148014
NPI: 1457794752
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Yue Chinese
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2500
Fax:
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM

LOEFFLER, ALLISON M
Provider ID: 206355
Provider Gender: Female
License number: A116680
NPI: 1700073962
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula

LIPSCHITZ, LISA S
Provider ID: 206355
Provider Gender: Female
License number: A72005
NPI: 1649208711
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital, Grossmont Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2500
Fax:
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM

LOEFFLER, ALLISON M
Provider ID: 206355
Provider Gender: Female
License number: A116680
NPI: 1700073962
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Vista
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2500
Fax:
After Hours Phone: (619)
 515-2500
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* P, EB, IB, E, R,
 T, ME
Hours: M-SA 9AM-5PM

MELLENDEZ BERRIOS, IARA DEL M

Provider ID: 206355
Provider Gender: Female
License number: A114181
NPI: 1740514249
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital, Grossmont Hospital
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2500
Fax:
After Hours Phone: (619)
 515-2500
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None

American Sign Language (ASL):
 No
 ☯ *Accessibility:* P, EB, IB, E, R,
 T, ME
Hours: M-SA 9AM-5PM

MENDEZ, DIEGO

Provider ID: 427322
Provider Gender: Male
License number: A47906
NPI: 1437181922
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Mercy
 General Hospital, Scripps Mercy
 Hospital Chula Vista, Bakersfield
 Memorial Hosp, Sharp Memorial
 Hospital, San Joaquin Comm
 Hosp, Scripps Mercy Hospital
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 678 3RD AVE
 CHULA VISTA, CA 91910-5736
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
 9AM-5PM

RODRIGUEZ JEREZ, ROBERTO D

Provider ID: 206355
Provider Gender: Male
License number: A154298

NPI: 1710316450
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital, Sharp Coronado Hosp
 And Healthcare Ctr, Grossmont
 Hospital
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2500
Fax:
After Hours Phone: (619)
 515-2500
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* P, EB, IB, E, R,
 T, ME
Hours: M-SA 9AM-5PM

SAPRA, SONIA V

Provider ID: 206355
Provider Gender: Female
License number: A164859
NPI: 1952751711
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Hindi
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

<p>Phone: (619) 515-2500 Fax: After Hours Phone: (619) 515-2500 Website: www.fhcsd.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: P, EB, IB, E, R, T, ME Hours: M-SA 9AM-5PM</p> <p>SEFA-BOAKYE, KOFI D Provider ID: 427322 Provider Gender: Male License number: G59670 NPI: 1902993660 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Sharp Chula Vista Med Ctr, Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital Chula Vista Board Certified Specialty: No IHP-SAN YSIDRO HEALTH CENTER 678 3RD AVE CHULA VISTA, CA 91910-5736 Phone: (619) 662-4100 Fax: After Hours Phone: (619) 662-4100 Website: www.ihpsocal.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-F 8AM-5PM, SA</p>	<p>9AM-5PM</p> <p>SHORT, ABI ADE C Provider ID: 427322 Provider Gender: Male License number: A114893 NPI: 1750559589 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Paradise Valley Hospital, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital Board Certified Specialty: No IHP-SAN YSIDRO HEALTH CENTER 678 3RD AVE CHULA VISTA, CA 91910-5736 Phone: (619) 662-4100 Fax: After Hours Phone: (619) 662-4100 Website: www.ihpsocal.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-F 8AM-5PM, SA</p> <p>SINGH, RASHMI Provider ID: 206355 Provider Gender: Female License number: A168236 NPI: 1679937619 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Mercy</p>	<p>Hospital Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 Phone: (619) 515-2500 Fax: After Hours Phone: (619) 515-2500 Website: www.fhcsd.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: P, EB, IB, E, R, T, ME Hours: M-SA 9AM-5PM</p> <p>WINESBURG, JENNIFER J Provider ID: 206355 Provider Gender: Female License number: 20A11535 NPI: 1811162456 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital, Desert Regional Med Ctr Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 Phone: (619) 515-2500 Fax: After Hours Phone: (619) 515-2500 Website: www.fhcsd.org Email:</p>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,
T, ME

Hours: M-SA 9AM-5PM

ZIEG, ALAN J

Provider ID: 206355

Provider Gender: Male

License number: G78814

NPI: 1699790634

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Grossmont
Hospital, Scripps Mercy Hospital,
Sharp Coronado Hosp And
Healthcare Ctr, Scripps Mercy
Hospital Chula Vista

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2500

Fax:

After Hours Phone: (619)
515-2500

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,
T, ME

Hours: M-SA 9AM-5PM

OPHTHALMOLOGY

JARDON, JAVIER A

Provider ID: 427322

Provider Gender: Male

License number: A131365

NPI: 1609171982

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi, Spanish

Cultural Competency: No

Hospital Affiliation: California

Hosp Med Ctr Los Angeles

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH

CENTER

678 3RD AVE

CHULA VISTA, CA 91910-5736

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

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

9AM-5PM

MANI, HAMID

Provider ID: 427322

Provider Gender: Male

License number: A40472

NPI: 1700838141

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, Farsi, Spanish

Cultural Competency: No

Hospital Affiliation: Alvarado

Hospital Llc, El Centro Regional

Medical Center

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH

CENTER

678 3RD AVE

CHULA VISTA, CA 91910-5736

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

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

9AM-5PM

MANI, NASRIN

Provider ID: 427322

Provider Gender: Female

License number: A40473

NPI: 1023061314

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, Faroese, Farsi, Spanish

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Sharp

Memorial Hospital, Ucsd Medical

Ctr, Sharp Chula Vista Med Ctr,

Grossmont Hospital

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH

CENTER

678 3RD AVE

CHULA VISTA, CA 91910-5736

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

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

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

9AM-5PM

PAPASTERGIU, GEORGIOS

Provider ID: 427322

Provider Gender: Male

License number: A127706

NPI: 1790054393

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, Farsi, French, Greek, Italian, Spanish

Cultural Competency: No

Hospital Affiliation: El Centro

Regional Medical Center, Scripps

Memorial Hospital, Sharp

Memorial Hospital

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH

CENTER

678 3RD AVE

CHULA VISTA, CA 91910-5736

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

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

9AM-5PM

PONS, MAURICIO E

Provider ID: 427322

Provider Gender: Male

License number: A87650

NPI: 1376723759

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, El Centro

Regional Medical Center, Sharp

Memorial Hospital, Scripps

Mercy Hospital

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH

CENTER

678 3RD AVE

CHULA VISTA, CA 91910-5736

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

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

9AM-5PM

SKAF, AYHAM R

Provider ID: 427322

Provider Gender: Male

License number: A120584

NPI: 1285888628

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, Spanish

Cultural Competency: No

Hospital Affiliation: El Centro

Regional Medical Center, Sharp

Memorial Hospital, Scripps

Memorial Hospital

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH

CENTER

678 3RD AVE

CHULA VISTA, CA 91910-5736

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

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

9AM-5PM

PEDIATRICS

AKASHI, MARC K

Provider ID: 163322

Provider Gender: Male

License number: A123922

NPI: 1205002417

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Scripps Mercy Hospital Chula

Vista, Sharp Chula Vista Med

Ctr, Scripps Mercy Hospital

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

769 MEDICAL CENTER CT STE

300

CHULA VISTA, CA 91911-6602

Phone: (619) 482-3090

Fax: (619) 482-7350

After Hours Phone: (619)

482-3090

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ *Accessibility:* P, EB, IB, E, R, T

Hours: M-SA 9AM-5PM

ATIENZA, PAMELA V

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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C. Directorio de proveedores de atención primaria

Provider ID: 106987
Provider Gender: Female
License number: A64995
NPI: 1417916107
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 890 EASTLAKE PKWY STE 200
 CHULA VISTA, CA 91914-4521
Phone: (619) 656-6817
Fax: (619) 656-6908
After Hours Phone: (619) 506-1218
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM

BARBADILLO, FERDINAND F
Provider ID: 70456
Provider Gender: Male
License number: A49307
NPI: 1982662193
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital, Sharp Chula Vista Med Ctr
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 890 EASTLAKE PKWY STE 200
 CHULA VISTA, CA 91914-4521

Phone: (619) 656-6817
Fax: (619) 656-6908
After Hours Phone: (619) 656-6817
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM

BRESLOW, ADAM D
Provider ID: 230454
Provider Gender: Male
License number: G60853
NPI: 1972574085
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 769 MEDICAL CENTER CT STE 300
 CHULA VISTA, CA 91911-6602
Phone: (619) 482-3090
Fax: (619) 482-7350
After Hours Phone: (619) 482-3090
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM

BROUDY, ABRAHAM E
Provider ID: 109328
Provider Gender: Male
License number: A71609
NPI: 1528039526
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Rady Childrens Hospital San Diego, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 2440 FENTON ST # 100
 CHULA VISTA, CA 91914-3516
Phone: (619) 656-3040
Fax: (619) 656-3045
After Hours Phone: (619) 656-3040
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM

CAPETANAKIS, ELENI I
Provider ID: 89610
Provider Gender: Female
License number: A70397
NPI: 1346211554
Provider English Spoken: Yes
Provider Language(s) Spoken: Greek, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista, Rady Childrens Hospital San

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Diego, Sharp Memorial Hospital,
Scripps Mercy Hospital, Sharp
Chula Vista Med Ctr
Board Certified Specialty: No
**RADY CHILDRENS HEALTH
NETWORK**
865 3RD AVE STE 101
CHULA VISTA, CA 91911-1349
Phone: (619) 426-7910
Fax: (619) 426-2337
After Hours Phone: (619)
426-7910
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM

COHEN, ELAINE H

Provider ID: 6321
Provider Gender: Female
License number: G22152
NPI: 1831245984
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Board Certified Specialty: Yes
**RADY CHILDRENS HEALTH
NETWORK**
280 E ST
CHULA VISTA, CA 91910-2945
Phone: (619) 425-3951
Fax: (619) 425-3958
After Hours Phone: (619)
425-3951
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):

No
Accessibility: P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM

CORDOBA, MIGUEL A

Provider ID: 88187
Provider Gender: Male
License number: A75350
NPI: 1053382176
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Mary
Birch Hosp For Women And
Newborns, Sharp Chula Vista
Med Ctr, Rady Childrens Hospital
San Diego, Scripps Mercy
Hospital Chula Vista, Scripps
Mercy Hospital
Board Certified Specialty: No
**RADY CHILDRENS HEALTH
NETWORK**
865 3RD AVE STE 101
CHULA VISTA, CA 91911-1349
Phone: (619) 426-7910
Fax: (619) 426-2337
After Hours Phone: (619)
426-7910
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM

DI FRANCO, MATTHEW J

Provider ID: 499127
Provider Gender: Male
License number: G58994
NPI: 1841343548
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Paradise Valley
Hospital, Scripps Mercy Hospital
Chula Vista, Sharp Chula Vista
Med Ctr
Board Certified Specialty: No
**RADY CHILDRENS HEALTH
NETWORK**
1635 3RD AVE STE J
CHULA VISTA, CA 91911-5867
Phone: (619) 426-8121
Fax: (619) 426-5950
After Hours Phone: (619)
426-8121
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM

DONG, TAMMY M

Provider ID: 427322
Provider Gender: Female
License number: A66903
NPI: 1386655413
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER
678 3RD AVE
CHULA VISTA, CA 91910-5736
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
662-4100
Website: www.ihpsocal.org
Email:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: W
 Hours: M-F 8AM-5PM, SA
 9AM-5PM

DORINGO, ELAINIE D

Provider ID: 267100
 Provider Gender: Female
 License number: A70842
 NPI: 1013005636
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Alvarado
 Hospital Llc, Rady Childrens
 Hospital San Diego, Grossmont
 Hospital, Scripps Mercy Hospital
 Chula Vista, Sharp Chula Vista
 Med Ctr, Ucsd La Jolla John
 Sally Thornton, Scripps Mercy
 Hospital
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 865 3RD AVE STE 101
 CHULA VISTA, CA 91911-1349
 Phone: (619) 426-7910
 Fax: (619) 426-2337
 After Hours Phone: (619)
 426-7910
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM

FLETCHER, EMILY E

Provider ID: 232312
 Provider Gender: Female

License number: A122247
 NPI: 1780935940
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Sharp Chula
 Vista Med Ctr, Mercy Hospital
 Bakersfield, Rady Childrens
 Hospital San Diego, Scripps
 Mercy Hospital Chula Vista,
 Scripps Mercy Hospital,
 Childrens Hosp And Resrch Ctr
 At Oakland
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 2440 FENTON ST # 100
 CHULA VISTA, CA 91914-3516
 Phone: (619) 656-3040
 Fax: (619) 656-3045
 After Hours Phone: (619)
 656-3040
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 ♿ Accessibility: P, EB, IB, E, R, T
 Hours: M-SA 9AM-5PM

FRESNO, BLANCA I

Provider ID: 102434
 Provider Gender: Female
 License number: A45205
 NPI: 1346258787
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish, Tagalog
 Cultural Competency: No
 Hospital Affiliation: Paradise
 Valley Hospital, Sharp Chula
 Vista Med Ctr
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH

NETWORK
 1741 EASTLAKE PKWY STE
 107
 CHULA VISTA, CA 91915-2032
 Phone: (619) 482-1700
 Fax: (619) 475-4578
 After Hours Phone: (619)
 482-1700
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM

GALE, MARVIN L

Provider ID: 45185
 Provider Gender: Male
 License number: A24816
 NPI: 1033264148
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Board Certified Specialty: Yes
 RADY CHILDRENS HEALTH
 NETWORK
 280 E ST
 CHULA VISTA, CA 91910-2945
 Phone: (619) 425-3951
 Fax: (619) 425-3958
 After Hours Phone: (619)
 425-3951
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 ♿ Accessibility: P, EB, IB, E, R, T
 Hours: M-SA 9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

GARCIA, CARLOS M

Provider ID: 64734
Provider Gender: Male
License number: A42509
NPI: 1417959370
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Rady Childrens Hospital San Diego
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 1392 E PALOMAR ST STE 501
 CHULA VISTA, CA 91913-1895
Phone: (619) 271-4059
Fax: (619) 271-7451
After Hours Phone: (619) 271-4059
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T, W
Hours: M-SA 9AM-5PM

GARCIA, RAFAEL A

Provider ID: 360408
Provider Gender: Male
License number: A50715
NPI: 1053414086
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Rady Childrens Hospital San Diego

Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 752 MEDICAL CENTER CT STE 210
 CHULA VISTA, CA 91911-6660
Phone: (619) 656-0206
Fax: (619) 656-8936
After Hours Phone: (619) 656-0206
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM

GHAHREMANI, SIMIN M

Provider ID: 482034
Provider Gender: Female
License number: C51110
NPI: 1508904657
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 855 3RD AVE STE 2200
 CHULA VISTA, CA 91911-1353
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):

No
Accessibility:
Hours: M-F 9AM-4PM, SA 9AM-5PM

HAMEDANINIA, AZARDOKHT

Provider ID: 94547
Provider Gender: Female
License number: A51456
NPI: 1053388876
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Rady Childrens Hospital San Diego, Scripps Mercy Hospital
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 865 3RD AVE STE 101
 CHULA VISTA, CA 91911-1349
Phone: (619) 426-7910
Fax: (619) 426-2337
After Hours Phone: (619) 426-7910
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM

HOLLICK, NATALIE V

Provider ID: 473802
Provider Gender: Female
License number: 20A16170
NPI: 1558716845
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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C. Directorio de proveedores de atención primaria

Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 865 3RD AVE STE 101
 CHULA VISTA, CA 91911-1349
Phone: (619) 426-7910
Fax: (619) 426-2337
After Hours Phone: (619) 426-7910
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM

ISAIAS, AGNELA T

Provider ID: 482034
Provider Gender: Female
License number: A82912
NPI: 1790772572
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Alvarado Hospital Llc, Sharp Coronado Hosp And Healthcare Ctr
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 855 3RD AVE STE 2200
 CHULA VISTA, CA 91911-1353
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None

American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-F 9AM-4PM, SA 9AM-5PM

JACOBS-KLEISLI, MILAGROS J

Provider ID: 467596
Provider Gender: Female
License number: 20A11985
NPI: 1811221641
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Sharp Memorial Hospital, Rady Childrens Hospital San Diego, Huntington Memorial Hospital, Methodist Hosp Of Southern California
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 769 MEDICAL CENTER CT STE 300
 CHULA VISTA, CA 91911-6602
Phone: (619) 482-3090
Fax: (619) 482-7350
After Hours Phone: (619) 482-3090
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM

JOLLY, DESMOND A

Provider ID: 57697
Provider Gender: Male
License number: A103143
NPI: 1063652162

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Scripps Mercy Hospital Chula Vista, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 865 3RD AVE STE 101
 CHULA VISTA, CA 91911-1349
Phone: (619) 426-7910
Fax: (619) 426-2337
After Hours Phone: (619) 426-7910
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM

KORSAND, SID S

Provider ID: 482034
Provider Gender: Male
License number: A49591
NPI: 1588634513
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Turkish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 855 3RD AVE STE 2200
 CHULA VISTA, CA 91911-1353
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100

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C. Directorio de proveedores de atención primaria

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-F 9AM-4PM, SA

9AM-5PM

MISTRY, CHETAN A

Provider ID: 86439

Provider Gender: Male

License number: A97646

NPI: 1467505834

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp Chula

Vista Med Ctr, Scripps Mercy

Hospital Chula Vista, Rady

Childrens Hospital San Diego,

Scripps Mercy Hospital

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

2440 FENTON ST # 100

CHULA VISTA, CA 91914-3516

Phone: (619) 656-3040

Fax: (619) 656-3045

After Hours Phone: (619)

656-3040

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, R, T

Hours: M-SA 9AM-5PM

MORRIS, KENNETH H

Provider ID: 529313

Provider Gender: Male

License number: G79634

NPI: 1851307144

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego, Tri

City Medical Ctr, Palomar

Medical Center

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

865 3RD AVE STE 101

CHULA VISTA, CA 91911-1349

Phone: (619) 426-7910

Fax: (619) 426-2337

After Hours Phone: (619)

426-7910

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

MOSQUERA, DIANA I

Provider ID: 371232

Provider Gender: Female

License number: C148618

NPI: 1144238098

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

769 MEDICAL CENTER CT STE
300

CHULA VISTA, CA 91911-6602

Phone: (619) 482-3090

Fax: (619) 482-7350

After Hours Phone: (619)

482-3090

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

MOSQUERA, DIANA I

Provider ID: 463001

Provider Gender: Female

License number: C148618

NPI: 1144238098

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

865 3RD AVE STE 101

CHULA VISTA, CA 91911-1349

Phone: (619) 426-7910

Fax:

After Hours Phone: (619)

426-7910

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

NGUYEN, TRUC H

Provider ID: 78518

Provider Gender: Female

License number: A95596

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

<p>NPI: 1881884054 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Vietnamese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital Chula Vista, Sharp Chula Vista Med Ctr, Rady Childrens Hospital San Diego, Washington Hospital, Scripps Mercy Hospital <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 2440 FENTON ST # 100 CHULA VISTA, CA 91914-3516 <i>Phone:</i> (619) 656-3040 <i>Fax:</i> (619) 656-3045 <i>After Hours Phone:</i> (619) 656-3040 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> P, EB, IB, E, R, T <i>Hours:</i> M-SA 9AM-5PM</p>	<p>CHULA VISTA, CA 91914-4521 <i>Phone:</i> (619) 656-3020 <i>Fax:</i> (619) 656-3019 <i>After Hours Phone:</i> (619) 370-6661 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM</p>	<p>PIANSAY, MARIA CORAZON M <i>Provider ID:</i> 470963 <i>Provider Gender:</i> Female <i>License number:</i> A93785 <i>NPI:</i> 1669680351 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Tagalog <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 1635 3RD AVE STE J CHULA VISTA, CA 91911-5867 <i>Phone:</i> (619) 426-8121 <i>Fax:</i> (619) 426-5950 <i>After Hours Phone:</i> (619) 426-8121 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM</p>
<p>OIRA, VICTORIA R <i>Provider ID:</i> 73140 <i>Provider Gender:</i> Female <i>License number:</i> A51972 <i>NPI:</i> 1134172448 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Tagalog <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr, Rady Childrens Hospital San Diego <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 890 EASTLAKE PKWY STE 203</p>	<p>PIANSAY, MARIA CORAZON M <i>Provider ID:</i> 427322 <i>Provider Gender:</i> Female <i>License number:</i> A93785 <i>NPI:</i> 1669680351 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Tagalog <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista <i>Board Certified Specialty:</i> No IHP-SAN YSIDRO HEALTH CENTER 678 3RD AVE CHULA VISTA, CA 91910-5736 <i>Phone:</i> (619) 662-4100 <i>Fax:</i> <i>After Hours Phone:</i> (619) 662-4100 <i>Website:</i> www.ihpsocal.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM</p>	<p>PIZARRO, LUZVIMINDA L <i>Provider ID:</i> 314546 <i>Provider Gender:</i> Female <i>License number:</i> A40161 <i>NPI:</i> 1770594863 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Board Certified Specialty:</i> No IHP-SAN YSIDRO HEALTH CENTER 1637 3RD AVE STE H</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

CHULA VISTA, CA 91911-5823
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM

PIZARRO, LUZVIMINDA L

Provider ID: 427322
Provider Gender: Female
License number: A40161
NPI: 1770594863
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER
678 3RD AVE
CHULA VISTA, CA 91910-5736
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM

ROLLINS, AISHA I

Provider ID: 473795
Provider Gender: Female
License number: A120855
NPI: 1700103520
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
2440 FENTON ST # 100
CHULA VISTA, CA 91914-3516
Phone: (619) 656-3040
Fax:
After Hours Phone: (619)
656-3040
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

SALAZAR, JUANITA

Provider ID: 206355
Provider Gender: Female
License number: A78355
NPI: 1912938325
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910-2628

Phone: (619) 515-2500
Fax:
After Hours Phone: (619)
515-2500
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
T, ME
Hours: M-SA 9AM-5PM

SANCHEZ, CARLOS J

Provider ID: 50935
Provider Gender: Male
License number: A22648
NPI: 1114182094
Provider English Spoken: Yes
Provider Language(s) Spoken:
French, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr, Scripps Mercy
Hospital Chula Vista, Rady
Childrens Hospital San Diego,
Scripps Mercy Hospital
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
1635 3RD AVE STE J
CHULA VISTA, CA 91911-5867
Phone: (619) 426-8121
Fax: (619) 426-5950
After Hours Phone: (619)
426-8121
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM

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C. Directorio de proveedores de atención primaria

SANTIAGO, ROXANE M

Provider ID: 269279
Provider Gender: Female
License number: A122396
NPI: 1033461801
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Chula Vista Med Ctr,
Scripps Mercy Hospital Chula
Vista, Scripps Memorial Hospital,
Childrens Hosp And Resrch Ctr
At Oakland, Scripps Mercy
Hospital
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
865 3RD AVE STE 101
CHULA VISTA, CA 91911-1349
Phone: (619) 426-7910
Fax: (619) 426-2337
After Hours Phone: (619)
426-7910
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM

VALENCIA, MARILES F

Provider ID: 104059
Provider Gender: Female
License number: A54929
NPI: 1275541625
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Scripps Mercy

Hospital Chula Vista, Paradise
Valley Hospital, Sharp Chula
Vista Med Ctr, Rady Childrens
Hospital San Diego
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
1741 EASTLAKE PKWY STE
107
CHULA VISTA, CA 91915-2032
Phone: (619) 482-1700
Fax: (619) 475-4578
After Hours Phone: (619)
482-1700
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM

YAO, CATHERINE S

Provider ID: 371204
Provider Gender: Female
License number: A119644
NPI: 1801166442
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
769 MEDICAL CENTER CT STE
300
CHULA VISTA, CA 91911-6602
Phone: (619) 482-3090
Fax: (619) 482-7350
After Hours Phone: (619)
482-3090
Website:
Email:

Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM

ZARGAR, SHABNAM

Provider ID: 371075
Provider Gender: Female
License number: A128721
NPI: 1417256074
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: University Of
California Irvine Med Ctr, Desert
Regional Med Ctr, John F
Kennedy Memorial Hosp, Rady
Childrens Hospital San Diego
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
769 MEDICAL CENTER CT STE
300
CHULA VISTA, CA 91911-6602
Phone: (619) 482-3090
Fax: (619) 482-7350
After Hours Phone: (619)
482-3090
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM

PHYSICIANS ASSISTANT

REVELES, DIANA

Provider ID: 417641
Provider Gender: Female
License number: PA19306

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C. Directorio de proveedores de atención primaria

NPI: 1548455405
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
 Phone: (619) 515-2325
 Fax:
 After Hours Phone: (619) 515-2325
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-F 8AM-5PM, SA 9AM-5PM

PODIATRIST

MANCHEL, BRUCE A
 Provider ID: 427322
 Provider Gender: Male
 License number: DPM2930
 NPI: 1790890788
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 678 3RD AVE
 CHULA VISTA, CA 91910-5736
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619) 662-4100

Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM

SCHNEIDER, SARAH A
 Provider ID: 206355
 Provider Gender: Female
 License number: DPM4819
 NPI: 1326282237
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
 Phone: (619) 515-2500

Fax:
 After Hours Phone: (619) 515-2500
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, R, T, ME
 Hours: M-SA 9AM-5PM

REGISTERED PHYSICAL THERAPIST

AMAYA, RICARDO
 Provider ID: 206355
 Provider Gender: Male
 License number: PT37189

NPI: 1437445566
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
 Phone: (619) 515-2500
 Fax:
 After Hours Phone: (619) 515-2500
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, R, T, ME
 Hours: M-SA 9AM-5PM

CUMMINGS, GEORGE P
 Provider ID: 206355
 Provider Gender: Male
 License number: PT295173
 NPI: 1497236384
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
 Phone: (619) 515-2500
 Fax:
 After Hours Phone: (619) 515-2500
 Website: www.fhcsd.org
 Email:

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C. Directorio de proveedores de atención primaria

Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ☯ Accessibility: P, EB, IB, E, R, T, ME
 Hours: M-SA 9AM-5PM

GEORGE, JENNIFER A

Provider ID: 206355
 Provider Gender: Female
 License number: PT294245
 NPI: 1215402177
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
 Phone: (619) 515-2500
 Fax:
 After Hours Phone: (619) 515-2500
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ☯ Accessibility: P, EB, IB, E, R, T, ME
 Hours: M-SA 9AM-5PM

MIGNEA, DAVID S

Provider ID: 206355
 Provider Gender: Male
 License number: PT293536
 NPI: 1043736879
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No

Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
 Phone: (619) 515-2500
 Fax:
 After Hours Phone: (619) 515-2500
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ☯ Accessibility: P, EB, IB, E, R, T, ME
 Hours: M-SA 9AM-5PM

RODRIGUEZ, CASSANDRA

Provider ID: 206355
 Provider Gender: Female
 License number: PT292823
 NPI: 1770025595
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
 Phone: (619) 515-2500
 Fax:
 After Hours Phone: (619) 515-2500
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ☯ Accessibility: P, EB, IB, E, R, T, ME
 Hours: M-SA 9AM-5PM

☯ Accessibility: P, EB, IB, E, R, T, ME
 Hours: M-SA 9AM-5PM

TABONE, MICHELLE K

Provider ID: 206355
 Provider Gender: Female
 License number: PT291706
 NPI: 1548714652
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
 Phone: (619) 515-2500
 Fax:
 After Hours Phone: (619) 515-2500
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ☯ Accessibility: P, EB, IB, E, R, T, ME
 Hours: M-SA 9AM-5PM

RHEUMATOLOGY

REDDY, DANA A

Provider ID: 427322
 Provider Gender: Female
 License number: A115598
 NPI: 1144538778
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy

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C. Directorio de proveedores de atención primaria

Hospital, Sharp Memorial
Hospital, Scripps Memorial
Hospital, Scripps Memorial
Hospital Encinitas
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER
678 3RD AVE
CHULA VISTA, CA 91910-5736
Phone: (619) 662-4100

Fax:
After Hours Phone: (619)
662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-F 8AM-5PM, SA
9AM-5PM

SPEECH PATHOLOGIST

CABADING, DOREEN L

Provider ID: 427322

Provider Gender: Female

License number: SP18192

NPI: 1043507585

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH

CENTER

678 3RD AVE

CHULA VISTA, CA 91910-5736

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

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

9AM-5PM

EL CAJON

CARDIOVASCULAR DISEASE

KAFRI, HASSAN

Provider ID: 329504

Provider Gender: Male

License number: A96002

NPI: 1730258401

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, Farsi, German, Russian,
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital, Scripps Mercy Hospital

Chula Vista, Sharp Chula Vista

Med Ctr, Grossmont Hospital,

Sharp Memorial Hospital,

Alvarado Hospital Llc, Redlands

Community Hosp

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH

CENTER

436 S MAGNOLIA AVE STE 101

EL CAJON, CA 92020-5219

Phone: (661) 662-4100

Fax:

After Hours Phone: (661)

662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-F 8AM-5PM, SA
9AM-5PM

SCHWARTZ, JOSEPH A

Provider ID: 478971

Provider Gender: Male

License number: A36637

NPI: 1295747038

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Long Beach

Memorial Med Ctr, Providence St

Mary Medical Center

Board Certified Specialty: No

BORREGO COMMUNITY

HEALTH FOUNDTION

133 W MAIN ST STE 100

EL CAJON, CA 92020-3325

Phone: (619) 401-0404

Fax:

After Hours Phone: (619)

401-0404

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

CERTIFIED NURSE PRACTITIONER

BELEN, NEZER B

Provider ID: 418340

Provider Gender: Male

License number: NP95009292

NPI: 1386120723

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

BLAIS, BRITNEY

Provider ID: 418340
Provider Gender: Female
License number: NP95014574
NPI: 1952852808
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-F 8:30AM-5:30PM, SA

9AM-5PM
DELA CRUZ, ANGELITO L
Provider ID: 206272
Provider Gender: Male
License number: NP95004663
NPI: 1457806366
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-NEIGHBORHOOD HEALTHCARE
 855 E MADISON AVE
 EL CAJON, CA 92020-3819
Phone: (619) 440-2751
Fax:
After Hours Phone: (619) 440-2751
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM

GARCIA, JOHNNY

Provider ID: 418340
Provider Gender: Male
License number: NP95007000
NPI: 1932622156
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007

Phone: (619) 515-2498
Fax:
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

KELLOGG, KRISTEN J

Provider ID: 418340
Provider Gender: Female
License number: NP95009180
NPI: 1649757741
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

KING, KRISTI

Provider ID: 206272

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C. Directorio de proveedores de atención primaria

Provider Gender: Female
License number: NP19685
NPI: 1588988703
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-NEIGHBORHOOD HEALTHCARE
855 E MADISON AVE
EL CAJON, CA 92020-3819
Phone: (760) 466-9800
Fax:
After Hours Phone: (760) 466-9800
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM

LEONARD, BEVERLY S

Provider ID: 206354
Provider Gender: Female
License number: NP10943
NPI: 1285772392
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax:
After Hours Phone: (619) 515-2499

Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

LU, TAMMY C

Provider ID: 206354
Provider Gender: Female
License number: NP95007253
NPI: 1457879132
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax:
After Hours Phone: (619) 515-2499

Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

MANGENE, CYNTHIA L

Provider ID: 206354
Provider Gender: Female
License number: NP6782
NPI: 1548292626
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax:
After Hours Phone: (619) 515-2499
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

OCHOA, ERLINDA A

Provider ID: 185267
Provider Gender: Female
License number: NP4430
NPI: 1346437464
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC
165 S 1ST ST
EL CAJON, CA 92019-4795
Phone: (619) 312-0347
Fax:
After Hours Phone: (619) 312-0347
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM

OCHOA, ERLINDA A

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C. Directorio de proveedores de atención primaria

Provider ID: 418501
Provider Gender: Female
License number: NP4430
NPI: 1346437464
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC
1032 BROADWAY
EL CAJON, CA 92021-7416
Phone: (619) 795-5991
Fax:
After Hours Phone: (619)
795-5991
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

ODA, THAGHAR M
Provider ID: 206354
Provider Gender: Female
License number: NP95000205
NPI: 1063835692
Provider English Spoken: Yes
Provider Language(s) Spoken:
Amharic, Arabic
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax:
After Hours Phone: (619)
515-2499

Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: ME
Hours: M-SA 9AM-5PM

ODA, THAGHAR M
Provider ID: 206354
Provider Gender: Female
License number: RN810863
NPI: 1063835692
Provider English Spoken: Yes
Provider Language(s) Spoken:
Amharic, Arabic
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax:

After Hours Phone: (619)
515-2499
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: ME
Hours: M-SA 9AM-5PM

ODA, THAGHAR M
Provider ID: 418340
Provider Gender: Female
License number: NP95000205
NPI: 1063835692
Provider English Spoken: Yes
Provider Language(s) Spoken:
Amharic, Arabic

Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619)
515-2498
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

ODA, THAGHAR M
Provider ID: 418340
Provider Gender: Female
License number: RN810863
NPI: 1063835692
Provider English Spoken: Yes
Provider Language(s) Spoken:
Amharic, Arabic
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619)
515-2498
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):

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C. Directorio de proveedores de atención primaria

No
 ☯ *Accessibility:*
Hours: M-F 8:30AM-5:30PM, SA
 9AM-5PM

REAL, MARIA F

Provider ID: 185267
Provider Gender: Female
License number: NP17328
NPI: 1548450471
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 165 S 1ST ST
 EL CAJON, CA 92019-4795
Phone: (619) 312-0347
Fax:
After Hours Phone: (619)
 312-0347
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM

REID, EMILY

Provider ID: 185267
Provider Gender: Female
License number: NP95002766
NPI: 1083081467
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 165 S 1ST ST
 EL CAJON, CA 92019-4795

Phone: (619) 312-0347
Fax:
After Hours Phone: (619)
 312-0347
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM

SMITH, SHARON T

Provider ID: 418340
Provider Gender: Female
License number: RN428876
NPI: 1780603597
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619)
 515-2498
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-F 8:30AM-5:30PM, SA
 9AM-5PM

SMITH, SHARON T

Provider ID: 418340
Provider Gender: Female

License number: NP15444
NPI: 1780603597
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619)
 515-2498
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-F 8:30AM-5:30PM, SA
 9AM-5PM

SWAN, MELANIE A

Provider ID: 206354
Provider Gender: Female
License number: NP95000818
NPI: 1871934414
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax:
After Hours Phone: (619)
 515-2499
Website: www.fhcsd.org

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

VERDUZCO GONZALEZ, AURORA B

Provider ID: 185267
Provider Gender: Female
License number: NP95001961
NPI: 1932452323
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No

Hospital Affiliation:
Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC
165 S 1ST ST
EL CAJON, CA 92019-4795
Phone: (619) 312-0347
Fax:

After Hours Phone: (619)
312-0347
Website: www.lamaestra.org
Email:

Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM

VILLANUEVA DE GUTIE, BERENICE

Provider ID: 185267
Provider Gender: Female
License number: NP95002188
NPI: 1952795536
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation:
Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC
165 S 1ST ST
EL CAJON, CA 92019-4795
Phone: (619) 312-0347
Fax:

After Hours Phone: (619)
312-0347
Website: www.lamaestra.org
Email:

Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM

WILDER, ASHLEY

Provider ID: 418340
Provider Gender: Female
License number: NP95016274
NPI: 1750766895
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:

After Hours Phone: (619)
515-2498
Website: www.fhcsd.org
Email:

Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

WILLIAMS, BREAHA A
Provider ID: 185267
Provider Gender: Female
License number: NP95001840
NPI: 1063884864
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC
165 S 1ST ST
EL CAJON, CA 92019-4795
Phone: (619) 312-0347
Fax:

After Hours Phone: (619)
312-0347
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM

CERTIFIED REGISTERED NURSE MIDWIFE

CORRY, ANDREA C
Provider ID: 418340
Provider Gender: Female
License number: NM1721
NPI: 1255489571
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007

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C. Directorio de proveedores de atención primaria

Phone: (619) 515-2498

Fax:

After Hours Phone: (619)
515-2498

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

CHIROPRACTOR

ILCHENA, ALESANDRA N

Provider ID: 206272

Provider Gender: Female

License number: DC32800

NPI: 1871046664

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Palomar

Medical Center

Board Certified Specialty: No

IHP-NEIGHBORHOOD

HEALTHCARE

855 E MADISON AVE

EL CAJON, CA 92020-3819

Phone: (619) 440-2751

Fax:

After Hours Phone: (619)

440-2751

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

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

9AM-5PM

ILCHENA, ALESANDRA N

Provider ID: 478971

Provider Gender: Female

License number: DC32800

NPI: 1871046664

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Palomar

Medical Center

Board Certified Specialty: No

BORREGO COMMUNITY

HEALTH FOUNDTION

133 W MAIN ST STE 100

EL CAJON, CA 92020-3325

Phone: (619) 401-0404

Fax:

After Hours Phone: (619)

401-0404

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

SOSA, DAVID S

Provider ID: 206354

Provider Gender: Male

License number: DC33150

NPI: 1013308675

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax:

After Hours Phone: (619)
515-2499

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

SOSA, DAVID S

Provider ID: 418340

Provider Gender: Male

License number: DC33150

NPI: 1013308675

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2498

Fax:

After Hours Phone: (619)

515-2498

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

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

9AM-5PM

UY, ASHLEY N

Provider ID: 418340

Provider Gender: Female

License number: DC33869

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

NPI: 1174059760
Provider English Spoken: Yes
Provider Language(s) Spoken: Chinese
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

ZECHA, RONALD S

Provider ID: 206272
Provider Gender: Male
License number: DC28605
NPI: 1427252121
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-NEIGHBORHOOD HEALTHCARE
855 E MADISON AVE
EL CAJON, CA 92020-3819
Phone: (619) 440-2751
Fax:
After Hours Phone: (619) 440-2751
Website: www.ihpsocal.org

Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM

ENDOCRINOLOGY METABOLISM DIABETES

NAGELBERG, JODI B

Provider ID: 418340
Provider Gender: Female
License number: A146838
NPI: 1720474141
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

VINCENT, LAUREN C

Provider ID: 418340
Provider Gender: Female
License number: A134303
NPI: 1053757997

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

FAMILY PRACTICE

ABDALLAH, ALI H

Provider ID: 418340
Provider Gender: Male
License number: 20A15471
NPI: 1649699968
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org

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C. Directorio de proveedores de atención primaria

<p><i>Email:</i> Arabic, Kurdish, Spanish, Syriac <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> No <i>Hours:</i> M-F 8:30AM-5:30PM, SA 9AM-5PM</p> <p>AL ANI, NAJWAN N <i>Provider ID:</i> 418340 <i>Provider Gender:</i> Female <i>License number:</i> A144974 <i>NPI:</i> 1275948473 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 525 E MAIN ST EL CAJON, CA 92020-4007 <i>Phone:</i> (619) 515-2498 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2498 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> No <i>Hours:</i> M-F 8:30AM-5:30PM, SA 9AM-5PM</p> <p>ALMANSOUR, MUMTAZ T <i>Provider ID:</i> 104075 <i>Provider Gender:</i> Male <i>License number:</i> A55926 <i>NPI:</i> 1558567446 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i></p>	<p><i>Arabic, Kurdish, Spanish, Syriac</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Alvarado Hospital Llc <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 330 S MAGNOLIA AVE STE 101 EL CAJON, CA 92020-5221 <i>Phone:</i> (619) 593-3007 <i>Fax:</i> (619) 749-3221 <i>After Hours Phone:</i> (619) 593-3007 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> P, EB, IB, E <i>Hours:</i> M-SA 9AM-5PM</p> <p>ALMANSOUR, MUMTAZ T <i>Provider ID:</i> 237438 <i>Provider Gender:</i> Male <i>License number:</i> A55926 <i>NPI:</i> 1558567446 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic, Kurdish, Spanish, Syriac <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Alvarado Hospital Llc <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 165 S 1ST ST EL CAJON, CA 92019-4795 <i>Phone:</i> (619) 312-0347 <i>Fax:</i> (619) 640-3584 <i>After Hours Phone:</i> (619) 312-0347 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i></p>	<p>No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM</p> <p>BAGINGITO, AUSTIN G <i>Provider ID:</i> 418340 <i>Provider Gender:</i> Male <i>License number:</i> A163977 <i>NPI:</i> 1942705637 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 525 E MAIN ST EL CAJON, CA 92020-4007 <i>Phone:</i> (619) 515-2498 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2498 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-F 8:30AM-5:30PM, SA 9AM-5PM</p> <p>BROWN, BRANDON S <i>Provider ID:</i> 418340 <i>Provider Gender:</i> Male <i>License number:</i> A148499 <i>NPI:</i> 1013399559 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO</p>
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C. Directorio de proveedores de atención primaria

525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

CORMAN, DANIEL M
Provider ID: 418340
Provider Gender: Male
License number: 20A13060
NPI: 1629339593
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

GHAFFARI, DAUOD M
Provider ID: 478971
Provider Gender: Male
License number: A98486
NPI: 1053417691
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
BORREGO COMMUNITY HEALTH FOUNDTION
133 W MAIN ST STE 100
EL CAJON, CA 92020-3325
Phone: (619) 401-0404
Fax:
After Hours Phone: (619) 401-0404
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM

GORDON, CHRISTOPHER J
Provider ID: 418340
Provider Gender: Male
License number: A83390
NPI: 1477711521
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007

Phone: (619) 515-2498
Fax:
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

HASTANAN, CAROL L
Provider ID: 206354
Provider Gender: Female
License number: A110192
NPI: 1861648461
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax:
After Hours Phone: (619) 515-2499
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

JALISI, NEJAT A
Provider ID: 393480
Provider Gender: Female
License number: A105304

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C. Directorio de proveedores de atención primaria

NPI: 1063651552
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Arabic, Farsi, Spanish, Vietnamese
 Cultural Competency: No
 Hospital Affiliation: Sharp Memorial Hospital
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 1320 E MADISON AVE
 EL CAJON, CA 92021-8531
 Phone: (619) 456-9800
 Fax: (619) 456-9804
 After Hours Phone: (619) 456-9800
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM

JIBRI, NISHWAN N
 Provider ID: 206272
 Provider Gender: Male
 License number: A135468
 NPI: 1164788683
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Arabic, Italian
 Cultural Competency: No
 Hospital Affiliation: Palomar Medical Center
 Board Certified Specialty: No
 IHP-NEIGHBORHOOD HEALTHCARE
 855 E MADISON AVE
 EL CAJON, CA 92020-3819
 Phone: (619) 440-2751
 Fax:
 After Hours Phone: (619) 440-2751

Website: www.ihsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM

KASAWA, JOHN
 Provider ID: 329504
 Provider Gender: Male
 License number: A79338
 NPI: 1134230329
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Arabic, Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 436 S MAGNOLIA AVE STE 101
 EL CAJON, CA 92020-5219
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619) 662-4100
 Website: www.ihsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM

KORKIS, EBTISSAM H
 Provider ID: 383504
 Provider Gender: Female
 License number: A89767
 NPI: 1780746263
 Provider English Spoken: Yes

Provider Language(s) Spoken: Arabic, French, Kurdish
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 1530 JAMACHA RD # E-F
 EL CAJON, CA 92019-3700
 Phone: (619) 441-9200
 Fax: (619) 441-0710
 After Hours Phone: (619) 441-9200
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM

KORKIS, EBTISSAM H , MD
 Provider ID: 383504
 Provider Gender: Female
 License number: A89767
 NPI: 1780746263
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Arabic, French, Kurdish
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 1530 JAMACHA RD # E-F
 EL CAJON, CA 92019-3700
 Phone: (619) 441-9200
 Fax: (619) 441-0710
 After Hours Phone: (619) 441-9200
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999

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C. Directorio de proveedores de atención primaria

American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM

KUNIN-RIDA, TERI L

Provider ID: 553243
Provider Gender: Female
License number: G80071
NPI: 1265580112
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Armenian, Spanish
Cultural Competency: No
Hospital Affiliation: Alvarado Hosp Med Ctr, Sharp Mary Birch Hosp For Women And Newborns, Sharp Memorial Hospital, Alvarado Hospital Llc
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 165 S 1ST ST
 EL CAJON, CA 92019-4795
Phone: (619) 312-0347
Fax: (619) 749-5480
After Hours Phone: (619) 312-0347
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM

LIN, SHUANG

Provider ID: 206354
Provider Gender: Female
License number: A138887
NPI: 1689093684
Provider English Spoken: Yes
Provider Language(s) Spoken: Mandarin
Cultural Competency: No

Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax:
After Hours Phone: (619) 515-2499
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: ME
Hours: M-SA 9AM-5PM

MANDOYAN, AUSTIN

Provider ID: 418340
Provider Gender: Female
License number: A161682
NPI: 1841726148
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No

Accessibility:
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

MANSOUR, WASIM

Provider ID: 471194
Provider Gender: Male
License number: 20A15860
NPI: 1649627696
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 330 S MAGNOLIA AVE STE 101
 EL CAJON, CA 92020-5221
Phone: (619) 593-3007
Fax: (619) 749-3221
After Hours Phone: (619) 593-3007
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM

MOULD, KEVIN S

Provider ID: 206272
Provider Gender: Male
License number: A90920
NPI: 1255351748
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Woodland Memorial Hosp
Board Certified Specialty: No
 IHP-NEIGHBORHOOD HEALTHCARE

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

855 E MADISON AVE
EL CAJON, CA 92020-3819

Phone: (619) 440-2751

Fax:

After Hours Phone: (619)

440-2751

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

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

9AM-5PM

NASSIR, BASSAM K

Provider ID: 329504

Provider Gender: Male

License number: A101888

NPI: 1386848166

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH

CENTER

436 S MAGNOLIA AVE STE 101

EL CAJON, CA 92020-5219

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

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

9AM-5PM

NGUYEN, KERRIE K

Provider ID: 206272

Provider Gender: Female

License number: A158244

NPI: 1407380710

Provider English Spoken: Yes

Provider Language(s) Spoken:

Vietnamese

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-NEIGHBORHOOD

HEALTHCARE

855 E MADISON AVE

EL CAJON, CA 92020-3819

Phone: (619) 440-2751

Fax:

After Hours Phone: (619)

440-2751

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

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

9AM-5PM

Niazi, Harris O

Provider ID: 418340

Provider Gender: Male

License number: A146111

NPI: 1174905871

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2498

Fax:

After Hours Phone: (619)

515-2498

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

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

9AM-5PM

PATEL, RAKESH R

Provider ID: 206272

Provider Gender: Male

License number: A76352

NPI: 1205861010

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-NEIGHBORHOOD

HEALTHCARE

855 E MADISON AVE

EL CAJON, CA 92020-3819

Phone: (619) 440-2751

Fax:

After Hours Phone: (619)

440-2751

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

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

9AM-5PM

PUTRUS, RAMIZ S

Provider ID: 418501

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Provider Gender: Male
License number: A68184
NPI: 1144300534
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 1032 BROADWAY
 EL CAJON, CA 92021-7416
Phone: (619) 795-5991
Fax:
After Hours Phone: (619)
 795-5991
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility: W
Hours: M-F 8:30AM-5:30PM, SA
 9AM-5PM

PUTRUS, RAMIZ S

Provider ID: 500204
Provider Gender: Male
License number: A68184
NPI: 1144300534
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 1032 BROADWAY
 EL CAJON, CA 92021-7416
Phone: (619) 795-5991
Fax: (619) 795-5992
After Hours Phone: (619)
 795-5991
Website:
Email:
Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM

ROUEL, LINDA Y

Provider ID: 308485
Provider Gender: Female
License number: A107575
NPI: 1326128950
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Arabic, Mandarin, Syriac
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital, Sharp
 Memorial Hospital, Grossmont
 Hospital
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 860 JAMACHA RD STE 107
 EL CAJON, CA 92019-3225
Phone: (619) 456-9920
Fax: (619) 456-9340
After Hours Phone: (619)
 456-9920

Website:

Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM

SAZEGAR, PAYAM P

Provider ID: 542800
Provider Gender: Male
License number: A122685
NPI: 1750623716
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:

Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 165 S 1ST ST
 EL CAJON, CA 92019-4795
Phone: (619) 312-0347
Fax: (619) 749-5480
After Hours Phone: (619)
 312-0347
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM

SAZEGAR, PAYAM P

Provider ID: 542802
Provider Gender: Male
License number: A122685
NPI: 1750623716
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 1032 BROADWAY
 EL CAJON, CA 92021-7416
Phone: (619) 795-5991
Fax: (619) 795-5992
After Hours Phone: (619)
 795-5991
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM

TESSEMA, JUDITH

Provider ID: 206272

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Provider Gender: Female
License number: A136409
NPI: 1083059265
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-NEIGHBORHOOD HEALTHCARE
 855 E MADISON AVE
 EL CAJON, CA 92020-3819
Phone: (619) 440-2751

Fax:
After Hours Phone: (619) 440-2751
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM

THIERMANN, PAIGE A

Provider ID: 206272
Provider Gender: Female
License number: A114779
NPI: 1134411432
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Kurdish, Spanish, Syriac
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-NEIGHBORHOOD HEALTHCARE
 855 E MADISON AVE
 EL CAJON, CA 92020-3819

Phone: (619) 440-2751
Fax:
After Hours Phone: (619) 440-2751
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM

FQHC

CENTRO MEDICO EL CAJON,

Provider ID: 478971
Provider Gender:
License number: 550000430
NPI: 1154480069
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: BORREGO COMMUNITY HEALTH FOUNDTION
 133 W MAIN ST STE 100
 EL CAJON, CA 92020-3325
Phone: (619) 873-8940
Fax: (619) 401-0522
After Hours Phone: (619) 873-8940
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ♿ *Accessibility:* W
Hours: M-SA 9AM-5PM

CHASE AVENUE FAMILY HEALTH CTRS INC,

Provider ID: 206354
Provider Gender:
License number:
NPI: 1104861681
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 593-7164
After Hours Phone: (619) 515-2499
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:* ME
Hours: M-SA 9AM-5PM

FAMILY HLTH CTR SAN DIEGO-EL CAJON,

Provider ID: 418340
Provider Gender:
License number: 550003553
NPI: 1932561198
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax: (619) 269-0191
After Hours Phone: (619) 515-2498

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

LA MAESTRA CHC EL CAJON BROADWAY,

Provider ID: 418501

Provider Gender:

License number: 550003567

NPI: 1134590086

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty:

LA MAESTRA FAMILY CLINIC
1032 BROADWAY

EL CAJON, CA 92021-7416

Phone: (619) 795-5991

Fax: (619) 795-5992

After Hours Phone: (619)
795-5991

Website: www.lamaestra.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

LA MAESTRA FAMILY CLINIC INC,

Provider ID: 185267

Provider Gender:

License number:

NPI: 1053526756

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty:

LA MAESTRA FAMILY CLINIC
165 S 1ST ST

EL CAJON, CA 92019-4795

Phone: (619) 312-0347

Fax: (619) 749-5480

After Hours Phone: (619)

312-0347

Website: www.lamaestra.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

LA MAESTRA FAMILY CLINIC INC,

Provider ID: 185267

Provider Gender:

License number:

NPI: 1336353721

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty:

LA MAESTRA FAMILY CLINIC
165 S 1ST ST

EL CAJON, CA 92019-4795

Phone: (619) 312-0347

Fax: (619) 749-5480

After Hours Phone: (619)

312-0347

Website: www.lamaestra.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

NEIGHBORHOOD HEALTHCARE EL CAJON,

Provider ID: 206272

Provider Gender:

License number: 090000156

NPI: 1760667950

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty:

IHP-NEIGHBORHOOD
HEALTHCARE

855 E MADISON AVE

EL CAJON, CA 92020-3819

Phone: (619) 440-2751

Fax: (360) 462-2746

After Hours Phone: (619)

440-2751

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA
9AM-5PM

SAN YSIDRO HEALTH CHALDEAN AND MIDDLE EASTERN SOCIAL SVS,

Provider ID: 329504

Provider Gender:

License number:

NPI: 1568845741

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty:

IHP-SAN YSIDRO HEALTH
CENTER

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

436 S MAGNOLIA AVE STE 101
EL CAJON, CA 92020-5219
Phone: (619) 662-4100
Fax: (619) 401-7411
After Hours Phone: (619)
662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM

HEPATOLOGY

GISH, ROBERT G

Provider ID: 185267
Provider Gender: Male
License number: G45632
NPI: 1548281322
Provider English Spoken: Yes
Provider Language(s) Spoken:
Dutch, French, Spanish,
Vietnamese
Cultural Competency: No
Hospital Affiliation: Providence
Santa Rosa Memorial Hospital,
California Pacific Med Ctr Ca
Campus Hosp, Ucsd Medical Ctr,
Stanford Health Care, California
Pacific Med Ctr, Selma
Community Hospital, Adventist
Medical Center, Adventist Med
Ctr Reedley, Loma Linda
University Comm Med Ctr,
Regional Medical Ctr Of San
Jose
Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC
165 S 1ST ST
EL CAJON, CA 92019-4795

Phone: (619) 312-0347
Fax:
After Hours Phone: (619)
312-0347
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM

INTERNAL MEDICINE

AL-TAMEEMI, AHMED

Provider ID: 478971
Provider Gender: Male
License number: A151547
NPI: 1134513211
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
BORREGO COMMUNITY
HEALTH FOUNDTION
133 W MAIN ST STE 100
EL CAJON, CA 92020-3325
Phone: (619) 401-0404
Fax:
After Hours Phone: (619)
401-0404
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM

ALWASH, MUSTAFA A

Provider ID: 418340
Provider Gender: Male

License number: A160516
NPI: 1679936439
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619)
515-2498
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

BENSON, JIMI O

Provider ID: 519063
Provider Gender: Male
License number: A116611
NPI: 1477751667
Provider English Spoken: Yes
Provider Language(s) Spoken:
Vietnamese
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista, Alvarado Hosp Med
Ctr, Sharp Chula Vista Med Ctr,
Alvarado Hospital Llc, Paradise
Valley Hospital
Board Certified Specialty: No
HEALTH EXCEL IPA INC
1351 BROADWAY

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

EL CAJON, CA 92021-5811

Phone: (619) 383-6703

Fax: (866) 473-3324

After Hours Phone: (619)

383-6703

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

BRIONES COLMAN, FELICIA R

Provider ID: 206354

Provider Gender: Female

License number: A80153

NPI: 1962517367

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax:

After Hours Phone: (619)

515-2499

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

DUONG, MAI T

Provider ID: 418340

Provider Gender: Female

License number: A127798

NPI: 1629339304

Provider English Spoken: Yes

Provider Language(s) Spoken:

Vietnamese

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2498

Fax:

After Hours Phone: (619)

515-2498

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

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

9AM-5PM

ELFEKY, SARAH

Provider ID: 206272

Provider Gender: Female

License number: A171410

NPI: 1760895510

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-NEIGHBORHOOD

HEALTHCARE

855 E MADISON AVE

EL CAJON, CA 92020-3819

Phone: (619) 440-2751

Fax: (858) 633-4692

After Hours Phone: (619)

440-2751

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

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

9AM-5PM

ELIAS, RAMIZ N

Provider ID: 427895

Provider Gender: Male

License number: A99956

NPI: 1417164518

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital, Alvarado Hosp Med Ctr,

Sharp Chula Vista Med Ctr

Board Certified Specialty: No

HEALTH EXCEL IPA INC

231 W MAIN ST FL 2

EL CAJON, CA 92020-3317

Phone: (619) 631-7300

Fax: (619) 631-7530

After Hours Phone: (619)

631-7300

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 18/200

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

ELIAS, RAMIZ N , MD

Provider ID: 430641

Provider Gender: Male

License number: A99956

NPI: 1417164518

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Hospital Affiliation: Grossmont Hospital, Alvarado Hosp Med Ctr, Sharp Chula Vista Med Ctr
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 231 W MAIN ST
 EL CAJON, CA 92020-3317
Phone: (858) 384-6857
Fax: (858) 277-1475
After Hours Phone: (858) 384-6857
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
 ☯ *Accessibility:* P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM

GORGES, RANDA A

Provider ID: 418340
Provider Gender: Female
License number: A138815
NPI: 1285079509
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No

☯ *Accessibility:*
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

JABRI, ZAIN T

Provider ID: 418340
Provider Gender: Male
License number: A160760
NPI: 1891159620
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic
Cultural Competency: No
Hospital Affiliation: St Agnes Medical Center, City Of Hope National Med Ctr, John F Kennedy Memorial Hosp
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

JAHANPANA, FERESHTEH, MD

Provider ID: 455289
Provider Gender: Female
License number: G65104
NPI: 1518034115
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Faroese, Farsi, Spanish

Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 343 E MAIN ST STE 101
 EL CAJON, CA 92020-3942
Phone: (619) 447-6001
Fax: (619) 447-6096
After Hours Phone: (619) 447-6001
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM

KHANNA, POORNIMA

Provider ID: 454122
Provider Gender: Female
License number: A70714
NPI: 1598862583
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Kannada
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital
Board Certified Specialty: No
HEALTH EXCEL IPA INC
 1032 BROADWAY
 EL CAJON, CA 92021-7416
Phone: (619) 795-5991
Fax: (619) 640-3584
After Hours Phone: (619) 795-5991
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
 ☯ *Accessibility:*

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Hours: M-SA 9AM-5PM

LAU, BENISON C

Provider ID: 206272
 Provider Gender: Male
 License number: A161074
 NPI: 1255726154
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-NEIGHBORHOOD
 HEALTHCARE
 855 E MADISON AVE
 EL CAJON, CA 92020-3819
 Phone: (619) 440-2751
 Fax:
 After Hours Phone: (619)
 440-2751
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: W
 Hours: M-F 8AM-5PM, SA
 9AM-5PM

PARIKH, MILIND D

Provider ID: 418340
 Provider Gender: Male
 License number: 20A13745
 NPI: 1194161406
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Gujarati, Hindi, Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp Chula
 Vista Med Ctr
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2498

Fax:

After Hours Phone: (619)

515-2498

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-F 8:30AM-5:30PM, SA
 9AM-5PM

RATNIEWSKI, ALFREDO

Provider ID: 478971
 Provider Gender: Male
 License number: C42220
 NPI: 1689768459
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 French, Hebrew, Spanish
 Cultural Competency: No
 Hospital Affiliation: Palomar
 Medical Center
 Board Certified Specialty: No
 BORREGO COMMUNITY
 HEALTH FOUNDTION
 133 W MAIN ST STE 100
 EL CAJON, CA 92020-3325
 Phone: (619) 873-8940
 Fax:
 After Hours Phone: (619)
 873-8940
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM

REDDY, ARJUN N , MD

Provider ID: 428134

Provider Gender: Male

License number: A61204

NPI: 1730132457

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

5442 SYCUAN RD

EL CAJON, CA 92019-1816

Phone: (619) 445-0707

Fax:

After Hours Phone: (619)

445-0707

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, R, T

Hours: M-SA 9AM-5PM

ROUEL, LINDA Y

Provider ID: 308485
 Provider Gender: Female
 License number: A107575
 NPI: 1326128950
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Arabic, Mandarin, Syriac
 Cultural Competency: No
 Hospital Affiliation: Scripps
 Memorial Hospital, Sharp
 Memorial Hospital, Grossmont
 Hospital
 Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 860 JAMACHA RD STE 107
 EL CAJON, CA 92019-3225

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Phone: (619) 456-9920
 Fax: (619) 456-9340
 After Hours Phone: (619)
 456-9920

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

ROUEL, WADI

Provider ID: 414422

Provider Gender: Male

License number: C55979

NPI: 1740254713

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, Spanish, Syriac

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Scripps

Memorial Hospital, Grossmont

Hospital

Board Certified Specialty: No

HEALTH EXCEL IPA INC

860 JAMACHA RD STE 107

EL CAJON, CA 92019-3225

Phone: (619) 456-9920

Fax: (619) 456-9340

After Hours Phone: (619)

456-9920

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

SHEIKH-MOHAMED, HALA

Provider ID: 418340

Provider Gender: Female

License number: A159247

NPI: 1972946770

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
 SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-5498

Fax:

After Hours Phone: (619)

515-5498

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

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

9AM-5PM

SIHOTA, GURPREET

Provider ID: 206354

Provider Gender: Female

License number: 20A13700

NPI: 1659715852

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
 SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax:

After Hours Phone: (619)

515-2499

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

TOULOUIE, ELAHE

Provider ID: 261943

Provider Gender: Female

License number: A73141

NPI: 1235197856

Provider English Spoken: Yes

Provider Language(s) Spoken:

Armenian, Faroese, Farsi,

German, Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital, Alvarado Hosp Med Ctr

Board Certified Specialty: No

HEALTH EXCEL IPA INC

1580 N 2ND ST

EL CAJON, CA 92021-3447

Phone: (619) 447-2425

Fax: (858) 452-9276

After Hours Phone: (619)

447-2425

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

VETTICADEN, SANTOSH J

Provider ID: 206272

Provider Gender: Male

License number: C53062

NPI: 1679102461

Provider English Spoken: Yes

Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-NEIGHBORHOOD
 HEALTHCARE
 855 E MADISON AVE
 EL CAJON, CA 92020-3819
Phone: (619) 440-2751
Fax:
After Hours Phone: (619)
 440-2751
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
 9AM-5PM

YOON, TAE H

Provider ID: 418340
Provider Gender: Male
License number: C161090
NPI: 1508918178
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Korean
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619)
 515-2498
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):

No
 ♿ *Accessibility:*
Hours: M-F 8:30AM-5:30PM, SA
 9AM-5PM

INTERVENTIONAL CARDIOLOGY

MOUSSAVIAN, MEHRAN

Provider ID: 418340
Provider Gender: Male
License number: 20A7241
NPI: 1689788234
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula
 Vista Med Ctr, Tri City Medical
 Ctr, Sharp Memorial Hospital,
 Alvarado Hospital Llc, Grossmont
 Hospital
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619)
 515-2498
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-F 8:30AM-5:30PM, SA
 9AM-5PM

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI A

Provider ID: 418340

Provider Gender: Female
License number: 20A14919
NPI: 1619397031
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
 Hospital, Scripps Mercy Hospital
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619)
 515-2498
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-F 8:30AM-5:30PM, SA
 9AM-5PM

BUECHNER, CHARLENE A

Provider ID: 418340
Provider Gender: Female
License number: A68463
NPI: 1376663831
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
 Memorial Hospital, Scripps
 Mercy Hospital, Scripps Mercy
 Hospital Chula Vista, Sharp Mary
 Birch Hosp For Women And
 Newborns
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF

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C. Directorio de proveedores de atención primaria

SAN DIEGO

525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2498

Fax:

After Hours Phone: (619)
515-2498

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

BULLOCH, EDGAR M

Provider ID: 478971

Provider Gender: Male

License number: A113241

NPI: 1508046376

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont
Hospital

Board Certified Specialty: No

BORREGO COMMUNITY
HEALTH FOUNDTION

133 W MAIN ST STE 100
EL CAJON, CA 92020-3325

Phone: (619) 873-8940

Fax:

After Hours Phone: (619)
873-8940

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

CAMPBELL, ELIZABETH C

Provider ID: 418340

Provider Gender: Female

License number: 20A6763

NPI: 1932147329

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont
Hospital, Scripps Mercy Hospital,

Palomar Medical Center,

Palomar Health Downtown

Campus, Pomerado Hospital,

Rady Childrens Hospital San

Diego, Sharp Coronado Hosp

And Healthcare Ctr

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2498

Fax:

After Hours Phone: (619)

515-2498

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

CARTER, KHALIL J

Provider ID: 418340

Provider Gender: Male

License number: A113001

NPI: 1225231582

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Sutter Davis
Hospital, Sutter Medical Center
Sacramento, Grossmont

Hospital, Scripps Mercy Hospital

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2498

Fax:

After Hours Phone: (619)
515-2498

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

CERVANTES, SANDRA M

Provider ID: 418340

Provider Gender: Female

License number: A118095

NPI: 1073701041

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Sharp Coronado Hosp

And Healthcare Ctr, Grossmont
Hospital

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

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C. Directorio de proveedores de atención primaria

Phone: (619) 515-2498

Fax:

After Hours Phone: (619)
515-2498

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

DE MIK, TRAVIS J

Provider ID: 418340

Provider Gender: Male

License number: A108228

NPI: 1629277322

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2498

Fax:

After Hours Phone: (619)

515-2498

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

FAKSH, ARIJ

Provider ID: 185267

Provider Gender: Female

License number: 20A14222

NPI: 1912166737

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Tri City

Medical Ctr, Scripps Mercy

Hospital, Scripps Green Hospital,

Scripps Memorial Hospital

Encinitas, Scripps Memorial

Hospital, Scripps Mercy Hospital

Chula Vista

Board Certified Specialty: No

LA MAESTRA FAMILY CLINIC

165 S 1ST ST

EL CAJON, CA 92019-4795

Phone: (619) 312-0347

Fax:

After Hours Phone: (619)

312-0347

Website: www.lamaestra.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

FAKSH, ARIJ

Provider ID: 418501

Provider Gender: Female

License number: 20A14222

NPI: 1912166737

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Tri City

Medical Ctr, Scripps Mercy

Hospital, Scripps Green Hospital,

Scripps Memorial Hospital

Encinitas, Scripps Memorial

Hospital, Scripps Mercy Hospital

Chula Vista

Board Certified Specialty: No

LA MAESTRA FAMILY CLINIC

1032 BROADWAY

EL CAJON, CA 92021-7416

Phone: (619) 795-5991

Fax:

After Hours Phone: (619)

795-5991

Website: www.lamaestra.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

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

9AM-5PM

FOLCH TORRES-AGUIAR, BEATRIZ M

Provider ID: 418340

Provider Gender: Female

License number: A148014

NPI: 1457794752

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Yue Chinese

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2498

Fax:

After Hours Phone: (619)

515-2498

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

♿ *Accessibility:*
Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

FULFORD, KEVIN L

Provider ID: 206272
Provider Gender: Male
License number: A66474
NPI: 1063594612
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-NEIGHBORHOOD
HEALTHCARE
855 E MADISON AVE
EL CAJON, CA 92020-3819
Phone: (619) 440-2751
Fax:
After Hours Phone: (619)
440-2751
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
9AM-5PM

KHAN, ALIYA I

Provider ID: 418501
Provider Gender: Female
License number: G50634
NPI: 1285687350
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi, Urdu
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital
Board Certified Specialty: No

LA MAESTRA FAMILY CLINIC
1032 BROADWAY
EL CAJON, CA 92021-7416
Phone: (619) 795-5991
Fax:
After Hours Phone: (619)
795-5991
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

LIPSCHITZ, LISA S

Provider ID: 418340
Provider Gender: Female
License number: A72005
NPI: 1649208711
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
Coronado Hosp And Healthcare
Ctr, Scripps Mercy Hospital,
Grossmont Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619)
515-2498
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

♿ *Accessibility:*
Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

LOEFFLER, ALLISON M

Provider ID: 418340
Provider Gender: Female
License number: A116680
NPI: 1700073962
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Scripps Mercy Hospital,
Scripps Mercy Hospital Chula
Vista
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619)
515-2498
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

MELLENDEZ BERRIOS, IARA DEL M

Provider ID: 418340
Provider Gender: Female
License number: A114181
NPI: 1740514249
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish

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C. Directorio de proveedores de atención primaria

Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619)
 515-2498
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-F 8:30AM-5:30PM, SA
 9AM-5PM

PAPA, RHETT R

Provider ID: 478971
Provider Gender: Male
License number: 20A11733
NPI: 1063642312
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
 Hospital
Board Certified Specialty: No
 BORREGO COMMUNITY
 HEALTH FOUNDTION
 133 W MAIN ST STE 100
 EL CAJON, CA 92020-3325
Phone: (619) 873-8940
Fax:
After Hours Phone: (619)
 873-8940
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):

No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
**RODRIGUEZ JEREZ,
 ROBERTO D**
Provider ID: 418340
Provider Gender: Male
License number: A154298
NPI: 1710316450
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital, Sharp Coronado Hosp
 And Healthcare Ctr, Grossmont
 Hospital
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619)
 515-2498
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-F 8:30AM-5:30PM, SA
 9AM-5PM

SAPRA, SONIA V
Provider ID: 418340
Provider Gender: Female
License number: A164859
NPI: 1952751711
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Hindi

Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619)
 515-2498
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-F 8:30AM-5:30PM, SA
 9AM-5PM

SINGH, RASHMI

Provider ID: 418340
Provider Gender: Female
License number: A168236
NPI: 1679937619
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619)
 515-2498
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

SULLIVAN, MARY L

Provider ID: 478971
Provider Gender: Female
License number: A132556
NPI: 1588893564
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital
Board Certified Specialty: No
BORREGO COMMUNITY
HEALTH FOUNDTION
133 W MAIN ST STE 100
EL CAJON, CA 92020-3325
Phone: (619) 873-8940
Fax:
After Hours Phone: (619)
873-8940
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM

WINESBURG, JENNIFER J

Provider ID: 418340
Provider Gender: Female
License number: 20A11535
NPI: 1811162456
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Desert

Regional Med Ctr
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:

After Hours Phone: (619)
515-2498
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

ZIEG, ALAN J

Provider ID: 418340
Provider Gender: Male
License number: G78814
NPI: 1699790634
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Scripps Mercy Hospital,
Sharp Coronado Hosp And
Healthcare Ctr, Scripps Mercy
Hospital Chula Vista
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619)
515-2498
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes

Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

OPHTHALMOLOGY

ALBORZIAN, SHERVIN

Provider ID: 418340
Provider Gender: Male
License number: A107093
NPI: 1588825129
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Sharp
Memorial Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619)
515-2498
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

JARDON, JAVIER A

Provider ID: 329504
Provider Gender: Male
License number: A131365
NPI: 1609171982

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

<p><i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> California Hosp Med Ctr Los Angeles <i>Board Certified Specialty:</i> No IHP-SAN YSIDRO HEALTH CENTER 436 S MAGNOLIA AVE STE 101 EL CAJON, CA 92020-5219 <i>Phone:</i> (619) 662-4100 <i>Fax:</i> <i>After Hours Phone:</i> (619) 662-4100 <i>Website:</i> www.ihpsocal.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM</p>	<p><i>Phone:</i> (619) 662-4100 <i>Fax:</i> <i>After Hours Phone:</i> (619) 662-4100 <i>Website:</i> www.ihpsocal.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM</p>	<p>9AM-5PM PONS, MAURICIO E <i>Provider ID:</i> 329504 <i>Provider Gender:</i> Male <i>License number:</i> A87650 <i>NPI:</i> 1376723759 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital, El Centro Regional Medical Center, Sharp Memorial Hospital, Scripps Mercy Hospital <i>Board Certified Specialty:</i> No IHP-SAN YSIDRO HEALTH CENTER 436 S MAGNOLIA AVE STE 101 EL CAJON, CA 92020-5219 <i>Phone:</i> (619) 662-4100 <i>Fax:</i> <i>After Hours Phone:</i> (619) 662-4100 <i>Website:</i> www.ihpsocal.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM</p>
<p>MANI, NASRIN <i>Provider ID:</i> 329504 <i>Provider Gender:</i> Female <i>License number:</i> A40473 <i>NPI:</i> 1023061314 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic, Faroese, Farsi, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital, Sharp Memorial Hospital, Ucsd Medical Ctr <i>Board Certified Specialty:</i> No IHP-SAN YSIDRO HEALTH CENTER 436 S MAGNOLIA AVE STE 101 EL CAJON, CA 92020-5219</p>	<p>PAPASTERGIU, GEORGIOS <i>Provider ID:</i> 329504 <i>Provider Gender:</i> Male <i>License number:</i> A127706 <i>NPI:</i> 1790054393 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic, Farsi, French, Greek, Italian, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> El Centro Regional Medical Center, Scripps Memorial Hospital, Sharp Memorial Hospital <i>Board Certified Specialty:</i> No IHP-SAN YSIDRO HEALTH CENTER 436 S MAGNOLIA AVE STE 101 EL CAJON, CA 92020-5219 <i>Phone:</i> (619) 662-4100 <i>Fax:</i> <i>After Hours Phone:</i> (619) 662-4100 <i>Website:</i> www.ihpsocal.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM</p>	<p>SKAF, AYHAM R <i>Provider ID:</i> 329504 <i>Provider Gender:</i> Male <i>License number:</i> A120584 <i>NPI:</i> 1285888628 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> El Centro</p>

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C. Directorio de proveedores de atención primaria

Regional Medical Center, Sharp Memorial Hospital, Scripps Memorial Hospital
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 436 S MAGNOLIA AVE STE 101
 EL CAJON, CA 92020-5219
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM

Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM

Hospital, Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 1032 BROADWAY
 EL CAJON, CA 92021-7416
Phone: (619) 795-5991
Fax: (619) 795-5992
After Hours Phone: (619) 795-5991
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM

ABRAMSON, RACHEL A
Provider ID: 556684
Provider Gender: Female
License number: A104918
NPI: 1588707178
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 1032 BROADWAY
 EL CAJON, CA 92021-7416
Phone: (619) 795-5991
Fax: (619) 795-5992

CHU, TINA L
Provider ID: 418340
Provider Gender: Female
License number: A144236
NPI: 1386030831
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax: (616) 269-0191
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-F 8:30AM-5:30PM, SA

PEDIATRICS

ABRAMSON, RACHEL A
Provider ID: 556683
Provider Gender: Female
License number: A104918
NPI: 1588707178
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 165 S 1ST ST
 EL CAJON, CA 92019-4795
Phone: (619) 312-0347
Fax: (619) 749-5480
After Hours Phone: (619) 312-0347
Website:
Email:

After Hours Phone: (619) 795-5991
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM

CASTELNOVI, CLAUDIA
Provider ID: 454144
Provider Gender: Female
License number: A111170
NPI: 1417279324
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Italian, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy

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C. Directorio de proveedores de atención primaria

9AM-5PM

CONE, STEPHANIE E

Provider ID: 185267
Provider Gender: Female
License number: A123929
NPI: 1437444858
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Rady Childrens Hospital San Diego
Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 165 S 1ST ST
 EL CAJON, CA 92019-4795
Phone: (619) 312-0347
Fax:
After Hours Phone: (619) 312-0347
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:* W
Hours: M-SA 9AM-5PM

CONE, STEPHANIE E

Provider ID: 418501
Provider Gender: Female
License number: A123929
NPI: 1437444858
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Rady Childrens Hospital San Diego

Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 1032 BROADWAY
 EL CAJON, CA 92021-7416
Phone: (619) 795-5991
Fax:
After Hours Phone: (619) 795-5991
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:* W
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

FIGUEROA RODRIGUEZ, BRENDA L

Provider ID: 478971
Provider Gender: Female
License number: A114674
NPI: 1134205214
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 BORREGO COMMUNITY HEALTH FOUNDTION
 133 W MAIN ST STE 100
 EL CAJON, CA 92020-3325
Phone: (619) 873-8940
Fax:
After Hours Phone: (619) 873-8940
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

FINK, REBECCA

Provider ID: 473783
Provider Gender: Female
License number: A159345
NPI: 1659725562
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 250 E CHASE AVE # 108
 EL CAJON, CA 92020-6305
Phone: (619) 442-2560
Fax:
After Hours Phone: (619) 442-2560
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM

FLEMING, TARA M

Provider ID: 418340
Provider Gender: Female
License number: A152462
NPI: 1972965242
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007

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C. Directorio de proveedores de atención primaria

Phone: (619) 515-2498

Fax:

After Hours Phone: (619)
515-2498

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

FRANCIS, KATHERINE L

Provider ID: 206272

Provider Gender: Female

License number: G80917

NPI: 1659301547

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi, Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
IHP-NEIGHBORHOOD
HEALTHCARE

855 E MADISON AVE
EL CAJON, CA 92020-3819

Phone: (619) 440-2751

Fax:

After Hours Phone: (619)
440-2751

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA
9AM-5PM

HOANG, VY U

Provider ID: 546310

Provider Gender: Female

License number: A125768

NPI: 1649575135

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Grossmont
Hospital, Sharp Mary Birch Hosp
For Women And Newborns,
Rady Childrens Hospital San
Diego

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

844 JACKMAN ST
EL CAJON, CA 92020-3053

Phone: (619) 442-2560

Fax: (619) 442-7836

After Hours Phone: (619)
442-2560

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

KODSI, ALICIA M

Provider ID: 418340

Provider Gender: Female

License number: A147976

NPI: 1932514353

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007

Phone: (619) 515-2498

Fax:

After Hours Phone: (619)
515-2498

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

LYNN, JOHN G

Provider ID: 206272

Provider Gender: Male

License number: A87637

NPI: 1891729968

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
IHP-NEIGHBORHOOD
HEALTHCARE

855 E MADISON AVE
EL CAJON, CA 92020-3819

Phone: (760) 742-2782

Fax:

After Hours Phone: (760)
742-2782

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA
9AM-5PM

NAGNUR, PRITI

Provider ID: 206354

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Provider Gender: Female
License number: A170055
NPI: 1316289929
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Kannada
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax:
After Hours Phone: (619) 515-2499
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: ME
Hours: M-SA 9AM-5PM

NAIK, SHILPA

Provider ID: 546498
Provider Gender: Female
License number: A122868
NPI: 1902156904
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Grossmont Hospital
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
844 JACKMAN ST
EL CAJON, CA 92020-3053

Phone: (619) 442-2560
Fax: (619) 442-7836
After Hours Phone: (619) 442-2560
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM

NGUYEN, VI T

Provider ID: 367141
Provider Gender: Female
License number: A144937
NPI: 1053540534
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Rady Childrens Hospital San Diego
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
250 E CHASE AVE # 108
EL CAJON, CA 92020-6305
Phone: (619) 442-2560
Fax: (619) 442-7836
After Hours Phone: (619) 442-2560
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM

NGUYEN, VI T

Provider ID: 546509
Provider Gender: Female

License number: A144937
NPI: 1053540534
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Rady Childrens Hospital San Diego
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
844 JACKMAN ST
EL CAJON, CA 92020-3053
Phone: (619) 442-2560
Fax: (619) 442-7836
After Hours Phone: (619) 442-2560
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM

PINTO, ANITA

Provider ID: 230568
Provider Gender: Female
License number: A75968
NPI: 1477663722
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Sharp Mary Birch Hosp For Women And Newborns, Rady Childrens Hospital San Diego
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
250 E CHASE AVE # 108
EL CAJON, CA 92020-6305

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Phone: (619) 442-2560
 Fax: (619) 442-7836
 After Hours Phone: (619)
 442-2560

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
 No

♿ Accessibility:

Hours: M-SA 9AM-5PM

SCOTT, SABRINA I

Provider ID: 206272

Provider Gender: Female

License number: A143939

NPI: 1942599196

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Sharp Memorial Hospital

Board Certified Specialty: No
 IHP-NEIGHBORHOOD
 HEALTHCARE

855 E MADISON AVE
 EL CAJON, CA 92020-3819

Phone: (619) 440-2751

Fax:

After Hours Phone: (619)

440-2751

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
 No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA
 9AM-5PM

STENSMAN, LARS M

Provider ID: 478971

Provider Gender: Male

License number: A158569

NPI: 1659638062

Provider English Spoken: Yes

Provider Language(s) Spoken:
 Danish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
 BORREGO COMMUNITY
 HEALTH FOUNDTION

133 W MAIN ST STE 100

EL CAJON, CA 92020-3325

Phone: (619) 401-0404

Fax:

After Hours Phone: (619)

401-0404

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
 No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

PHYSICIANS ASSISTANT

ARMENTA, JORGE

Provider ID: 185267

Provider Gender: Male

License number: PA13694

NPI: 1346382611

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 165 S 1ST ST

EL CAJON, CA 92019-4795

Phone: (619) 312-0347

Fax:

After Hours Phone: (619)

312-0347

Website: www.lamaestra.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
 No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

CHAN, TIFFANY C

Provider ID: 418340

Provider Gender: Female

License number: PA23258

NPI: 1790111607

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

525 E MAIN ST
 EL CAJON, CA 92020-4007

Phone: (619) 515-2498

Fax:

After Hours Phone: (619)

515-2498

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
 No

♿ Accessibility:

Hours: M-F 8:30AM-5:30PM, SA
 9AM-5PM

LAPINA, LORI L

Provider ID: 206354

Provider Gender: Female

License number: PA23231

NPI: 1245670413

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

1111 W CHASE AVE
EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax:

After Hours Phone: (619)

515-2499

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* ME

Hours: M-SA 9AM-5PM

MERCER, KELLY C

Provider ID: 185267

Provider Gender: Female

License number: PA21625

NPI: 1154609790

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC

165 S 1ST ST

EL CAJON, CA 92019-4795

Phone: (619) 312-0347

Fax:

After Hours Phone: (619)

312-0347

Website: www.lamaestra.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

MERCER, KELLY C

Provider ID: 418501

Provider Gender: Female

License number: PA21625

NPI: 1154609790

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC

1032 BROADWAY

EL CAJON, CA 92021-7416

Phone: (619) 795-5991

Fax:

After Hours Phone: (619)

795-5991

Website: www.lamaestra.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

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

9AM-5PM

9AM-5PM

9AM-5PM

PATEL, SHREYA M

Provider ID: 206354

Provider Gender: Female

License number: PA18719

NPI: 1447468137

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF

SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

EL CAJON, CA 92020-5710

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax:

After Hours Phone: (619)

515-2499

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* ME

Hours: M-SA 9AM-5PM

9AM-5PM

SABET, ALEENA

Provider ID: 206272

Provider Gender: Female

License number: PA56757

NPI: 1578959987

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
IHP-NEIGHBORHOOD

HEALTHCARE

855 E MADISON AVE

EL CAJON, CA 92020-3819

Phone: (619) 440-2751

Fax:

After Hours Phone: (619)

440-2751

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

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

9AM-5PM

9AM-5PM

9AM-5PM

TURNER, ERIC M

Provider ID: 206354

Provider Gender: Male

License number: PA55067

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

NPI: 1669756128
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
 Phone: (619) 515-2499
 Fax:
 After Hours Phone: (619)
 515-2499
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: ME
 Hours: M-SA 9AM-5PM

ZAMBRANA, GEORGE M

Provider ID: 478971
 Provider Gender: Male
 License number: PA16673
 NPI: 1104836659
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 BORREGO COMMUNITY
 HEALTH FOUNDTION
 133 W MAIN ST STE 100
 EL CAJON, CA 92020-3325
 Phone: (619) 873-8940
 Fax:
 After Hours Phone: (619)
 873-8940
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999

American Sign Language (ASL):
 No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM

PODIATRIST

CHARP, KENNETH G

Provider ID: 478971
 Provider Gender: Male
 License number: DPM1536
 NPI: 1841384203
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 BORREGO COMMUNITY
 HEALTH FOUNDTION
 133 W MAIN ST STE 100
 EL CAJON, CA 92020-3325
 Phone: (619) 873-8940
 Fax:
 After Hours Phone: (619)
 873-8940
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM

JUAREZ, LETICIA J

Provider ID: 418340
 Provider Gender: Female
 License number: DPM5661
 NPI: 1508393778
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation:

Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2498
 Fax:
 After Hours Phone: (619)
 515-2498
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-F 8:30AM-5:30PM, SA
 9AM-5PM

REGISTERED PHYSICAL THERAPIST

CUMMINGS, GEORGE P

Provider ID: 418340
 Provider Gender: Male
 License number: PT295173
 NPI: 1497236384
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2498
 Fax:
 After Hours Phone: (619)
 515-2498
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

American Sign Language (ASL): No
Accessibility:
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

GUTIERREZ, JUSTINE A

Provider ID: 418340
Provider Gender: Female
License number: PT292482
NPI: 1851834873
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:

After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

MIGNEA, DAVID S

Provider ID: 418340
Provider Gender: Male
License number: PT293536
NPI: 1043736879
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF

SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

ENCINITAS

FAMILY PRACTICE

DSOUZA, LYDIA D

Provider ID: 480243
Provider Gender: Female
License number: A114700
NPI: 1932343746
Provider English Spoken: Yes
Provider Language(s) Spoken: Tagalog
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas
Board Certified Specialty: No
 IHP-NORTH COUNTY HEALTH SERVICES
 1130 2ND ST
 ENCINITAS, CA 92024-5008
Phone: (760) 753-7842
Fax:
After Hours Phone: (760) 753-7842
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None

American Sign Language (ASL): No
Accessibility:
Hours: M-TH 8AM-5PM, F 8:30AM-5:30PM, SA 9AM-5PM

NATH, DEVARSHI

Provider ID: 480243
Provider Gender: Male
License number: C54157
NPI: 1275630618
Provider English Spoken: Yes
Provider Language(s) Spoken: Bengali
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-NORTH COUNTY HEALTH SERVICES
 1130 2ND ST
 ENCINITAS, CA 92024-5008
Phone: (760) 753-7842
Fax:

After Hours Phone: (760) 753-7842
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-TH 8AM-5PM, F 8:30AM-5:30PM, SA 9AM-5PM

SAFI, ROOZCHEHR

Provider ID: 480243
Provider Gender: Female
License number: A116562
NPI: 1659563641
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi
Cultural Competency: No
Hospital Affiliation:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Board Certified Specialty: No
IHP-NORTH COUNTY HEALTH SERVICES
1130 2ND ST
ENCINITAS, CA 92024-5008
Phone: (760) 753-7842

Fax:
After Hours Phone: (760) 753-7842
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No

♿ *Accessibility:*
Hours: M-TH 8AM-5PM, F 8:30AM-5:30PM, SA 9AM-5PM

WILSON, MARITZA K

Provider ID: 480243
Provider Gender: Female
License number: A146931
NPI: 1720465925
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr
Board Certified Specialty: No
IHP-NORTH COUNTY HEALTH SERVICES
1130 2ND ST
ENCINITAS, CA 92024-5008
Phone: (760) 753-7842

Fax:
After Hours Phone: (760) 753-7842
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No

♿ *Accessibility:*
Hours: M-TH 8AM-5PM, F 8:30AM-5:30PM, SA 9AM-5PM

FQHC

NCHS WOMENS HEALTH SERVICES,
Provider ID: 480243
Provider Gender:
License number: 080000638
NPI: 1245246917
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
IHP-NORTH COUNTY HEALTH SERVICES

1130 2ND ST
ENCINITAS, CA 92024-5008
Phone: (760) 753-7842
Fax: (760) 736-8740
After Hours Phone: (760) 753-7842
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ *Accessibility:*
Hours: M-TH 8AM-5PM, F 8:30AM-5:30PM, SA 9AM-5PM

INTERNAL MEDICINE

BLACK, JENNIFER M
Provider ID: 540293
Provider Gender: Female
License number: A84075
NPI: 1194763326
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr

Board Certified Specialty: No
HEALTH EXCEL IPA INC
477 N EL CAMINO REAL STE A200
ENCINITAS, CA 92024-1350
Phone: (858) 766-6007
Fax: (858) 795-1195
After Hours Phone: (858) 766-6007
Website:

Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM

HUANG, YUN SAN

Provider ID: 480243
Provider Gender: Female
License number: A128784
NPI: 1306095963
Provider English Spoken: Yes
Provider Language(s) Spoken: Mandarin
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Board Certified Specialty: No
IHP-NORTH COUNTY HEALTH SERVICES
1130 2ND ST
ENCINITAS, CA 92024-5008
Phone: (760) 753-7842

Fax:
After Hours Phone: (760) 753-7842
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

No
 ☒ *Accessibility:*
Hours: M-TH 8AM-5PM, F
 8:30AM-5:30PM, SA 9AM-5PM

JEFFERIS, LAUREN R

Provider ID: 480243
Provider Gender: Female
License number: A80674
NPI: 1346354776
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
 IHP-NORTH COUNTY HEALTH
 SERVICES
 1130 2ND ST
 ENCINITAS, CA 92024-5008
Phone: (760) 753-7842

Fax:
After Hours Phone: (760)
 753-7842
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☒ *Accessibility:*
Hours: M-TH 8AM-5PM, F
 8:30AM-5:30PM, SA 9AM-5PM

OBSTETRICS / GYNECOLOGY

MOSTOFIAN, EIMANEH

Provider ID: 480243
Provider Gender: Female
License number: A97181
NPI: 1154477628
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Tri City

Medical Ctr
 Board Certified Specialty: No
 IHP-NORTH COUNTY HEALTH
 SERVICES
 1130 2ND ST
 ENCINITAS, CA 92024-5008
Phone: (760) 753-7842
Fax:
After Hours Phone: (760)
 753-7842
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☒ *Accessibility:*
Hours: M-TH 8AM-5PM, F
 8:30AM-5:30PM, SA 9AM-5PM

PEDIATRICS

BRION, SONJA K

Provider ID: 386639
Provider Gender: Female
License number: A68705
NPI: 1306817317
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital Encinitas,
 Rady Childrens Hospital San
 Diego, Scripps Memorial Hospital
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 499 N EL CAMINO REAL STE
 B100
 ENCINITAS, CA 92024-1347
Phone: (760) 436-4511
Fax: (760) 436-5106
After Hours Phone: (760)
 436-4511
Website:

Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☒ *Accessibility:*
Hours: M-SA 9AM-5PM

CLEMENTINO, NANCY A

Provider ID: 386643
Provider Gender: Female
License number: G85653
NPI: 1619948619
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital, Scripps
 Mercy Hospital Chula Vista,
 Rady Childrens Hospital San
 Diego, Scripps Memorial Hospital
 Encinitas

Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 499 N EL CAMINO REAL STE
 B100
 ENCINITAS, CA 92024-1347
Phone: (760) 436-4511
Fax: (760) 436-5106
After Hours Phone: (760)
 436-4511
Website:

Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☒ *Accessibility:*
Hours: M-SA 9AM-5PM

MENDENHALL, ANNA K

Provider ID: 386635
Provider Gender: Female
License number: A65279

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

<p>NPI: 1639140650 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 499 N EL CAMINO REAL STE B100 ENCINITAS, CA 92024-1347 <i>Phone:</i> (760) 436-4511 <i>Fax:</i> (760) 436-5106 <i>After Hours Phone:</i> (760) 436-4511 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM</p> <p>METSCH, RANDALL B <i>Provider ID:</i> 386630 <i>Provider Gender:</i> Male <i>License number:</i> G69565 <i>NPI:</i> 1619948635 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK</p>	<p>499 N EL CAMINO REAL STE B100 ENCINITAS, CA 92024-1347 <i>Phone:</i> (760) 436-4511 <i>Fax:</i> (760) 436-5106 <i>After Hours Phone:</i> (760) 436-4511 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM</p> <p>MURPHY, CARMEL C <i>Provider ID:</i> 480243 <i>Provider Gender:</i> Female <i>License number:</i> A103940 <i>NPI:</i> 1790824787 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Tri City Medical Ctr, Rady Childrens Hospital San Diego <i>Board Certified Specialty:</i> No IHP-NORTH COUNTY HEALTH SERVICES 1130 2ND ST ENCINITAS, CA 92024-5008 <i>Phone:</i> (760) 753-7842 <i>Fax:</i> <i>After Hours Phone:</i> (760) 753-7842 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-TH 8AM-5PM, F</p>	<p>8:30AM-5:30PM, SA 9AM-5PM</p> <p>TERRY, AMANDA R <i>Provider ID:</i> 386739 <i>Provider Gender:</i> Female <i>License number:</i> A118540 <i>NPI:</i> 1861770885 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Scripps Memorial Hospital, Rady Childrens Hospital San Diego, Scripps Memorial Hospital Encinitas, Childrens Hosp And Resrch Ctr At Oakland, Rady Childrens Hospital San Diego <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 499 N EL CAMINO REAL STE B100 ENCINITAS, CA 92024-1347 <i>Phone:</i> (760) 436-4511 <i>Fax:</i> (760) 436-5106 <i>After Hours Phone:</i> (760) 436-4511 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM</p> <p>TOLBA, KAMEI B <i>Provider ID:</i> 386624 <i>Provider Gender:</i> Male <i>License number:</i> A72066 <i>NPI:</i> 1144221763 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps</p>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Memorial Hospital Encinitas,
Rady Childrens Hospital San
Diego, Scripps Memorial Hospital
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

499 N EL CAMINO REAL STE
B100

ENCINITAS, CA 92024-1347

Phone: (760) 436-4511

Fax: (760) 436-5106

After Hours Phone: (760)

436-4511

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

ZACHRY, ALISON D

Provider ID: 480243

Provider Gender: Female

License number: A131678

NPI: 1922402858

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego, Tri
City Medical Ctr

Board Certified Specialty: No

IHP-NORTH COUNTY HEALTH
SERVICES

1130 2ND ST

ENCINITAS, CA 92024-5008

Phone: (760) 753-7842

Fax:

After Hours Phone: (760)

753-7842

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:*

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

8:30AM-5:30PM, SA 9AM-5PM

ESCONDIDO

CARDIOVASCULAR DISEASE

SCHWARTZ, JOSEPH A

Provider ID: 419344

Provider Gender: Male

License number: A36637

NPI: 1295747038

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Long Beach

Memorial Med Ctr, Providence St

Mary Medical Center

Board Certified Specialty: No

BORREGO COMMUNITY

HEALTH FOUNDTION

1121 E WASHINGTON AVE

ESCONDIDO, CA 92025-2214

Phone: (760) 871-0606

Fax:

After Hours Phone: (760)

871-0606

Website: n

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:* P, EB, IB, E, R,
W

Hours: SA,SU 8AM-12PM, M-F

8AM-8PM

CERTIFIED NURSE

PRACTITIONER

BALINGIT, KAT T

Provider ID: 519481

Provider Gender: Female

License number: NP95012642

NPI: 1538790605

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH

CENTER

255 N ASH ST STE 101

ESCONDIDO, CA 92027-3069

Phone: (760) 745-5832

Fax:

After Hours Phone: (760)

745-5832

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/120

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

CARNEY, AMY

Provider ID: 206269

Provider Gender: Female

License number: NP8169

NPI: 1164445227

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Palomar

Medical Center

Board Certified Specialty: No

IHP-NEIGHBORHOOD

HEALTHCARE

1001 E GRAND AVE

ESCONDIDO, CA 92025-4604

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Phone: (760) 520-8200

Fax:

After Hours Phone: (760)
520-8200

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA
9AM-5PM

DELA CRUZ, ANGELITO L

Provider ID: 206271

Provider Gender: Male

License number: NP95004663

NPI: 1457806366

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-NEIGHBORHOOD

HEALTHCARE

728 E VALLEY PKWY

ESCONDIDO, CA 92025-3052

Phone: (760) 737-6900

Fax:

After Hours Phone: (760)

737-6900

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,
W

Hours: M,TU,TH,F 8AM-5PM, W
9AM-5PM, SA 9AM-5PM

HACINAS, REYNALDO O

Provider ID: 419344

Provider Gender: Male

License number: NP95003024

NPI: 1215304860

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

BORREGO COMMUNITY

HEALTH FOUNDTION

1121 E WASHINGTON AVE

ESCONDIDO, CA 92025-2214

Phone: (760) 767-5051

Fax:

After Hours Phone: (760)

767-5051

Website: n

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, R,
W

Hours: SA,SU 8AM-12PM, M-F
8AM-8PM

KAHL, NICHOLAS D

Provider ID: 519481

Provider Gender: Male

License number: NP95006360

NPI: 1821306598

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH

CENTER

255 N ASH ST STE 101

ESCONDIDO, CA 92027-3069

Phone: (760) 745-5832

Fax:

After Hours Phone: (760)

745-5832

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/120

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

MITCHELL, CATHY A

Provider ID: 424775

Provider Gender: Female

License number: NP4799

NPI: 1356365365

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-NEIGHBORHOOD

HEALTHCARE

426 N DATE ST

ESCONDIDO, CA 92025-3409

Phone: (760) 690-5900

Fax:

After Hours Phone: (760)

690-5900

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

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

9AM-5PM

TODD, MIKAYLA S

Provider ID: 519481

Provider Gender: Female

License number: NP95005999

NPI: 1316478092

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 255 N ASH ST STE 101
 ESCONDIDO, CA 92027-3069
Phone: (760) 745-5832
Fax:
After Hours Phone: (760) 745-5832
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/120
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM

CHIROPRACTOR

ROBINSON, DEAN A
Provider ID: 206270
Provider Gender: Male
License number: DC12036
NPI: 1851320337
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-NEIGHBORHOOD HEALTHCARE
 460 N ELM ST
 ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax:
After Hours Phone: (760) 520-8100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None

American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 8AM-12PM
ZECHA, RONALD S
Provider ID: 419344
Provider Gender: Male
License number: DC28605
NPI: 1427252121
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 BORREGO COMMUNITY HEALTH FOUNDTION
 1121 E WASHINGTON AVE
 ESCONDIDO, CA 92025-2214
Phone: (760) 871-0606
Fax:
After Hours Phone: (760) 871-0606
Website: n
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:* P, EB, IB, E, R, W
Hours: SA,SU 8AM-12PM, M-F 8AM-8PM

FAMILY PRACTICE

AVILA, MICHAEL A
Provider ID: 206270
Provider Gender: Male
License number: A159727
NPI: 1962936450
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-NEIGHBORHOOD HEALTHCARE
 460 N ELM ST
 ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax:
After Hours Phone: (760) 520-8100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 8AM-12PM

BISHOP, MELISSA E
Provider ID: 206271
Provider Gender: Female
License number: C137521
NPI: 1578667077
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Palomar Medical Center
Board Certified Specialty: No
 IHP-NEIGHBORHOOD HEALTHCARE
 728 E VALLEY PKWY
 ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax: (858) 633-4694
After Hours Phone: (760) 737-6900
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None

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C. Directorio de proveedores de atención primaria

American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, W
Hours: M,TU,TH,F 8AM-5PM, W 9AM-5PM, SA 9AM-5PM

CASTANER, ZALYA

Provider ID: 206270
Provider Gender: Female
License number: A139490
NPI: 1487072179
Provider English Spoken: Yes
Provider Language(s) Spoken: No
Cultural Competency: No
Hospital Affiliation: No
Board Certified Specialty: No
IHP-NEIGHBORHOOD HEALTHCARE
460 N ELM ST
ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax:
After Hours Phone: (760) 520-8100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 8AM-12PM

CASTANER, ZALYA

Provider ID: 206271
Provider Gender: Female
License number: A139490
NPI: 1487072179
Provider English Spoken: Yes
Provider Language(s) Spoken: No
Cultural Competency: No
Hospital Affiliation: No
Board Certified Specialty: No

IHP-NEIGHBORHOOD HEALTHCARE
728 E VALLEY PKWY
ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax:
After Hours Phone: (760) 737-6900
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, W
Hours: M,TU,TH,F 8AM-5PM, W 9AM-5PM, SA 9AM-5PM

COBIAN, VANESSA E

Provider ID: 206271
Provider Gender: Female
License number: A145349
NPI: 1134513039
Provider English Spoken: Yes
Provider Language(s) Spoken: No
Cultural Competency: No
Hospital Affiliation: No
Board Certified Specialty: No
IHP-NEIGHBORHOOD HEALTHCARE
728 E VALLEY PKWY
ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax:
After Hours Phone: (760) 737-6900
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, W

Hours: M,TU,TH,F 8AM-5PM, W 9AM-5PM, SA 9AM-5PM

DELGADO, GEORGE, MD

Provider ID: 318978
Provider Gender: Male
License number: G66807
NPI: 1083639470
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus, Scripps Memorial Hospital Encinitas, Scripps Mercy Hospital, Palomar Medical Center, Pomerado Hospital
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
362 W MISSION AVE STE 105
ESCONDIDO, CA 92025-1738
Phone: (619) 692-4401
Fax: (619) 692-8147
After Hours Phone: (619) 692-4401
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM

FERRAILOLO, NATALIE K

Provider ID: 206270
Provider Gender: Female
License number: A152372
NPI: 1306290143
Provider English Spoken: Yes
Provider Language(s) Spoken: No
Cultural Competency: No
Hospital Affiliation: No
Board Certified Specialty: No

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

IHP-NEIGHBORHOOD
HEALTHCARE
460 N ELM ST
ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax:
After Hours Phone: (760)
520-8100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
8AM-12PM

FERRAILO, NATALIE K

Provider ID: 206271
Provider Gender: Female
License number: A152372
NPI: 1306290143
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-NEIGHBORHOOD
HEALTHCARE
728 E VALLEY PKWY
ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax:
After Hours Phone: (760)
737-6900
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
W
Hours: M,TU,TH,F 8AM-5PM, W

9AM-5PM, SA 9AM-5PM
KAUR, JATINDER
Provider ID: 206270
Provider Gender: Female
License number: A120771
NPI: 1912141391
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi, Urdu
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-NEIGHBORHOOD
HEALTHCARE
460 N ELM ST
ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax:
After Hours Phone: (760)
520-8100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
8AM-12PM

LAI, AMARA J

Provider ID: 206271
Provider Gender: Female
License number: A120348
NPI: 1790912855
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Palomar
Medical Center
Board Certified Specialty: No
IHP-NEIGHBORHOOD
HEALTHCARE

728 E VALLEY PKWY
ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax:
After Hours Phone: (760)
737-6900
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
W
Hours: M,TU,TH,F 8AM-5PM, W
9AM-5PM, SA 9AM-5PM

MCHENRY, KATHRYN D

Provider ID: 206270
Provider Gender: Female
License number: 20A14292
NPI: 1326458373
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-NEIGHBORHOOD
HEALTHCARE
460 N ELM ST
ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax:
After Hours Phone: (760)
520-8100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
8AM-12PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

MORALES LITCHARD, CARMEN L

Provider ID: 419344
Provider Gender: Female
License number: A140992
NPI: 1033534672
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
 BORREGO COMMUNITY HEALTH FOUNDTION
 1121 E WASHINGTON AVE
 ESCONDIDO, CA 92025-2214
Phone: (760) 871-0606
Fax:
After Hours Phone: (760) 871-0606
Website: n
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ♿ *Accessibility:* P, EB, IB, E, R, W
Hours: SA,SU 8AM-12PM, M-F 8AM-8PM

NAKAMURA, MELANIE A

Provider ID: 206270
Provider Gender: Female
License number: A107557
NPI: 1104022672
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus
 Board Certified Specialty: No
 IHP-NEIGHBORHOOD HEALTHCARE

460 N ELM ST
 ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax: (760) 520-8100
After Hours Phone: (760) 520-8100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 8AM-12PM

NGUYEN, NGOC X , MD

Provider ID: 518652
Provider Gender: Male
License number: A74094
NPI: 1184668105
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 488 E VALLEY PKWY STE 211
 ESCONDIDO, CA 92025-3370
Phone: (760) 294-2266
Fax: (760) 294-9970
After Hours Phone: (760) 294-2266
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM

OTANEZ CERVANTES, JORGE A

Provider ID: 419344
Provider Gender: Male
License number: A153220
NPI: 1457734675
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
 BORREGO COMMUNITY HEALTH FOUNDTION
 1121 E WASHINGTON AVE
 ESCONDIDO, CA 92025-2214
Phone: (760) 871-0606
Fax:
After Hours Phone: (760) 871-0606
Website: n
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ♿ *Accessibility:* P, EB, IB, E, R, W
Hours: SA,SU 8AM-12PM, M-F 8AM-8PM

PATEL, JITENBHAI J

Provider ID: 206269
Provider Gender: Male
License number: A94128
NPI: 1902921406
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
 IHP-NEIGHBORHOOD HEALTHCARE
 1001 E GRAND AVE
 ESCONDIDO, CA 92025-4604

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Phone: (760) 520-8200
Fax:
After Hours Phone: (760)
520-8200
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM

PATEL, JITENBHAI J

Provider ID: 206270
Provider Gender: Male
License number: A94128
NPI: 1902921406
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-NEIGHBORHOOD
HEALTHCARE
460 N ELM ST
ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax:
After Hours Phone: (760)
520-8100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
8AM-12PM

PATEL, JITENBHAI J

Provider ID: 206271
Provider Gender: Male

License number: A94128
NPI: 1902921406
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-NEIGHBORHOOD
HEALTHCARE
728 E VALLEY PKWY
ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax:
After Hours Phone: (760)
737-6900
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
W
Hours: M,TU,TH,F 8AM-5PM, W
9AM-5PM, SA 9AM-5PM

RADFORD, JAMES A

Provider ID: 419344
Provider Gender: Male
License number: 20A17662
NPI: 1023188026
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Hemet Valley
Med Ctr
Board Certified Specialty: No
BORREGO COMMUNITY
HEALTH FOUNDTION
1121 E WASHINGTON AVE
ESCONDIDO, CA 92025-2214
Phone: (760) 871-0606
Fax:
After Hours Phone: (760)
871-0606

Website: n
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
W
Hours: SA,SU 8AM-12PM, M-F
8AM-8PM

RASHCOVSKY SCHIFF, KARIN

Provider ID: 206270
Provider Gender: Female
License number: A82173
NPI: 1699706333
Provider English Spoken: Yes
Provider Language(s) Spoken:
French
Cultural Competency: No
Hospital Affiliation: Palomar
Medical Center
Board Certified Specialty: No
IHP-NEIGHBORHOOD
HEALTHCARE
460 N ELM ST
ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax:
After Hours Phone: (760)
520-8100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
8AM-12PM

SAENZ ZAVALA, GUILLERMO

Provider ID: 419344
Provider Gender: Male
License number: A153513

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C. Directorio de proveedores de atención primaria

NPI: 1720475478
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Riverside
 Community Hosp
 Board Certified Specialty: No
 BORREGO COMMUNITY
 HEALTH FOUNDTION
 1121 E WASHINGTON AVE
 ESCONDIDO, CA 92025-2214
 Phone: (760) 871-0606
 Fax:
 After Hours Phone: (760)
 871-0606
 Website: n
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility: P, EB, IB, E, R,
 W
 Hours: SA,SU 8AM-12PM, M-F
 8AM-8PM

SANDHU, BASANT S

Provider ID: 206271
 Provider Gender: Male
 License number: A140398
 NPI: 1265795744
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 German, Hindi, Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-NEIGHBORHOOD
 HEALTHCARE
 728 E VALLEY PKWY
 ESCONDIDO, CA 92025-3052
 Phone: (760) 737-6900
 Fax:
 After Hours Phone: (760)
 737-6900

Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: P, EB, IB, E, R,
 W
 Hours: M,TU,TH,F 8AM-5PM, W
 9AM-5PM, SA 9AM-5PM

SAROKI, KAREN A

Provider ID: 430837
 Provider Gender: Female
 License number: A105032
 NPI: 1215157284
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Farsi, Spanish, Tagalog
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy
 Hospital Chula Vista
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 362 W MISSION AVE STE 105
 ESCONDIDO, CA 92025-1738
 Phone: (760) 741-1224
 Fax: (760) 741-7010
 After Hours Phone: (760)
 741-1224
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM

SAURIOL, TAWNY R

Provider ID: 206270
 Provider Gender: Female
 License number: A135955
 NPI: 1164780219
 Provider English Spoken: Yes

Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-NEIGHBORHOOD
 HEALTHCARE
 460 N ELM ST
 ESCONDIDO, CA 92025-3002
 Phone: (760) 520-8100
 Fax:
 After Hours Phone: (760)
 520-8100
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA
 8AM-12PM

SCHULTZ, JAMES H

Provider ID: 206270
 Provider Gender: Male
 License number: G61829
 NPI: 1356376164
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Farsi, Greek, Spanish
 Cultural Competency: No
 Hospital Affiliation: Palomar
 Health Downtown Campus,
 Southwest Healthcare System
 Wildomar, Southwest Healthcare
 System Murrieta, Palomar
 Medical Center
 Board Certified Specialty: No
 IHP-NEIGHBORHOOD
 HEALTHCARE
 460 N ELM ST
 ESCONDIDO, CA 92025-3002

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

<p>Phone: (760) 520-8100 Fax: After Hours Phone: (760) 520-8100 Website: www.ihpsocal.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-F 8AM-5PM, SA 8AM-12PM</p>	<p>W Hours: M,TU,TH,F 8AM-5PM, W 9AM-5PM, SA 9AM-5PM</p>	<p>HEALTHCARE 460 N ELM ST ESCONDIDO, CA 92025-3002 Phone: (760) 520-8100 Fax: After Hours Phone: (760) 520-8100 Website: www.ihpsocal.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-F 8AM-5PM, SA 8AM-12PM</p>
<p>SCHULTZ, JAMES H Provider ID: 206271 Provider Gender: Male License number: G61829 NPI: 1356376164 Provider English Spoken: Yes Provider Language(s) Spoken: Farsi, Greek, Spanish Cultural Competency: No Hospital Affiliation: Palomar Health Downtown Campus, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Palomar Medical Center Board Certified Specialty: No IHP-NEIGHBORHOOD HEALTHCARE 728 E VALLEY PKWY ESCONDIDO, CA 92025-3052 Phone: (760) 737-6900 Fax: After Hours Phone: (760) 737-6900 Website: Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: P, EB, IB, E, R,</p>	<p>SWEET, PATRICK H Provider ID: 548177 Provider Gender: Male License number: A101827 NPI: 1457407702 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Hoag Hospital Irvine, Scripps Mercy Hospital Chula Vista, Grossmont Hospital, Scripps Memorial Hospital Board Certified Specialty: No HEALTH EXCEL IPA INC 255 N ASH ST STE 101 ESCONDIDO, CA 92027-3069 Phone: (619) 662-4100 Fax: (760) 745-7847 After Hours Phone: (619) 662-4100 Website: Email: Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM</p>	<p>THOMPSON, CHERYL E Provider ID: 206270 Provider Gender: Female License number: A102687 NPI: 1548429863 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Providence St Jude Medical Center, Tri City Medical Ctr Board Certified Specialty: No IHP-NEIGHBORHOOD HEALTHCARE 460 N ELM ST ESCONDIDO, CA 92025-3002 Phone: (760) 520-8100 Fax: After Hours Phone: (760) 520-8100 Website: www.ihpsocal.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W</p>
<p>TANTOD, KULIN R Provider ID: 206270 Provider Gender: Male License number: A109655 NPI: 1902058928 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No IHP-NEIGHBORHOOD</p>		

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C. Directorio de proveedores de atención primaria

Hours: M-F 8AM-5PM, SA
8AM-12PM

FQHC

CENTRO MEDICO ESCONDIDO,

Provider ID: 419344
Provider Gender:
License number: 550001260
NPI: 1023349883
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
BORREGO COMMUNITY
HEALTH FOUNDTION
1121 E WASHINGTON AVE
ESCONDIDO, CA 92025-2214
Phone: (760) 871-0606
Fax: (858) 634-6918
After Hours Phone: (760)
871-0606
Website: n
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
W
Hours: SA,SU 8AM-12PM, M-F
8AM-8PM

NEIGHBORHOOD HEALTHCARE ESCONDIDO,

Provider ID: 206270
Provider Gender:
License number: 080000397
NPI: 1598703647
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:

Board Certified Specialty:
IHP-NEIGHBORHOOD
HEALTHCARE
460 N ELM ST
ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax: (360) 462-2752
After Hours Phone: (760)
520-8100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
8AM-12PM

NEIGHBORHOOD HEALTHCARE GRAND AVE,

Provider ID: 206269
Provider Gender:
License number: 080000483
NPI: 1487826772
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
IHP-NEIGHBORHOOD
HEALTHCARE
1001 E GRAND AVE
ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (360) 462-2749
After Hours Phone: (760)
520-8200
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W

Hours: M-F 8AM-5PM, SA
9AM-5PM

NEIGHBORHOOD HEALTHCARE GRAND AVE,

Provider ID: 206269
Provider Gender:
License number: 080000397
NPI: 1487826772
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
IHP-NEIGHBORHOOD
HEALTHCARE
1001 E GRAND AVE
ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (360) 462-2749
After Hours Phone: (760)
520-8200
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM

NEIGHBORHOOD HEALTHCARE GRAND AVE,

Provider ID: 206269
Provider Gender:
License number: 550000697
NPI: 1487826772
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
IHP-NEIGHBORHOOD
HEALTHCARE

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C. Directorio de proveedores de atención primaria

1001 E GRAND AVE
ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (360) 462-2749
After Hours Phone: (760)
520-8200
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM

NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL,

Provider ID: 424775
Provider Gender:
License number: 550000511
NPI: 1437335353
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
IHP-NEIGHBORHOOD
HEALTHCARE
426 N DATE ST
ESCONDIDO, CA 92025-3409
Phone: (760) 690-5900
Fax: (360) 462-2747
After Hours Phone: (760)
690-5900
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-F 8AM-5PM, SA
9AM-5PM

NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL,

Provider ID: 206266
Provider Gender:
License number:
NPI: 1265618185
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
IHP-NEIGHBORHOOD
HEALTHCARE
425 N DATE ST
ESCONDIDO, CA 92025-3413
Phone: (760) 520-8340
Fax: (360) 462-2752
After Hours Phone: (760)
520-8340
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 000/21
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM

NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY,

Provider ID: 206271
Provider Gender:
License number: 080000158
NPI: 1720264641
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
IHP-NEIGHBORHOOD
HEALTHCARE

728 E VALLEY PKWY
ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax: (360) 462-2748
After Hours Phone: (760)
737-6900
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
W
Hours: M,TU,TH,F 8AM-5PM, W
9AM-5PM, SA 9AM-5PM

SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE,

Provider ID: 519481
Provider Gender:
License number:
NPI: 1801438239
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
IHP-SAN YSIDRO HEALTH
CENTER
255 N ASH ST STE 101
ESCONDIDO, CA 92027-3069
Phone: (760) 745-5832
Fax:
After Hours Phone: (760)
745-5832
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/120
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

GENERAL PRACTICE		
LOPEZ, IRMA Provider ID: 437577 Provider Gender: Female License number: G57022 NPI: 1538240908 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No HEALTH EXCEL IPA INC 1035 E GRAND AVE STE 101 ESCONDIDO, CA 92025-4601 Phone: (760) 480-4747 Fax: (760) 480-0828 After Hours Phone: (760) 480-4747 Website: Email: Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM	Phone: (760) 480-4747 Fax: (760) 480-0828 After Hours Phone: (760) 480-4747 Website: Email: Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM	Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No COMMUNITY CARE IPA LLC 301 E WASHINGTON AVE STE B ESCONDIDO, CA 92025-2855 Phone: (760) 480-9051 Fax: (760) 480-9054 After Hours Phone: (760) 480-9051 Website: Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM
LOPEZ, IRMA Provider ID: 437577 Provider Gender: Female License number: G57022 NPI: 1538240908 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No COMMUNITY CARE IPA LLC 1035 E GRAND AVE STE 101 ESCONDIDO, CA 92025-4601	WATSON, THOMAS L , MD Provider ID: 383999 Provider Gender: Male License number: A52193 NPI: 1104865781 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No COMMUNITY CARE IPA LLC 303 S JUNIPER ST ESCONDIDO, CA 92025-4924 Phone: (760) 480-9051 Fax: (760) 480-9054 After Hours Phone: (760) 480-9051 Website: Email: Medi-Cal Open Panel: Yes Min/Max Age: 16/999 American Sign Language (ASL): No ♿ Accessibility: P, EB, IB, E, R, T Hours: M-SA 9AM-5PM	INTERNAL MEDICINE
	WATSON, THOMAS L , MD Provider ID: 80659 Provider Gender: Male License number: A52193 NPI: 1104865781	CHEN, MARGARET K Provider ID: 206270 Provider Gender: Female License number: A61751 NPI: 1659305084 Provider English Spoken: Yes Provider Language(s) Spoken: Greek, Spanish Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No IHP-NEIGHBORHOOD HEALTHCARE 460 N ELM ST ESCONDIDO, CA 92025-3002 Phone: (760) 520-8100 Fax: After Hours Phone: (760) 520-8100 Website: www.ihpsocal.org

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

<p><i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 8AM-12PM</p>	<p>Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No BORREGO COMMUNITY HEALTH FOUNDTION 1121 E WASHINGTON AVE ESCONDIDO, CA 92025-2214 <i>Phone:</i> (760) 871-0606 <i>Fax:</i> <i>After Hours Phone:</i> (760) 871-0606 <i>Website:</i> n <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> P, EB, IB, E, R, W <i>Hours:</i> SA,SU 8AM-12PM, M-F 8AM-8PM</p>	<p><i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM</p>
<p>GILMORE, CAROL A <i>Provider ID:</i> 206269 <i>Provider Gender:</i> Female <i>License number:</i> C41580 <i>NPI:</i> 1245264530 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital Chula Vista <i>Board Certified Specialty:</i> No IHP-NEIGHBORHOOD HEALTHCARE 1001 E GRAND AVE ESCONDIDO, CA 92025-4604 <i>Phone:</i> (760) 520-8200 <i>Fax:</i> <i>After Hours Phone:</i> (760) 520-8200 <i>Website:</i> www.ihpsocal.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM</p>	<p>LAU, BENISON C <i>Provider ID:</i> 206269 <i>Provider Gender:</i> Male <i>License number:</i> A161074 <i>NPI:</i> 1255726154 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No IHP-NEIGHBORHOOD HEALTHCARE 1001 E GRAND AVE ESCONDIDO, CA 92025-4604 <i>Phone:</i> (760) 520-8200 <i>Fax:</i> <i>After Hours Phone:</i> (760) 520-8200 <i>Website:</i> www.ihpsocal.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None</p>	<p>MASHAYEKHI, PEGAH M , MD <i>Provider ID:</i> 318831 <i>Provider Gender:</i> Female <i>License number:</i> 20A12987 <i>NPI:</i> 1851650584 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 488 E VALLEY PKWY STE 211 ESCONDIDO, CA 92025-3370 <i>Phone:</i> (760) 294-2266 <i>Fax:</i> (760) 294-9970 <i>After Hours Phone:</i> (760) 294-2266 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 18/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> P, EB, IB, E, R, T <i>Hours:</i> M-SA 9AM-5PM</p>
<p>KAUFER, DAVID I <i>Provider ID:</i> 419344 <i>Provider Gender:</i> Male <i>License number:</i> G80107 <i>NPI:</i> 1710082789 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i></p>	<p>NARAYAN, ARCHANA <i>Provider ID:</i> 206269 <i>Provider Gender:</i> Female <i>License number:</i> A101773 <i>NPI:</i> 1003053950 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Hindi, Kannada <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No IHP-NEIGHBORHOOD</p>	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

HEALTHCARE
1001 E GRAND AVE
ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200

Fax:

After Hours Phone: (760)
520-8200

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA
9AM-5PM

RATNIEWSKI, ALFREDO

Provider ID: 419344

Provider Gender: Male

License number: C42220

NPI: 1689768459

Provider English Spoken: Yes

Provider Language(s) Spoken:

French, Hebrew, Spanish

Cultural Competency: No

Hospital Affiliation: Palomar
Medical Center

Board Certified Specialty: No

BORREGO COMMUNITY

HEALTH FOUNDTION

1121 E WASHINGTON AVE
ESCONDIDO, CA 92025-2214

Phone: (760) 871-0606

Fax:

After Hours Phone: (760)
871-0606

Website: n

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,
W

Hours: SA,SU 8AM-12PM, M-F
8AM-8PM

TASHER, DEAN C

Provider ID: 206269

Provider Gender: Male

License number: A22852

NPI: 1205817673

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Palomar
Health Downtown Campus,

Palomar Medical Center

Board Certified Specialty: No
IHP-NEIGHBORHOOD

HEALTHCARE

1001 E GRAND AVE

ESCONDIDO, CA 92025-4604

Phone: (760) 520-8200

Fax:

After Hours Phone: (760)

520-8200

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA
9AM-5PM

VETTICADEN, SANTOSH J

Provider ID: 206270

Provider Gender: Male

License number: C53062

NPI: 1679102461

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
IHP-NEIGHBORHOOD

HEALTHCARE
460 N ELM ST
ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100

Fax:

After Hours Phone: (760)
520-8100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA
8AM-12PM

PEDIATRICS

AGUILAR, EDITA S

Provider ID: 206266

Provider Gender: Female

License number: A56054

NPI: 1467407411

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
IHP-NEIGHBORHOOD

HEALTHCARE

425 N DATE ST

ESCONDIDO, CA 92025-3413

Phone: (760) 520-8340

Fax:

After Hours Phone: (760)

520-8340

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 000/21

American Sign Language (ASL):
No

♿ Accessibility: W

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Hours: M-F 8AM-5PM, SA
9AM-5PM

AGUILAR, EDITA S

Provider ID: 424775
Provider Gender: Female
License number: A56054
NPI: 1467407411
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-NEIGHBORHOOD
HEALTHCARE
426 N DATE ST
ESCONDIDO, CA 92025-3409
Phone: (760) 690-5900
Fax:
After Hours Phone: (760)
690-5900
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-F 8AM-5PM, SA
9AM-5PM

ALDANA, NANCY V

Provider ID: 424775
Provider Gender: Female
License number: A62467
NPI: 1558371963
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr, Palomar Health
Downtown Campus, Rady
Childrens Hospital San Diego,

Scripps Memorial Hospital
Encinitas
Board Certified Specialty: No
IHP-NEIGHBORHOOD
HEALTHCARE
426 N DATE ST
ESCONDIDO, CA 92025-3409
Phone: (760) 690-5900
Fax:
After Hours Phone: (760)
690-5900
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-F 8AM-5PM, SA
9AM-5PM

CHOW, BYRON C

Provider ID: 206270
Provider Gender: Male
License number: A78116
NPI: 1619907607
Provider English Spoken: Yes
Provider Language(s) Spoken:
French, Spanish
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Board Certified Specialty: No
IHP-NEIGHBORHOOD
HEALTHCARE
460 N ELM ST
ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax:
After Hours Phone: (760)
520-8100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None

American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
8AM-12PM

COHEN, CARA E

Provider ID: 59178
Provider Gender: Female
License number: G83617
NPI: 1215021274
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Palomar
Health Downtown Campus,
Pomerado Hospital, Rady
Childrens Hospital San Diego,
Palomar Medical Center,
Childrens Hosp And Resrch Ctr
At Oakland
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
625 CITRACADO PKWY STE
200
ESCONDIDO, CA 92025-6428
Phone: (760) 746-2641
Fax: (760) 740-2178
After Hours Phone: (760)
746-2641
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM

COULLAHAN, JESSICA M

Provider ID: 102560
Provider Gender: Female
License number: A95336

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

NPI: 1750579108
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Palomar
 Health Downtown Campus, Rady
 Childrens Hospital San Diego,
 Palomar Medical Center
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 625 CITRACADO PKWY STE
 200
 ESCONDIDO, CA 92025-6428
 Phone: (760) 746-2641
 Fax: (760) 740-2178
 After Hours Phone: (760)
 746-2641
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 ♿ Accessibility: P, EB, IB, E, R, T
 Hours: M-SA 9AM-5PM

CURET, ZULMA

Provider ID: 206270
 Provider Gender: Female
 License number: A119661
 NPI: 1841561107
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Board Certified Specialty: No
 IHP-NEIGHBORHOOD
 HEALTHCARE
 460 N ELM ST
 ESCONDIDO, CA 92025-3002

Phone: (760) 520-8100
 Fax:
 After Hours Phone: (760)
 520-8100
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: W
 Hours: M-F 8AM-5PM, SA
 8AM-12PM

DOSHI, NEELIMA G

Provider ID: 206266
 Provider Gender: Female
 License number: A67626
 NPI: 1417921578
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Hindi, Spanish
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Board Certified Specialty: No
 IHP-NEIGHBORHOOD
 HEALTHCARE
 425 N DATE ST
 ESCONDIDO, CA 92025-3413
 Phone: (760) 520-8340
 Fax:
 After Hours Phone: (760)
 520-8340
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 000/21
 American Sign Language (ASL):
 No
 ♿ Accessibility: W
 Hours: M-F 8AM-5PM, SA
 9AM-5PM

DOSHI, NEELIMA G

Provider ID: 424775
 Provider Gender: Female
 License number: A67626
 NPI: 1417921578
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Hindi, Spanish
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Board Certified Specialty: No
 IHP-NEIGHBORHOOD
 HEALTHCARE
 426 N DATE ST
 ESCONDIDO, CA 92025-3409
 Phone: (760) 690-5900
 Fax:
 After Hours Phone: (760)
 690-5900
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-F 8AM-5PM, SA
 9AM-5PM

IBRAHIM, MAGED F

Provider ID: 419344
 Provider Gender: Male
 License number: C141296
 NPI: 1306852934
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Arabic
 Cultural Competency: No
 Hospital Affiliation: Riverside
 Community Hosp
 Board Certified Specialty: No
 BORREGO COMMUNITY
 HEALTH FOUNDTION
 1121 E WASHINGTON AVE
 ESCONDIDO, CA 92025-2214

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Phone: (760) 871-0606

Fax:

After Hours Phone: (760)
871-0606

Website: n

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,
W

Hours: SA,SU 8AM-12PM, M-F
8AM-8PM

LUM HO, RACHEL L

Provider ID: 511573

Provider Gender: Female

License number: A169392

NPI: 1215469283

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

625 CITRACADO PKWY STE
200

ESCONDIDO, CA 92025-6428

Phone: (760) 746-2641

Fax: (760) 740-2178

After Hours Phone: (760)

746-2641

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

MALEKSHAMRAN, KEYVAN

Provider ID: 419344

Provider Gender: Male

License number: A94845

NPI: 1952466112

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi, Spanish

Cultural Competency: No

Hospital Affiliation: Pioneers

Memorial Hospital, Desert
Regional Med Ctr

Board Certified Specialty: No

BORREGO COMMUNITY

HEALTH FOUNDTION

1121 E WASHINGTON AVE

ESCONDIDO, CA 92025-2214

Phone: (760) 871-0606

Fax:

After Hours Phone: (760)

871-0606

Website: n

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,
W

Hours: SA,SU 8AM-12PM, M-F
8AM-8PM

MARTINEZ, ASHLEY R

Provider ID: 524530

Provider Gender: Female

License number: A146820

NPI: 1649667379

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

625 CITRACADO PKWY STE
200

ESCONDIDO, CA 92025-6428

Phone: (760) 746-2641

Fax: (760) 740-2178

After Hours Phone: (760)
746-2641

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

PAYNE, ELIZABETH E

Provider ID: 26991

Provider Gender: Female

License number: G74067

NPI: 1043229305

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Sharp

Memorial Hospital, Scripps

Memorial Hospital Encinitas,

Pomerado Hospital, Palomar

Medical Center, Palomar Health

Downtown Campus

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

625 CITRACADO PKWY STE
200

ESCONDIDO, CA 92025-6428

Phone: (760) 746-2641

Fax: (760) 740-2178

After Hours Phone: (760)

746-2641

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R, T

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Hours: M-SA 9AM-5PM

SOCHA, TRACI E

Provider ID: 22973

Provider Gender: Female

License number: 20A7862

NPI: 1669478616

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Palomar

Health Downtown Campus,

Palomar Medical Center, Rady

Childrens Hospital San Diego

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

215 S HICKORY ST STE 126

ESCONDIDO, CA 92025-4360

Phone: (760) 745-7313

Fax: (760) 745-6360

After Hours Phone: (760)

745-7313

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

STEELE, LAUREN E

Provider ID: 529261

Provider Gender: Female

License number: A132448

NPI: 1780028340

Provider English Spoken: Yes

Provider Language(s) Spoken:

French, Spanish

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Ucsd Medical Ctr

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

625 CITRACADO PKWY STE 200

ESCONDIDO, CA 92025-6428

Phone: (760) 746-2641

Fax: (760) 740-2178

After Hours Phone: (760)

746-2641

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

STERNFELD, SHARON R

Provider ID: 56437

Provider Gender: Female

License number: A61025

NPI: 1184695108

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Pomerado

Hospital, Rady Childrens

Hospital San Diego, Palomar

Health Downtown Campus,

Palomar Medical Center

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

625 CITRACADO PKWY STE 200

ESCONDIDO, CA 92025-6428

Phone: (760) 746-2641

Fax: (760) 740-2178

After Hours Phone: (760)

746-2641

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, R, T

Hours: M-SA 9AM-5PM

STRAZICICH, KARLA A

Provider ID: 206270

Provider Gender: Female

License number: A45413

NPI: 1134154958

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Palomar

Medical Center

Board Certified Specialty: No

IHP-NEIGHBORHOOD

HEALTHCARE

460 N ELM ST

ESCONDIDO, CA 92025-3002

Phone: (760) 520-8100

Fax:

After Hours Phone: (760)

520-8100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

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

8AM-12PM

TELLECHEA-SANCHEZ, SELMIRA

Provider ID: 424775

Provider Gender: Female

License number: G83438

NPI: 1730288747

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Hospital Affiliation:
Board Certified Specialty: No
 IHP-NEIGHBORHOOD
 HEALTHCARE
 426 N DATE ST
 ESCONDIDO, CA 92025-3409
Phone: (760) 690-5900
Fax:
After Hours Phone: (760)
 690-5900
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☒ *Accessibility:*
Hours: M-F 8AM-5PM, SA
 9AM-5PM

WOSK, BERNARD

Provider ID: 419344
Provider Gender: Male
License number: A49350
NPI: 1033154984
Provider English Spoken: Yes
Provider Language(s) Spoken:
 French, Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 BORREGO COMMUNITY
 HEALTH FOUNDTION
 1121 E WASHINGTON AVE
 ESCONDIDO, CA 92025-2214
Phone: (760) 871-0606
Fax:
After Hours Phone: (760)
 871-0606
Website: n
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No

☒ *Accessibility:* P, EB, IB, E, R,
 W
Hours: SA,SU 8AM-12PM, M-F
 8AM-8PM

ZANDKARIMI, FARIBA

Provider ID: 87737
Provider Gender: Female
License number: A46161
NPI: 1356373674
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Farsi, Persian, Spanish
Cultural Competency: No
Hospital Affiliation: Mercy
 General Hospital, Rady Childrens
 Hospital San Diego, Scripps
 Mercy Hospital, Scripps Mercy
 Hospital Chula Vista, Ucsd
 Medical Ctr

Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 240 W MISSION AVE STE A
 ESCONDIDO, CA 92025-1700
Phone: (760) 747-5400
Fax: (760) 747-2286
After Hours Phone: (760)
 747-5400
Website:

Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/21
American Sign Language (ASL):
 No
 ☒ *Accessibility:* P, EB, IB, E, R,
 W
Hours: M-SA 9AM-5PM

ZANDKARIMI, FARIBA

Provider ID: 87737
Provider Gender: Female
License number: A46161
NPI: 1356373674
Provider English Spoken: Yes
Provider Language(s) Spoken:

Farsi, Persian, Spanish
Cultural Competency: No
Hospital Affiliation: Mercy
 General Hospital, Rady Childrens
 Hospital San Diego, Scripps
 Mercy Hospital, Scripps Mercy
 Hospital Chula Vista, Ucsd
 Medical Ctr
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 240 W MISSION AVE STE A
 ESCONDIDO, CA 92025-1700
Phone: (760) 747-5400
Fax: (760) 747-2286
After Hours Phone: (760)
 747-5400
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☒ *Accessibility:* P, EB, IB, E, R,
 W
Hours: M-SA 9AM-5PM

PHYSICIANS ASSISTANT

BAISLEY, SHAWN M

Provider ID: 519481
Provider Gender: Male
License number: PA52347
NPI: 1376936120
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 255 N ASH ST STE 101
 ESCONDIDO, CA 92027-3069

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Phone: (760) 745-5832

Fax:

After Hours Phone: (760)
745-5832

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/120

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

SAVILLE, KUN

Provider ID: 206269

Provider Gender: Female

License number: PA51508

NPI: 1518377894

Provider English Spoken: Yes

Provider Language(s) Spoken:
Chinese

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
IHP-NEIGHBORHOOD
HEALTHCARE

1001 E GRAND AVE

ESCONDIDO, CA 92025-4604

Phone: (760) 850-8200

Fax:

After Hours Phone: (760)
850-8200

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA
9AM-5PM

SHARPE, NORMA A

Provider ID: 519481

Provider Gender: Female

License number: PA20490

NPI: 1619100237

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER

255 N ASH ST STE 101

ESCONDIDO, CA 92027-3069

Phone: (760) 745-5832

Fax:

After Hours Phone: (760)
745-5832

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/120

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

PODIATRIST

NEGRON, RICARDO J

Provider ID: 206271

Provider Gender: Male

License number: DPM5260

NPI: 1932548393

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Providence St
Joseph Hospital

Board Certified Specialty: No
IHP-NEIGHBORHOOD
HEALTHCARE

728 E VALLEY PKWY

ESCONDIDO, CA 92025-3052

Phone: (760) 737-6900

Fax:

After Hours Phone: (760)
737-6900

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,
W

Hours: M,TU,TH,F 8AM-5PM, W
9AM-5PM, SA 9AM-5PM

REHM, KENNETH B

Provider ID: 206266

Provider Gender: Male

License number: DPM2808

NPI: 1588607766

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Sharp
Memorial Hospital, Ucsd Medical
Ctr, Kindred Hospital San Diego

Board Certified Specialty: No
IHP-NEIGHBORHOOD
HEALTHCARE

425 N DATE ST

ESCONDIDO, CA 92025-3413

Phone: (760) 520-8340

Fax:

After Hours Phone: (760)
520-8340

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 000/21

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA
9AM-5PM

FALLBROOK

FAMILY PRACTICE

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

DEEL, MARGARET G

Provider ID: 227006
 Provider Gender: Female
 License number: C51529
 NPI: 1124151360
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:

Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 593 E ELDER ST STE B
 FALLBROOK, CA 92028-5000
 Phone: (760) 723-5900
 Fax: (760) 723-5906
 After Hours Phone: (760)
 723-5900
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/99
 American Sign Language (ASL):
 No
 Accessibility: P, EB, IB, E, R,
 T, W
 Hours: M-SA 9AM-5PM

PAPALIA, SARAH A

Provider ID: 183910
 Provider Gender: Female
 License number: A144436
 NPI: 1336572676
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-COMMUNITY HEALTH
 SYSTEM
 1328 S MISSION RD
 FALLBROOK, CA 92028-4006
 Phone: (760) 451-4720
 Fax:
 After Hours Phone: (760)
 451-4720
 Website:

Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility: P, EB, IB, E, R,
 T, W
 Hours: M-SA 8AM-5PM

FQHC

FALLBROOK FAMILY HLTH CTR,

Provider ID: 183910
 Provider Gender:
 License number: 080000150
 NPI: 1982756086
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty:
 IHP-COMMUNITY HEALTH
 SYSTEM
 1328 S MISSION RD
 FALLBROOK, CA 92028-4006
 Phone: (760) 451-4720
 Fax: (760) 451-4700
 After Hours Phone: (760)
 451-4720
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility: P, EB, IB, E, R,
 T, W
 Hours: M-SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

PEARSON, LAWRENCE F

Provider ID: 183910
 Provider Gender: Male

License number: G37412
 NPI: 1538234190
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Palomar
 Health Downtown Campus
 Board Certified Specialty: No
 IHP-COMMUNITY HEALTH
 SYSTEM
 1328 S MISSION RD
 FALLBROOK, CA 92028-4006
 Phone: (760) 451-4720
 Fax:
 After Hours Phone: (760)
 451-4720
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility: P, EB, IB, E, R,
 T, W
 Hours: M-SA 8AM-5PM

PEDIATRICS

DEL RE, AMANDA M

Provider ID: 238960
 Provider Gender: Female
 License number: A129568
 NPI: 1548499957
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 1107 S MISSION RD
 FALLBROOK, CA 92028-3224

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Phone: (760) 451-0070

Fax: (760) 451-1499

After Hours Phone: (760)
451-0070

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R

Hours: M-SA 9AM-5PM

LINARES, YENDI N

Provider ID: 538068

Provider Gender: Female

License number: A148629

NPI: 1336674886

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Childrens
Hosp Of Los Angeles, Scripps
Memorial Hospital

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

1107 S MISSION RD
FALLBROOK, CA 92028-3224

Phone: (760) 451-0070

Fax: (760) 451-1499

After Hours Phone: (760)

451-0070

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R

Hours: M-SA 9AM-5PM

PAIK, JULIANA S

Provider ID: 504522

Provider Gender: Female

License number: A73973

NPI: 1528167087

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

1107 S MISSION RD

FALLBROOK, CA 92028-3224

Phone: (760) 451-0070

Fax: (760) 451-1499

After Hours Phone: (760)

451-0070

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R

Hours: M-SA 9AM-5PM

ROBINSON, DAISY A

Provider ID: 230579

Provider Gender: Female

License number: A56278

NPI: 1659389740

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

321 E ALVARADO ST
FALLBROOK, CA 92028-2912

Phone: (760) 723-6200

Fax: (760) 723-6215

After Hours Phone: (760)

723-6200

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

VU, WENDY

Provider ID: 183910

Provider Gender: Female

License number: A169529

NPI: 1508148370

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
IHP-COMMUNITY HEALTH
SYSTEM

1328 S MISSION RD
FALLBROOK, CA 92028-4006

Phone: (760) 451-4770

Fax:

After Hours Phone: (760)

451-4770

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,
T, W

Hours: M-SA 8AM-5PM

IMPERIAL BEACH

CERTIFIED NURSE PRACTITIONER

O'BRIEN, FRANCESCA A

Provider ID: 179678

Provider Gender: Female

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C. Directorio de proveedores de atención primaria

License number: NP95005211
NPI: 1649720756
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-IMPERIAL BEACH HEALTH
CENTER
949 PALM AVE
IMPERIAL BEACH, CA
91932-1503

Phone: (619) 429-3733

Fax:

After Hours Phone: (619)
429-3733

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ *Accessibility:* P, EB, E, R, W
Hours: M,TH 8AM-8PM, TU,W,F
8AM-5PM, SA 9AM-5PM

ROARK, RANDALL A

Provider ID: 179678

Provider Gender: Male

License number: NP15996

NPI: 1447312178

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
IHP-IMPERIAL BEACH HEALTH
CENTER

949 PALM AVE
IMPERIAL BEACH, CA
91932-1503

Phone: (619) 429-3733

Fax:

After Hours Phone: (619)
429-3733

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ *Accessibility:* P, EB, E, R, W
Hours: M,TH 8AM-8PM, TU,W,F
8AM-5PM, SA 9AM-5PM

FAMILY PRACTICE

CHISUM, FAITH P

Provider ID: 179678

Provider Gender: Female

License number: A98040

NPI: 1346432069

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: Yes
IHP-IMPERIAL BEACH HEALTH
CENTER

949 PALM AVE
IMPERIAL BEACH, CA
91932-1503

Phone: (619) 429-3733

Fax:

After Hours Phone: (619)
429-3733

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ *Accessibility:* P, EB, E, R, W
Hours: M,TH 8AM-8PM, TU,W,F
8AM-5PM, SA 9AM-5PM

JOHNSON, DANIEL W

Provider ID: 179678

Provider Gender: Male

License number: 20A9393

NPI: 1245311216

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista

Board Certified Specialty: No
IHP-IMPERIAL BEACH HEALTH
CENTER

949 PALM AVE

IMPERIAL BEACH, CA
91932-1503

Phone: (619) 429-3733

Fax:

After Hours Phone: (619)
429-3733

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ *Accessibility:* P, EB, E, R, W
Hours: M,TH 8AM-8PM, TU,W,F
8AM-5PM, SA 9AM-5PM

LEUTE, ERIC J

Provider ID: 179678

Provider Gender: Male

License number: A80832

NPI: 1720171507

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps
Memorial Hospital, Scripps
Mercy Hospital, Scripps Mercy
Hospital Chula Vista

Board Certified Specialty: Yes
IHP-IMPERIAL BEACH HEALTH
CENTER

949 PALM AVE

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C. Directorio de proveedores de atención primaria

IMPERIAL BEACH, CA
91932-1503
Phone: (619) 429-3733
Fax:
After Hours Phone: (619)
429-3733
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, E, R, W
Hours: M,TH 8AM-8PM, TU,W,F
8AM-5PM, SA 9AM-5PM

MOYA, MARY R

Provider ID: 179678
Provider Gender: Female
License number: A80185
NPI: 1093844417
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Board Certified Specialty: Yes
IHP-IMPERIAL BEACH HEALTH
CENTER
949 PALM AVE
IMPERIAL BEACH, CA
91932-1503
Phone: (619) 429-3733
Fax:
After Hours Phone: (619)
429-3733
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, E, R, W

Hours: M,TH 8AM-8PM, TU,W,F
8AM-5PM, SA 9AM-5PM

SUMMERS-DAY, COURTNEY A

Provider ID: 179678
Provider Gender: Female
License number: A112781
NPI: 1124288873
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Board Certified Specialty: Yes
IHP-IMPERIAL BEACH HEALTH
CENTER
949 PALM AVE
IMPERIAL BEACH, CA
91932-1503
Phone: (619) 429-3733
Fax:
After Hours Phone: (619)
429-3733
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, E, R, W
Hours: M,TH 8AM-8PM, TU,W,F
8AM-5PM, SA 9AM-5PM

Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
IHP-IMPERIAL BEACH HEALTH
CENTER
949 PALM AVE
IMPERIAL BEACH, CA
91932-1503
Phone: (619) 429-3733
Fax: (619) 628-5550
After Hours Phone: (619)
429-3733
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, E, R, W
Hours: M,TH 8AM-8PM, TU,W,F
8AM-5PM, SA 9AM-5PM

INTERNAL MEDICINE

RYAN, DANA A

Provider ID: 179678
Provider Gender: Female
License number: A66830
NPI: 1780609990
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-IMPERIAL BEACH HEALTH
CENTER
949 PALM AVE
IMPERIAL BEACH, CA
91932-1503
Phone: (619) 429-3733
Fax:
After Hours Phone: (619)
429-3733
Website: www.ihpsocal.org
Email:

FQHC

IMPERIAL BEACH HEALTH CENTER,

Provider ID: 179678
Provider Gender:
License number: 090000119
NPI: 1790718351
Provider English Spoken: Yes
Provider Language(s) Spoken:

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C. Directorio de proveedores de atención primaria

Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: P, EB, E, R, W
 Hours: M,TH 8AM-8PM, TU,W,F
 8AM-5PM, SA 9AM-5PM

PEDIATRICS

DOKICH, SRETENKA

Provider ID: 179678
 Provider Gender: Female
 License number: A51447
 NPI: 1154409035
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Board Certified Specialty: No
 IHP-IMPERIAL BEACH HEALTH
 CENTER
 949 PALM AVE
 IMPERIAL BEACH, CA
 91932-1503
 Phone: (619) 429-3733
 Fax:
 After Hours Phone: (619)
 429-3733
 Website: www.ihpsocal.org
 Email:

Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: P, EB, E, R, W
 Hours: M,TH 8AM-8PM, TU,W,F
 8AM-5PM, SA 9AM-5PM

JULIAN

CARDIOVASCULAR DISEASE

SCHWARTZ, JOSEPH A

Provider ID: 185180
 Provider Gender: Male
 License number: A36637
 NPI: 1295747038
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Long Beach
 Memorial Med Ctr, Providence St
 Mary Medical Center
 Board Certified Specialty: No
 BORREGO COMMUNITY
 HEALTH FOUNDTION
 2721 WASHINGTON ST
 JULIAN, CA 92036-9233
 Phone: (760) 765-1223
 Fax: (760) 765-1278
 After Hours Phone: (760)
 765-1223
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM

FQHC

JULIAN MEDICAL CENTER,

Provider ID: 185180
 Provider Gender:
 License number: 080000651
 NPI: 1700946969
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty:
 BORREGO COMMUNITY
 HEALTH FOUNDTION
 2721 WASHINGTON ST
 JULIAN, CA 92036-9233

Phone: (760) 765-1223
 Fax: (760) 765-1278
 After Hours Phone: (760)
 765-1223
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM

LA JOLLA

INTERNAL MEDICINE

ROLDAN, ANSELMO

Provider ID: 414421
 Provider Gender: Male
 License number: A42177
 NPI: 1790898369
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp Chula
 Vista Med Ctr
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 3490 PALM AVENUE
 LA JOLLA, CA 92037
 Phone: (619) 423-5616
 Fax: (619) 423-5684
 After Hours Phone: (619)
 423-5616
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM

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C. Directorio de proveedores de atención primaria

LA JOLLA

FAMILY PRACTICE

CANELO, NICHOLAS P

Provider ID: 437749
Provider Gender: Male
License number: A145725
NPI: 1104209048
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 7855 IVANHOE AVE STE 110
 LA JOLLA, CA 92037-4507
Phone: (858) 554-1212
Fax: (858) 795-1195
After Hours Phone: (858) 554-1212
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 1/99
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM

DEMBO SMEATON, ELENA M

Provider ID: 537353
Provider Gender: Female
License number: A82203
NPI: 1184795296
Provider English Spoken: Yes
Provider Language(s) Spoken: Russian
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 HEALTH EXCEL IPA INC

8950 VILLA LA JOLLA DR STE
 C129
 LA JOLLA, CA 92037-1707
Phone: (858) 450-5900
Fax: (858) 450-5904
After Hours Phone: (858) 450-5900
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM

KUPERMAN, ILAN M

Provider ID: 301214
Provider Gender: Male
License number: A87018
NPI: 1336178169
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 9850 GENESEE AVE STE 320
 LA JOLLA, CA 92037-1208
Phone: (858) 554-1212
Fax: (858) 795-1195
After Hours Phone: (858) 554-1212
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM

INTERNAL MEDICINE

EHRlich, DENNIS W

Provider ID: 537420
Provider Gender: Male
License number: G45623
NPI: 1689788051
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 8950 VILLA LA JOLLA DR STE
 C129
 LA JOLLA, CA 92037-1707
Phone: (858) 450-5900
Fax: (858) 450-5903
After Hours Phone: (858) 450-5900
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM

HISER, DANIEL L

Provider ID: 537421
Provider Gender: Male
License number: G47397
NPI: 1376577973
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Grossmont Hospital, Alvarado Hospital Llc
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 8950 VILLA LA JOLLA DR STE
 C129
 LA JOLLA, CA 92037-1707

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Phone: (858) 450-5900
 Fax: (858) 450-5903
 After Hours Phone: (858) 450-5900

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL): No

♿ Accessibility:

Hours: M-SA 9AM-5PM

PEDIATRICS

GAINOR, GRETCHEN C

Provider ID: 537752

Provider Gender: Female

License number: G79066

NPI: 1174504757

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

7300 GIRARD AVE STE 106

LA JOLLA, CA 92037-5138

Phone: (858) 459-4351

Fax: (858) 459-4399

After Hours Phone: (858)

459-4351

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

♿ Accessibility:

Hours: M-SA 9AM-5PM

GANDHI, SHEETAL N

Provider ID: 282029

Provider Gender: Female

License number: A81898

NPI: 1700858859

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Scripps Memorial Hospital

Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

4150 REGENTS PARK ROW
 STE 355

LA JOLLA, CA 92037-9102

Phone: (858) 457-2043

Fax: (858) 457-2092

After Hours Phone: (858)

457-2043

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

♿ Accessibility: EB, IB, E, R

Hours: M-SA 9AM-5PM

HUNTER, WENDY L

Provider ID: 377597

Provider Gender: Female

License number: A94607

NPI: 1053515551

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Childrens

Hosp And Resrch Ctr At

Oakland, Rady Childrens

Hospital San Diego

Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

7300 GIRARD AVE STE 106

LA JOLLA, CA 92037-5138

Phone: (858) 459-4351

Fax: (858) 459-4399

After Hours Phone: (858) 459-4351

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

♿ Accessibility:

Hours: M-SA 9AM-5PM

JAMES, VERONIQUE M

Provider ID: 9959

Provider Gender: Female

License number: C50068

NPI: 1700857703

Provider English Spoken: Yes

Provider Language(s) Spoken:

French, Spanish

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Rady

Childrens Hospital San Diego

Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

4150 REGENTS PARK ROW
 STE 355

LA JOLLA, CA 92037-9102

Phone: (858) 457-2043

Fax: (858) 457-2092

After Hours Phone: (858)

457-2043

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

♿ Accessibility: EB, IB, E, R

Hours: M-SA 9AM-5PM

LYM, RYAN L

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C. Directorio de proveedores de atención primaria

Provider ID: 477104
Provider Gender: Male
License number: A152493
NPI: 1114389491
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
7300 GIRARD AVE STE 106
LA JOLLA, CA 92037-5138
Phone: (858) 459-4351
Fax:
After Hours Phone: (858) 459-4351
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM

PARSONS, GENEVIEVE N

Provider ID: 24122
Provider Gender: Female
License number: A91825
NPI: 1699700914
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Rady Childrens Hospital San Diego, Scripps Memorial Hospital
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
7300 GIRARD AVE STE 106
LA JOLLA, CA 92037-5138

Phone: (858) 459-4351
Fax: (858) 459-4399
After Hours Phone: (858) 459-4351
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM

ROBERTS, KENDALL R

Provider ID: 48933
Provider Gender: Male
License number: A66977
NPI: 1265762033
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Rady Childrens Hospital San Diego
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
4150 REGENTS PARK ROW STE 355
LA JOLLA, CA 92037-9102
Phone: (858) 457-2043
Fax: (858) 457-2092
After Hours Phone: (858) 457-2043
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility: EB, IB, E, R
Hours: M-SA 9AM-5PM

SHAH, MEERA T

Provider ID: 145167

Provider Gender: Female
License number: A111054
NPI: 1720300239
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista, Sharp Chula Vista Med Ctr
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
4150 REGENTS PARK ROW STE 355
LA JOLLA, CA 92037-9102
Phone: (858) 457-2043
Fax: (858) 457-2092
After Hours Phone: (858) 457-2043
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility: EB, IB, E, R
Hours: M-SA 9AM-5PM

TUNG, VIVIAN V

Provider ID: 11291
Provider Gender: Female
License number: A78067
NPI: 1285665133
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Scripps Memorial Hospital
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
7300 GIRARD AVE STE 106

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C. Directorio de proveedores de atención primaria

LA JOLLA, CA 92037-5138

Phone: (858) 459-4351

Fax: (858) 459-4399

After Hours Phone: (858)
459-4351

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

TWITO, TORY R

Provider ID: 465383

Provider Gender: Female

License number: 20A12114

NPI: 1073838611

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

4150 REGENTS PARK ROW
STE 355

LA JOLLA, CA 92037-9102

Phone: (858) 457-2043

Fax: (858) 457-2092

After Hours Phone: (858)

457-2043

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

LA MESA

CARDIOVASCULAR DISEASE

SCHWARTZ, JOSEPH A

Provider ID: 480827

Provider Gender: Male

License number: A36637

NPI: 1295747038

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Long Beach
Memorial Med Ctr, Providence St
Mary Medical Center

Board Certified Specialty: No
BORREGO COMMUNITY
HEALTH FOUNDTION

8881 FLETCHER PKWY STE
200

LA MESA, CA 91942-3135

Phone: (619) 401-0404

Fax:

After Hours Phone: (619)

401-0404

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/21

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

FAMILY PRACTICE

BROWN, ANDREW J

Provider ID: 470836

Provider Gender: Male

License number: A154289

NPI: 1629430814

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

8881 FLETCHER PKWY STE
205

LA MESA, CA 91942-3187

Phone: (619) 270-4388

Fax: (619) 464-5109

After Hours Phone: (619)
270-4388

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

BROWN, ANDREW J

Provider ID: 470837

Provider Gender: Male

License number: A154289

NPI: 1629430814

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Grossmont
Hospital

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

8881 FLETCHER PKWY STE
200

LA MESA, CA 91942-3135

Phone: (619) 464-6434

Fax:

After Hours Phone: (619)

464-6434

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

<p>No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM</p> <p>GURTCH, TIM P <i>Provider ID:</i> 395107 <i>Provider Gender:</i> Male <i>License number:</i> C50806 <i>NPI:</i> 1881694776 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Russian, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Alvarado Hosp Med Ctr <i>Board Certified Specialty:</i> No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 8875 LA MESA BLVD STE C LA MESA, CA 91942-5434 <i>Phone:</i> (619) 668-8100 <i>Fax:</i> (619) 667-2688 <i>After Hours Phone:</i> (619) 668-8100 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM</p> <hr/> <p style="text-align: center;">FQHC</p> <hr/> <p>LA MESA PEDIATRICS, <i>Provider ID:</i> 480827 <i>Provider Gender:</i> <i>License number:</i> 550000430 <i>NPI:</i> 1033759311 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i></p>	<p>BORREGO COMMUNITY HEALTH FOUNDTION 8881 FLETCHER PKWY STE 200 LA MESA, CA 91942-3135 <i>Phone:</i> (619) 464-6434 <i>Fax:</i> (619) 464-5109 <i>After Hours Phone:</i> (619) 464-6434 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/21 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM</p> <hr/> <p style="text-align: center;">INTERNAL MEDICINE</p> <hr/> <p>ALAMAR, ALI G <i>Provider ID:</i> 354712 <i>Provider Gender:</i> Male <i>License number:</i> A69613 <i>NPI:</i> 1972606374 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Sharp Memorial Hospital, Vibra Hospital Of San Diego, Scripps Memorial Hospital, Sharp Chula Vista Med Ctr <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 5565 GROSSMONT CENTER DR STE 1 # 105 LA MESA, CA 91942-3000 <i>Phone:</i> (619) 724-6644 <i>Fax:</i> (619) 414-1379 <i>After Hours Phone:</i> (619) 724-6644 <i>Website:</i></p>	<p><i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM</p> <p>PABAND, RASHID <i>Provider ID:</i> 524677 <i>Provider Gender:</i> Male <i>License number:</i> A120108 <i>NPI:</i> 1407089451 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Alvarado Hospital Llc <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 5111 GARFIELD ST STE B LA MESA, CA 91941-5148 <i>Phone:</i> (619) 698-9375 <i>Fax:</i> (619) 698-9378 <i>After Hours Phone:</i> (619) 698-9375 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 18/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM</p> <p>PABAND, RASHID <i>Provider ID:</i> 544479 <i>Provider Gender:</i> Male <i>License number:</i> A120108 <i>NPI:</i> 1407089451 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic <i>Cultural Competency:</i> No</p>
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C. Directorio de proveedores de atención primaria

Hospital Affiliation: Grossmont Hospital, Alvarado Hospital Llc
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 5525 GROSSMONT CENTER DR STE 609
 LA MESA, CA 91942-3009
Phone: (858) 433-4200
Fax: (619) 768-1087
After Hours Phone: (858) 433-4200
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM

PRABAKER, VENUGOPAL

Provider ID: 41067
Provider Gender: Male
License number: A42653
NPI: 1467401042
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Chinese, Polish, Russian, Spanish, Tagalog, Tamil, Thai
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc, Grossmont Hospital, Scripps Mercy Hospital
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 7339 EL CAJON BLVD STE I LA MESA, CA 91942-7435
Phone: (619) 698-0606
Fax: (619) 698-0609
After Hours Phone: (619) 698-0606
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None

American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM

PRABAKER, VENUGOPAL, MD

Provider ID: 41067
Provider Gender: Male
License number: A42653
NPI: 1467401042
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Chinese, Polish, Russian, Spanish, Tagalog, Tamil, Thai
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc, Grossmont Hospital, Scripps Mercy Hospital
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 7339 EL CAJON BLVD STE I LA MESA, CA 91942-7435
Phone: (619) 698-0606
Fax: (619) 698-0609
After Hours Phone: (619) 698-0606
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM

SHAHBAZ, MAJID

Provider ID: 87272
Provider Gender: Male
License number: A50402
NPI: 1790966018
Provider English Spoken: Yes
Provider Language(s) Spoken: Faroese, Farsi, Tagalog
Cultural Competency: No
Hospital Affiliation: Grossmont

Hospital
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 8851 CENTER DR STE 408
 LA MESA, CA 91942-3076
Phone: (619) 583-1174
Fax: (619) 583-4609
After Hours Phone: (619) 583-1174
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 60/100
American Sign Language (ASL): No
 ☯ *Accessibility:* P, IB, E
Hours: M-SA 9AM-5PM

TOULOUIE, ELAHE

Provider ID: 52071
Provider Gender: Female
License number: A73141
NPI: 1235197856
Provider English Spoken: Yes
Provider Language(s) Spoken: Armenian, Faroese, Farsi, German, Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Alvarado Hosp Med Ctr
Board Certified Specialty: Yes
 HEALTH EXCEL IPA INC
 5358 JACKSON DR # 1
 LA MESA, CA 91942-3040
Phone: (619) 993-8996
Fax: (858) 452-9276
After Hours Phone: (619) 993-8996
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
 ☯ *Accessibility:* W

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C. Directorio de proveedores de atención primaria

Hours: M-SA 9AM-5PM

OBSTETRICS / GYNECOLOGY

BULLOCH, EDGAR M

Provider ID: 480827

Provider Gender: Male

License number: A113241

NPI: 1508046376

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont
Hospital

Board Certified Specialty: No

BORREGO COMMUNITY

HEALTH FOUNDTION

8881 FLETCHER PKWY STE
200

LA MESA, CA 91942-3135

Phone: (619) 464-6434

Fax:

After Hours Phone: (619)

464-6434

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/21

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

DAVIS, TRACIE L

Provider ID: 480827

Provider Gender: Female

License number: A89865

NPI: 1275680738

Provider English Spoken: Yes

Provider Language(s) Spoken:
Arabic, Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont
Hospital

Board Certified Specialty: No
BORREGO COMMUNITY

HEALTH FOUNDTION

8881 FLETCHER PKWY STE
200

LA MESA, CA 91942-3135

Phone: (619) 464-6434

Fax:

After Hours Phone: (619)

464-6434

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/21

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

MODI, MONICA N

Provider ID: 480827

Provider Gender: Female

License number: A150637

NPI: 1619116605

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

BORREGO COMMUNITY

HEALTH FOUNDTION

8881 FLETCHER PKWY STE
200

LA MESA, CA 91942-3135

Phone: (619) 464-6434

Fax:

After Hours Phone: (619)

464-6434

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/21

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

PAPA, RHETT R

Provider ID: 480827

Provider Gender: Male

License number: 20A11733

NPI: 1063642312

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Grossmont
Hospital

Board Certified Specialty: No

BORREGO COMMUNITY

HEALTH FOUNDTION

8881 FLETCHER PKWY STE
200

LA MESA, CA 91942-3135

Phone: (619) 464-6434

Fax:

After Hours Phone: (619)

464-6434

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/21

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

PEDIATRICS

ADIGOPULA, BINA

Provider ID: 44140

Provider Gender: Female

License number: A45273

NPI: 1982686200

Provider English Spoken: Yes

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

Cultural Competency: No

Hospital Affiliation: Grossmont
Hospital, Rady Childrens

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Hospital San Diego
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 6942 UNIVERSITY AVE STE A
 LA MESA, CA 91942-5963
Phone: (619) 698-2184
Fax: (619) 698-2084
After Hours Phone: (619) 698-2184
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM

ALSHEIKH, HUDA Y
Provider ID: 435468
Provider Gender: Female
License number: C133872
NPI: 1487746855
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 8881 FLETCHER PKWY STE 200
 LA MESA, CA 91942-3135
Phone: (619) 464-6434
Fax: (619) 464-5109
After Hours Phone: (619) 464-6434
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No

☯ *Accessibility:*
Hours: M-SA 9AM-5PM
ALSHEIKH, HUDA Y
Provider ID: 451191
Provider Gender: Female
License number: C133872
NPI: 1487746855
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 8881 FLETCHER PKWY STE 205
 LA MESA, CA 91942-3187
Phone: (619) 464-6434
Fax: (619) 464-5109
After Hours Phone: (619) 464-6434
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM

ALSHEIKH, HUDA Y
Provider ID: 480827
Provider Gender: Female
License number: C133872
NPI: 1487746855
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
BORREGO COMMUNITY HEALTH FOUNDTION

8881 FLETCHER PKWY STE 200
 LA MESA, CA 91942-3135
Phone: (619) 464-6434
Fax:
After Hours Phone: (619) 464-6434
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/21
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM

CLAY, CORRIE T
Provider ID: 536652
Provider Gender: Female
License number: A91977
NPI: 1437207750
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Grossmont Hospital, Sharp Mary Birch Hosp For Women And Newborns
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 8881 FLETCHER PKWY STE 200
 LA MESA, CA 91942-3135
Phone: (619) 464-6434
Fax: (619) 464-5109
After Hours Phone: (619) 464-6434
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

<p>♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM</p> <p>GIANFORTUNE, RACHEL M <i>Provider ID:</i> 433091 <i>Provider Gender:</i> Female <i>License number:</i> A94327 <i>NPI:</i> 1912193301 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Grossmont Hospital <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 8881 FLETCHER PKWY STE 200 LA MESA, CA 91942-3135 <i>Phone:</i> (619) 464-6434 <i>Fax:</i> (619) 464-5109 <i>After Hours Phone:</i> (619) 464-6434 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM</p> <p>GIANFORTUNE, RACHEL M <i>Provider ID:</i> 450501 <i>Provider Gender:</i> Female <i>License number:</i> A94327 <i>NPI:</i> 1912193301 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady</p>	<p>Childrens Hospital San Diego, Sharp Memorial Hospital, Grossmont Hospital <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 8881 FLETCHER PKWY STE 205 LA MESA, CA 91942-3187 <i>Phone:</i> (619) 464-6434 <i>Fax:</i> <i>After Hours Phone:</i> (619) 464-6434 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM</p> <p>IMUS, PAUL M <i>Provider ID:</i> 239590 <i>Provider Gender:</i> Male <i>License number:</i> A124606 <i>NPI:</i> 1104116680 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Grossmont Hospital, Sharp Mary Birch Hosp For Women And Newborns <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 8881 FLETCHER PKWY STE 200 LA MESA, CA 91942-3135 <i>Phone:</i> (619) 401-0404 <i>Fax:</i> (619) 401-0522 <i>After Hours Phone:</i> (619) 401-0404</p>	<p><i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM</p> <p>MOFFATT, KYRRA <i>Provider ID:</i> 275099 <i>Provider Gender:</i> Female <i>License number:</i> 20A10604 <i>NPI:</i> 1194922419 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Grossmont Hospital, Sharp Mary Birch Hosp For Women And Newborns <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 8881 FLETCHER PKWY STE 200 LA MESA, CA 91942-3135 <i>Phone:</i> (619) 401-0404 <i>Fax:</i> (619) 401-0522 <i>After Hours Phone:</i> (619) 401-0404 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM</p> <p>MOLINOS, NICOLE P <i>Provider ID:</i> 538098 <i>Provider Gender:</i> Female</p>
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C. Directorio de proveedores de atención primaria

License number: A166790
NPI: 1538685524
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
6942 UNIVERSITY AVE STE A
LA MESA, CA 91942-5963
Phone: (619) 698-2184
Fax: (619) 698-2084
After Hours Phone: (619)
698-2184
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

RONQUILLO, RINA R

Provider ID: 377359
Provider Gender: Female
License number: A99286
NPI: 1407047749
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Rady Childrens
Hospital San Diego, Sharp Mary
Birch Hosp For Women And
Newborns, Sharp Memorial
Hospital
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
8881 FLETCHER PKWY STE
200
LA MESA, CA 91942-3135

Phone: (619) 464-6434
Fax: (619) 464-5109
After Hours Phone: (619)
464-6434
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

SHORT, RICHARD L

Provider ID: 60736
Provider Gender: Male
License number: G37177
NPI: 1568552727
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Rady Childrens
Hospital San Diego, Sharp Mary
Birch Hosp For Women And
Newborns
Board Certified Specialty: Yes
RADY CHILDRENS HEALTH
NETWORK
8881 FLETCHER PKWY STE
200
LA MESA, CA 91942-3135
Phone: (619) 464-6434
Fax: (619) 464-5109
After Hours Phone: (619)
464-6434
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

LAKESIDE

CHIROPRACTOR

PAGE, BIANCA M

Provider ID: 353843
Provider Gender: Female
License number: DC33688
NPI: 1649787607
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-NEIGHBORHOOD
HEALTHCARE
10039 VINE ST
LAKESIDE, CA 92040-3120
Phone: (858) 218-3000
Fax:
After Hours Phone: (858)
218-3000
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM

FAMILY PRACTICE

FERRAILOLO, NATALIE K

Provider ID: 353843
Provider Gender: Female
License number: A152372
NPI: 1306290143
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No

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C. Directorio de proveedores de atención primaria

IHP-NEIGHBORHOOD
HEALTHCARE
10039 VINE ST
LAKESIDE, CA 92040-3120
Phone: (858) 218-3000
Fax:
After Hours Phone: (858)
218-3000
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM

ZAMPELLO, LISA E

Provider ID: 353843
Provider Gender: Female
License number: A145924
NPI: 1477933026
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-NEIGHBORHOOD
HEALTHCARE
10039 VINE ST
LAKESIDE, CA 92040-3120
Phone: (858) 218-3000
Fax:
After Hours Phone: (858)
218-3000
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM

FQHC

**NEIGHBORHOOD
HEALTHCARE LAKESIDE,**
Provider ID: 353843
Provider Gender:
License number: 080000483
NPI: 1932384120
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
IHP-NEIGHBORHOOD
HEALTHCARE
10039 VINE ST
LAKESIDE, CA 92040-3120
Phone: (858) 218-3000
Fax: (360) 462-2744
After Hours Phone: (858)
218-3000
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM

INTERNAL MEDICINE

MCFARLAND, NATHAN A
Provider ID: 353843
Provider Gender: Male
License number: A75411
NPI: 1265462196
Provider English Spoken: Yes
Provider Language(s) Spoken:
Italian, Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No

IHP-NEIGHBORHOOD
HEALTHCARE
10039 VINE ST
LAKESIDE, CA 92040-3120
Phone: (858) 218-3000
Fax:
After Hours Phone: (858)
218-3000
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM

PREVENTATIVE MEDICINE GENERAL

MANNINO, ELIZABETH A
Provider ID: 353843
Provider Gender: Female
License number: A43914
NPI: 1548290463
Provider English Spoken: Yes
Provider Language(s) Spoken:
Italian, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital
Board Certified Specialty: No
IHP-NEIGHBORHOOD
HEALTHCARE
10039 VINE ST
LAKESIDE, CA 92040-3120
Phone: (858) 218-3000
Fax:
After Hours Phone: (858)
218-3000
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None

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C. Directorio de proveedores de atención primaria

American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM

LEMON GROVE

CERTIFIED NURSE PRACTITIONER

ALLEN, KATHERINE L

Provider ID: 419139
Provider Gender: Female
License number: NP95009933
NPI: 1831557024
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA
91945-1604
Phone: (619) 515-2550
Fax:
After Hours Phone: (619) 515-2550
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, T
Hours: M-F 9AM-5PM, SA 9AM-5PM

SMITH, SHARON T

Provider ID: 419139
Provider Gender: Female
License number: NP15444
NPI: 1780603597

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA
91945-1604
Phone: (619) 515-2550
Fax:
After Hours Phone: (619) 515-2550
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, T
Hours: M-F 9AM-5PM, SA 9AM-5PM

SMITH, SHARON T

Provider ID: 419139
Provider Gender: Female
License number: RN428876
NPI: 1780603597
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA
91945-1604
Phone: (619) 515-2550
Fax:
After Hours Phone: (619) 515-2550

Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, T
Hours: M-F 9AM-5PM, SA 9AM-5PM

TOTH, JESSICA R

Provider ID: 419139
Provider Gender: Female
License number: NP95001050
NPI: 1578993788
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA
91945-1604
Phone: (619) 515-2550
Fax:
After Hours Phone: (619) 515-2550
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, T
Hours: M-F 9AM-5PM, SA 9AM-5PM

FAMILY PRACTICE

KIM, YUHEE

Provider ID: 419139
Provider Gender: Female
License number: A107323

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C. Directorio de proveedores de atención primaria

NPI: 1629289400
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Korean
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 7592 BROADWAY
 LEMON GROVE, CA
 91945-1604
 Phone: (619) 515-2550
 Fax:
 After Hours Phone: (619) 515-2550
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: P, EB, IB, E, T
 Hours: M-F 9AM-5PM, SA 9AM-5PM

FQHC

LEMON GROVE FAMILY HEALTH CENTER,
 Provider ID: 419139
 Provider Gender:
 License number: 550001268
 NPI: 1427282466
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 7592 BROADWAY
 LEMON GROVE, CA
 91945-1604

Phone: (619) 515-2550
 Fax: (619) 825-9577
 After Hours Phone: (619) 515-2550
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: P, EB, IB, E, T
 Hours: M-F 9AM-5PM, SA 9AM-5PM

INTERNAL MEDICINE

GALLARES, DANIEL D
 Provider ID: 419139
 Provider Gender: Male
 License number: A165925
 NPI: 1245689488
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 7592 BROADWAY
 LEMON GROVE, CA
 91945-1604
 Phone: (619) 515-2550
 Fax:
 After Hours Phone: (619) 515-2550
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: P, EB, IB, E, T
 Hours: M-F 9AM-5PM, SA 9AM-5PM

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI A
 Provider ID: 419139
 Provider Gender: Female
 License number: 20A14919
 NPI: 1619397031
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 7592 BROADWAY
 LEMON GROVE, CA
 91945-1604
 Phone: (619) 515-2500
 Fax:
 After Hours Phone: (619) 515-2500
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: P, EB, IB, E, T
 Hours: M-F 9AM-5PM, SA 9AM-5PM

BUECHNER, CHARLENE A
 Provider ID: 419139
 Provider Gender: Female
 License number: A68463
 NPI: 1376663831
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp Memorial Hospital, Scripps

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

<p>Mercy Hospital, Scripps Mercy Hospital Chula Vista, Sharp Mary Birch Hosp For Women And Newborns <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 <i>Phone:</i> (619) 515-2550 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2550 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> P, EB, IB, E, T <i>Hours:</i> M-F 9AM-5PM, SA 9AM-5PM</p>	<p>LEMON GROVE, CA 91945-1604 <i>Phone:</i> (619) 515-2550 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2550 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> P, EB, IB, E, T <i>Hours:</i> M-F 9AM-5PM, SA 9AM-5PM</p>	<p>9AM-5PM CERVANTES, SANDRA M <i>Provider ID:</i> 419139 <i>Provider Gender:</i> Female <i>License number:</i> A118095 <i>NPI:</i> 1073701041 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 <i>Phone:</i> (619) 515-2550 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2550 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> P, EB, IB, E, T <i>Hours:</i> M-F 9AM-5PM, SA 9AM-5PM</p>
<p>CAMPBELL, ELIZABETH C <i>Provider ID:</i> 419139 <i>Provider Gender:</i> Female <i>License number:</i> 20A6763 <i>NPI:</i> 1932147329 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Scripps Mercy Hospital, Palomar Medical Center, Palomar Health Downtown Campus, Pomerado Hospital, Rady Childrens Hospital San Diego, Sharp Coronado Hosp And Healthcare Ctr <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY</p>	<p>CARTER, KHALIL J <i>Provider ID:</i> 419139 <i>Provider Gender:</i> Male <i>License number:</i> A113001 <i>NPI:</i> 1225231582 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Grossmont Hospital <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 <i>Phone:</i> (619) 515-2550 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2550 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> P, EB, IB, E, T <i>Hours:</i> M-F 9AM-5PM, SA 9AM-5PM</p>	<p>DE MIK, TRAVIS J <i>Provider ID:</i> 419139 <i>Provider Gender:</i> Male <i>License number:</i> A108228 <i>NPI:</i> 1629277322 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

FAMILY HEALTH CENTERS OF SAN DIEGO

7592 BROADWAY
LEMON GROVE, CA
91945-1604

Phone: (619) 515-2550

Fax:

After Hours Phone: (619)

515-2550

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, T

Hours: M-F 9AM-5PM, SA

9AM-5PM

FOLCH TORRES-AGUIAR, BEATRIZ M

Provider ID: 419139

Provider Gender: Female

License number: A148014

NPI: 1457794752

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Yue Chinese

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital, Scripps Mercy Hospital

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

7592 BROADWAY

LEMON GROVE, CA

91945-1604

Phone: (619) 515-2550

Fax:

After Hours Phone: (619)

515-2550

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, T

Hours: M-F 9AM-5PM, SA

9AM-5PM

LIPSCHITZ, LISA S

Provider ID: 419139

Provider Gender: Female

License number: A72005

NPI: 1649208711

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Sharp

Coronado Hosp And Healthcare

Ctr, Scripps Mercy Hospital,

Grossmont Hospital

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

7592 BROADWAY

LEMON GROVE, CA

91945-1604

Phone: (619) 515-2550

Fax:

After Hours Phone: (619)

515-2550

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, T

Hours: M-F 9AM-5PM, SA

9AM-5PM

LOEFFLER, ALLISON M

Provider ID: 419139

Provider Gender: Female

License number: A116680

NPI: 1700073962

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital, Scripps Mercy Hospital,

Scripps Mercy Hospital Chula

Vista

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

7592 BROADWAY

LEMON GROVE, CA

91945-1604

Phone: (619) 515-2550

Fax:

After Hours Phone: (619)

515-2550

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, T

Hours: M-F 9AM-5PM, SA

9AM-5PM

MELENDEZ BERRIOS, IARA DEL M

Provider ID: 419139

Provider Gender: Female

License number: A114181

NPI: 1740514249

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital, Grossmont Hospital

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

7592 BROADWAY

LEMON GROVE, CA

91945-1604

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C. Directorio de proveedores de atención primaria

Phone: (619) 515-2550

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After Hours Phone: (619)
515-2550

Website:

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Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, T

Hours: M-F 9AM-5PM, SA
9AM-5PM

RODRIGUEZ JEREZ, ROBERTO D

Provider ID: 419139

Provider Gender: Male

License number: A154298

NPI: 1710316450

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Sharp Coronado Hosp
And Healthcare Ctr, Grossmont
Hospital

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

7592 BROADWAY
LEMON GROVE, CA
91945-1604

Phone: (619) 515-2500

Fax:

After Hours Phone: (619)
515-2500

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, T

Hours: M-F 9AM-5PM, SA
9AM-5PM

SAPRA, SONIA V

Provider ID: 419139

Provider Gender: Female

License number: A164859

NPI: 1952751711

Provider English Spoken: Yes

Provider Language(s) Spoken:
Hindi

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

7592 BROADWAY
LEMON GROVE, CA
91945-1604

Phone: (619) 515-2550

Fax:

After Hours Phone: (619)
515-2550

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, T
Hours: M-F 9AM-5PM, SA
9AM-5PM

SINGH, RASHMI

Provider ID: 419139

Provider Gender: Female

License number: A168236

NPI: 1679937619

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

7592 BROADWAY
LEMON GROVE, CA
91945-1604

Phone: (619) 515-2550

Fax:

After Hours Phone: (619)
515-2550

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, T
Hours: M-F 9AM-5PM, SA
9AM-5PM

WINESBURG, JENNIFER J

Provider ID: 419139

Provider Gender: Female

License number: 20A11535

NPI: 1811162456

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Sharp Coronado Hosp
And Healthcare Ctr, Grossmont
Hospital, Desert Regional Med
Ctr

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

7592 BROADWAY
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91945-1604

Phone: (619) 515-2500

Fax:

After Hours Phone: (619)
515-2500

Website:

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C. Directorio de proveedores de atención primaria

Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* P, EB, IB, E, T
Hours: M-F 9AM-5PM, SA
 9AM-5PM

ZIEG, ALAN J

Provider ID: 419139
Provider Gender: Male
License number: G78814
NPI: 1699790634
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
 Hospital, Scripps Mercy Hospital,
 Sharp Coronado Hosp And
 Healthcare Ctr, Scripps Mercy
 Hospital Chula Vista
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 7592 BROADWAY
 LEMON GROVE, CA
 91945-1604
Phone: (619) 515-2500
Fax:
After Hours Phone: (619)
 515-2500
Website:

Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* P, EB, IB, E, T
Hours: M-F 9AM-5PM, SA
 9AM-5PM

PEDIATRICS

SLEIMAN, JOSEPH N

Provider ID: 419139
Provider Gender: Male
License number: A102060
NPI: 1093976748
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Arabic, French, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 7592 BROADWAY
 LEMON GROVE, CA
 91945-1604
Phone: (619) 515-2550
Fax:
After Hours Phone: (619)
 515-2550
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* P, EB, IB, E, T
Hours: M-F 9AM-5PM, SA
 9AM-5PM

PHYSICIANS ASSISTANT

FLEMING, DAVID E

Provider ID: 419139
Provider Gender: Male
License number: PA12416
NPI: 1932329505
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 7592 BROADWAY

LEMON GROVE, CA
 91945-1604
Phone: (619) 515-2550
Fax:
After Hours Phone: (619)
 515-2550
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* P, EB, IB, E, T
Hours: M-F 9AM-5PM, SA
 9AM-5PM

GODDARD, SHANNON

Provider ID: 419139
Provider Gender: Female
License number: PA56072
NPI: 1780961417
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 7592 BROADWAY
 LEMON GROVE, CA
 91945-1604
Phone: (619) 515-2550
Fax:

After Hours Phone: (619)
 515-2550
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* P, EB, IB, E, T
Hours: M-F 9AM-5PM, SA
 9AM-5PM

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C. Directorio de proveedores de atención primaria

NATIONAL CITY

CERTIFIED NURSE PRACTITIONER

AQUINO, FELINO V

Provider ID: 417102
Provider Gender: Male
License number: NP22974
NPI: 1356684781
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Tagalog
Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
 OPERATION SAMAHAN
 2743 HIGHLAND AVE
 NATIONAL CITY, CA
 91950-7410
Phone: (844) 200-2426
Fax:
After Hours Phone: (844)
 200-2426
Website:
 www.operationsamahan.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility: W
Hours: M-TH 8AM-6PM, F
 8AM-5PM, SA 9AM-5PM

AQUINO, FELINO V

Provider ID: 418302
Provider Gender: Male
License number: NP22974
NPI: 1356684781
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Tagalog
Cultural Competency: No

Hospital Affiliation:
 Board Certified Specialty: No
 OPERATION SAMAHAN
 2101 GRANGER AVE
 NATIONAL CITY, CA
 91950-6208
Phone: (844) 200-2426
Fax:
After Hours Phone: (844)
 200-2426
Website:
 www.operationsamahan.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility:
Hours: M-F 8AM-5PM, SA
 9AM-5PM

DACANAY-HERMAN, ROWENA S

Provider ID: 417102
Provider Gender: Female
License number: NP22378
NPI: 1144689175
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Tagalog
Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
 OPERATION SAMAHAN
 2743 HIGHLAND AVE
 NATIONAL CITY, CA
 91950-7410
Phone: (844) 200-2426
Fax:
After Hours Phone: (844)
 200-2426
Website:
 www.operationsamahan.org
Email:
Medi-Cal Open Panel: Yes

Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility: W
Hours: M-TH 8AM-6PM, F
 8AM-5PM, SA 9AM-5PM

DACANAY-HERMAN, ROWENA S

Provider ID: 418302
Provider Gender: Female
License number: NP22378
NPI: 1144689175
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Tagalog
Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
 OPERATION SAMAHAN
 2101 GRANGER AVE
 NATIONAL CITY, CA
 91950-6208
Phone: (844) 200-2426
Fax:
After Hours Phone: (844)
 200-2426
Website:
 www.operationsamahan.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility:
Hours: M-F 8AM-5PM, SA
 9AM-5PM

DHARKAR SURBER, SAPNA A

Provider ID: 185270
Provider Gender: Female
License number: NP95013257
NPI: 1538707765
Provider English Spoken: Yes
Provider Language(s) Spoken:

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C. Directorio de proveedores de atención primaria

Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518
Phone: (619) 434-7308
Fax: (619) 434-7310
After Hours Phone: (619)
434-7308
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: P, EB, IB, E, R,
W
Hours: M-W,F,SA 9AM-5PM, TH
8AM-2PM

LIM, IMELDA B

Provider ID: 417102
Provider Gender: Female
License number: NP95000203
NPI: 1093130395
Provider English Spoken: Yes
Provider Language(s) Spoken:
Tagalog
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
OPERATION SAMAHAN
2743 HIGHLAND AVE
NATIONAL CITY, CA
91950-7410
Phone: (844) 200-2426
Fax:
After Hours Phone: (844)
200-2426
Website:
www.operationsamahan.org
Email:
Medi-Cal Open Panel: Yes

Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-TH 8AM-6PM, F
8AM-5PM, SA 9AM-5PM

LIM, IMELDA B

Provider ID: 418302
Provider Gender: Female
License number: NP95000203
NPI: 1093130395
Provider English Spoken: Yes
Provider Language(s) Spoken:
Tagalog
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
OPERATION SAMAHAN
2101 GRANGER AVE
NATIONAL CITY, CA
91950-6208
Phone: (844) 200-2426
Fax:
After Hours Phone: (844)
200-2426
Website:
www.operationsamahan.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-F 8AM-5PM, SA
9AM-5PM

LUM, YUIN-WAH

Provider ID: 418930
Provider Gender: Female
License number: NP95010663
NPI: 1942764477
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
1000 EUCLID AVE
NATIONAL CITY, CA
91950-3856
Phone: (619) 515-2399
Fax:
After Hours Phone: (619)
515-2399
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M,W,F 8:30AM-3:30PM,
TU,TH 10:30AM-5:30PM, SA
9AM-5PM

MACARIOLA, AMPARO E

Provider ID: 417102
Provider Gender: Female
License number: NP95001709
NPI: 1932505401
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
OPERATION SAMAHAN
2743 HIGHLAND AVE
NATIONAL CITY, CA
91950-7410
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After Hours Phone: (844)
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www.operationsamahan.org
Email:
Medi-Cal Open Panel: Yes

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C. Directorio de proveedores de atención primaria

Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-TH 8AM-6PM, F
8AM-5PM, SA 9AM-5PM

MILTON, JILL F

Provider ID: 185270
Provider Gender: Female
License number: NP13612
NPI: 1598757270
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518
Phone: (619) 434-7308

Fax:
After Hours Phone: (619)
434-7308
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: P, EB, IB, E, R,
W
Hours: M-W,F,SA 9AM-5PM, TH
8AM-2PM

NEVAREZ, IRENE

Provider ID: 185270
Provider Gender: Female
License number: NP95009891
NPI: 1003166646
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish

Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518
Phone: (619) 564-8765
Fax:
After Hours Phone: (619)
564-8765
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: P, EB, IB, E, R,
W
Hours: M-W,F,SA 9AM-5PM, TH
8AM-2PM

OCHOA, ERLINDA A

Provider ID: 185270
Provider Gender: Female
License number: NP4430
NPI: 1346437464
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC
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After Hours Phone: (619)
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Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes

Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: P, EB, IB, E, R,
W
Hours: M-W,F,SA 9AM-5PM, TH
8AM-2PM

REAL, MARIA F

Provider ID: 185270
Provider Gender: Female
License number: NP17328
NPI: 1548450471
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518
Phone: (619) 434-7308

Fax:
After Hours Phone: (619)
434-7308
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: P, EB, IB, E, R,
W
Hours: M-W,F,SA 9AM-5PM, TH
8AM-2PM

REID, EMILY

Provider ID: 185270
Provider Gender: Female
License number: NP95002766
NPI: 1083081467
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Hospital Affiliation:
Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 217 HIGHLAND AVE
 NATIONAL CITY, CA
 91950-1518
Phone: (619) 434-7308
Fax:
After Hours Phone: (619)
 434-7308
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:* P, EB, IB, E, R,
 W
Hours: M-W,F,SA 9AM-5PM, TH
 8AM-2PM

VERDUZCO GONZALEZ, AURORA B

Provider ID: 185270
Provider Gender: Female
License number: NP95001961
NPI: 1932452323
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 217 HIGHLAND AVE
 NATIONAL CITY, CA
 91950-1518
Phone: (619) 434-7308
Fax:
After Hours Phone: (619)
 434-7308
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None

American Sign Language (ASL):
 No
 ♿ *Accessibility:* P, EB, IB, E, R,
 W
Hours: M-W,F,SA 9AM-5PM, TH
 8AM-2PM

VILLANUEVA DE GUTIE, BERENICE

Provider ID: 185270
Provider Gender: Female
License number: NP95002188
NPI: 1952795536
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 217 HIGHLAND AVE
 NATIONAL CITY, CA
 91950-1518
Phone: (619) 434-7308
Fax:
After Hours Phone: (619)
 434-7308
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:* P, EB, IB, E, R,
 W
Hours: M-W,F,SA 9AM-5PM, TH
 8AM-2PM

Provider ID: 185270
Provider Gender: Female
License number: NP95001961
NPI: 1932452323
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 217 HIGHLAND AVE
 NATIONAL CITY, CA
 91950-1518
Phone: (619) 434-7308
Fax:
After Hours Phone: (619)
 434-7308
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:* P, EB, IB, E, R,
 W
Hours: M-W,F,SA 9AM-5PM, TH
 8AM-2PM

WILLIAMS, BREAHA A

Provider ID: 185270
Provider Gender: Female
License number: NP95001840
NPI: 1063884864
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish

Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 217 HIGHLAND AVE
 NATIONAL CITY, CA
 91950-1518
Phone: (619) 434-7308
Fax:
After Hours Phone: (619)
 434-7308
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:* P, EB, IB, E, R,
 W
Hours: M-W,F,SA 9AM-5PM, TH
 8AM-2PM

FAMILY PRACTICE

ALGHAMDI, ASMA M

Provider ID: 227418
Provider Gender: Female
License number: A167529
NPI: 1316310840
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 2400 E 8TH ST STE A
 NATIONAL CITY, CA
 91950-2956
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
 662-4100
Website: www.ihpsocal.org
Email:

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C. Directorio de proveedores de atención primaria

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

♿ Accessibility: P, EB, IB, E, R, T, W

Hours: M-F 8AM-5PM, SA 9AM-5PM

BAEZ, BEATRICE E

Provider ID: 417102

Provider Gender: Female

License number: A74777

NPI: 1245372507

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

OPERATION SAMAHAN

2743 HIGHLAND AVE

NATIONAL CITY, CA

91950-7410

Phone: (844) 200-2426

Fax:

After Hours Phone: (844)

200-2426

Website:

www.operationsamahan.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

No

♿ Accessibility: W

Hours: M-TH 8AM-6PM, F

8AM-5PM, SA 9AM-5PM

BAEZ, BEATRICE E , MD

Provider ID: 455677

Provider Gender: Female

License number: A74777

NPI: 1245372507

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

2743 HIGHLAND AVE

NATIONAL CITY, CA

91950-7410

Phone: (844) 200-2426

Fax:

After Hours Phone: (844)

200-2426

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

CAMPBELL, BRIANNA N

Provider ID: 227418

Provider Gender: Female

License number: A157488

NPI: 1316479892

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH

CENTER

2400 E 8TH ST STE A

NATIONAL CITY, CA

91950-2956

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, R, T, W

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

9AM-5PM

CARRIEDO CENICEROS, MARIA T

Provider ID: 227412

Provider Gender: Female

License number: A78373

NPI: 1295746618

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH

CENTER

1136 D AVE

NATIONAL CITY, CA

91950-3412

Phone: (619) 336-2300

Fax:

After Hours Phone: (619)

336-2300

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

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

9AM-5PM

CEVALLOS, JAMES E

Provider ID: 227412

Provider Gender: Male

License number: A55469

NPI: 1720181829

Provider English Spoken: Yes

Provider Language(s) Spoken:

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C. Directorio de proveedores de atención primaria

Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 1136 D AVE
 NATIONAL CITY, CA
 91950-3412
Phone: (619) 662-4100
Fax: (619) 474-3722
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM

DAMASCO GUTIERREZ, DAISY C

Provider ID: 418302
Provider Gender: Female
License number: A66993
NPI: 1700841582
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Memorial Hospital
Board Certified Specialty: No
 OPERATION SAMAHAN
 2101 GRANGER AVE
 NATIONAL CITY, CA
 91950-6208
Phone: (844) 200-2426
Fax:
After Hours Phone: (844) 200-2426

Website:
 www.operationsamahan.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-F 8AM-5PM, SA 9AM-5PM

DANGREMOND, ADRIANNA J

Provider ID: 418930
Provider Gender: Female
License number: G138260
NPI: 1508802828
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO

1000 EUCLID AVE
 NATIONAL CITY, CA
 91950-3856
Phone: (619) 515-2399
Fax:
After Hours Phone: (619) 515-2399
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M,W,F 8:30AM-3:30PM, TU,TH 10:30AM-5:30PM, SA 9AM-5PM

DILLON, MAYRA M

Provider ID: 227412
Provider Gender: Female

License number: A112571
NPI: 1629232715
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 1136 D AVE
 NATIONAL CITY, CA
 91950-3412
Phone: (619) 662-4100
Fax: (619) 336-2323
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM

HERNANDEZ, JOANNA L

Provider ID: 227412
Provider Gender: Female
License number: A138919
NPI: 1154749315
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 1136 D AVE
 NATIONAL CITY, CA
 91950-3412

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C. Directorio de proveedores de atención primaria

Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619) 662-4100
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM

HOLTZMAN, AURY L

Provider ID: 418302
 Provider Gender: Male
 License number: A43970
 NPI: 1548462567
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 OPERATION SAMAHAN
 2101 GRANGER AVE
 NATIONAL CITY, CA
 91950-6208
 Phone: (844) 200-2624
 Fax:
 After Hours Phone: (844) 200-2624
 Website:
 www.operationsamahan.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-F 8AM-5PM, SA 9AM-5PM

KUNIN-RIDA, TERI L

Provider ID: 283854

Provider Gender: Female
 License number: G80071
 NPI: 1265580112
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Arabic, Armenian, Spanish
 Cultural Competency: No
 Hospital Affiliation: Alvarado Hosp Med Ctr, Sharp Mary Birch Hosp For Women And Newborns, Sharp Memorial Hospital, Alvarado Hospital Llc
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 217 HIGHLAND AVE
 NATIONAL CITY, CA
 91950-1518
 Phone: (619) 434-7308
 Fax: (619) 434-7310
 After Hours Phone: (619) 434-7308
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM

LANUZA, MARK J

Provider ID: 418930
 Provider Gender: Male
 License number: 20A18460
 NPI: 1992230593
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1000 EUCLID AVE
 NATIONAL CITY, CA
 91950-3856

Phone: (619) 515-2399
 Fax:
 After Hours Phone: (619) 515-2399
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M,W,F 8:30AM-3:30PM, TU,TH 10:30AM-5:30PM, SA 9AM-5PM

LAW, KAREN

Provider ID: 227418
 Provider Gender: Female
 License number: A138534
 NPI: 1205253150
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 2400 E 8TH ST STE A
 NATIONAL CITY, CA
 91950-2956
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619) 662-4100
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: P, EB, IB, E, R, T, W
 Hours: M-F 8AM-5PM, SA 9AM-5PM

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C. Directorio de proveedores de atención primaria

<p>MCKENNETT, MARIANNE A , MD <i>Provider ID:</i> 447682 <i>Provider Gender:</i> Female <i>License number:</i> G57243 <i>NPI:</i> 1376639666 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 2835 HIGHLAND AVE STE B NATIONAL CITY, CA 91950-7406 <i>Phone:</i> (844) 200-2426 <i>Fax:</i> (619) 477-2628 <i>After Hours Phone:</i> (844) 200-2426 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM</p>	<p>330 E 8TH ST NATIONAL CITY, CA 91950-2312 <i>Phone:</i> (619) 662-4100 <i>Fax:</i> <i>After Hours Phone:</i> (619) 662-4100 <i>Website:</i> www.ihpsocal.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM</p>	<p><i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM</p> <p>NAVARRO, VANESSA M <i>Provider ID:</i> 227418 <i>Provider Gender:</i> Female <i>License number:</i> A113624 <i>NPI:</i> 1952563421 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Tagalog <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital Chula Vista <i>Board Certified Specialty:</i> No IHP-SAN YSIDRO HEALTH CENTER 2400 E 8TH ST STE A NATIONAL CITY, CA 91950-2956 <i>Phone:</i> (619) 662-4100 <i>Fax:</i> (619) 259-2807 <i>After Hours Phone:</i> (619) 662-4100 <i>Website:</i> www.ihpsocal.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> P, EB, IB, E, R, T, W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM</p>
<p>MEDINA, ALEXANDER R <i>Provider ID:</i> 361428 <i>Provider Gender:</i> Male <i>License number:</i> A133539 <i>NPI:</i> 1467714436 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No IHP-SAN YSIDRO HEALTH CENTER</p>	<p>MOHAMEDI, NADIA A <i>Provider ID:</i> 227418 <i>Provider Gender:</i> Female <i>License number:</i> A146819 <i>NPI:</i> 1477947364 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No IHP-SAN YSIDRO HEALTH CENTER 2400 E 8TH ST STE A NATIONAL CITY, CA 91950-2956 <i>Phone:</i> (619) 662-4100 <i>Fax:</i> <i>After Hours Phone:</i> (619) 662-4100 <i>Website:</i> www.ihpsocal.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> P, EB, IB, E, R, T, W</p>	<p>NIKZAD, JASON <i>Provider ID:</i> 361428 <i>Provider Gender:</i> Male <i>License number:</i> 20A12653 <i>NPI:</i> 1508121674 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i></p>

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C. Directorio de proveedores de atención primaria

Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 330 E 8TH ST
 NATIONAL CITY, CA
 91950-2312
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 No
 ♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM

OCEGUEDA, JOSHUA A
Provider ID: 227412
Provider Gender: Male
License number: A165184
NPI: 1336643345
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 1136 D AVE
 NATIONAL CITY, CA
 91950-3412
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):

No
 ♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM

PALACIOS, YELENNIA
Provider ID: 503938
Provider Gender: Female
License number: A152662
NPI: 1285088013
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 2835 HIGHLAND AVE STE A
 NATIONAL CITY, CA
 91950-7406
Phone: (619) 474-4451
Fax:
After Hours Phone: (619) 474-4451
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM

ROBERTS, POMAI
Provider ID: 227412
Provider Gender: Female
License number: A103218
NPI: 1023278314
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH CENTER
 1136 D AVE
 NATIONAL CITY, CA
 91950-3412
Phone: (619) 428-4463
Fax:
After Hours Phone: (619) 428-4463
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 No
 ♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM

SAZEGAR, PAYAM P
Provider ID: 542803
Provider Gender: Male
License number: A122685
NPI: 1750623716
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 217 HIGHLAND AVE
 NATIONAL CITY, CA
 91950-1518
Phone: (619) 434-7308
Fax: (619) 434-7310
After Hours Phone: (619) 434-7308
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM

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C. Directorio de proveedores de atención primaria

<p>SERPAS, SHAILA, MD <i>Provider ID:</i> 449099 <i>Provider Gender:</i> Female <i>License number:</i> G74728 <i>NPI:</i> 1124039136 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 2835 HIGHLAND AVE NATIONAL CITY, CA 91950-7404 <i>Phone:</i> (844) 800-2426 <i>Fax:</i> <i>After Hours Phone:</i> (844) 800-2426 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM</p>	<p>2340 E 8TH ST STE D NATIONAL CITY, CA 91950-2875 <i>Phone:</i> (619) 470-7007 <i>Fax:</i> (619) 470-9379 <i>After Hours Phone:</i> (619) 470-7007 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM</p> <p>SNOOK, BRIAN P <i>Provider ID:</i> 227418 <i>Provider Gender:</i> Male <i>License number:</i> 20A11518 <i>NPI:</i> 1295977353 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No IHP-SAN YSIDRO HEALTH CENTER 2400 E 8TH ST STE A NATIONAL CITY, CA 91950-2956 <i>Phone:</i> (619) 662-4100 <i>Fax:</i> (619) 259-2806 <i>After Hours Phone:</i> (619) 662-4100 <i>Website:</i> www.ihpsocal.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> P, EB, IB, E, R, T, W <i>Hours:</i> M-F 8AM-5PM, SA</p>	<p>9AM-5PM</p> <p>TRIMOR-TAMORIA, MARIA FLORA G <i>Provider ID:</i> 107382 <i>Provider Gender:</i> Female <i>License number:</i> A55589 <i>NPI:</i> 1538263108 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Tagalog <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Paradise Valley Hospital <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 2240 E PLAZA BLVD STE A NATIONAL CITY, CA 91950-5165 <i>Phone:</i> (619) 267-5884 <i>Fax:</i> (619) 267-6073 <i>After Hours Phone:</i> (619) 267-5884 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 21/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM</p>
<p>SEVILLA, MARIANITO D , MD <i>Provider ID:</i> 80910 <i>Provider Gender:</i> Male <i>License number:</i> A37097 <i>NPI:</i> 1760574727 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Tagalog <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr, Paradise Valley Hospital <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC</p>	<p>TRIMOR-TAMORIA, MARIA FLORA G , MD <i>Provider ID:</i> 107382 <i>Provider Gender:</i> Female <i>License number:</i> A55589 <i>NPI:</i> 1538263108 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Tagalog <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Paradise Valley Hospital <i>Board Certified Specialty:</i> No</p>	<p>TRIMOR-TAMORIA, MARIA FLORA G , MD <i>Provider ID:</i> 107382 <i>Provider Gender:</i> Female <i>License number:</i> A55589 <i>NPI:</i> 1538263108 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Tagalog <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Paradise Valley Hospital <i>Board Certified Specialty:</i> No</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

COMMUNITY CARE IPA LLC
2240 E PLAZA BLVD STE A
NATIONAL CITY, CA
91950-5165

Phone: (619) 267-5884

Fax: (619) 267-6073

After Hours Phone: (619)
267-5884

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 21/999

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

TRIMOR-TAMORIA, MARIA FLORA G

Provider ID: 521081

Provider Gender: Female

License number: A55589

NPI: 1538263108

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Tagalog

Cultural Competency: No

Hospital Affiliation: Paradise
Valley Hospital

Board Certified Specialty: No
HEALTH EXCEL IPA INC

502 EUCLID AVE STE 103
NATIONAL CITY, CA

91950-2982

Phone: (619) 267-5884

Fax: (619) 267-6073

After Hours Phone: (619)
267-5884

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

VELASQUEZ, SHARON F

Provider ID: 227418

Provider Gender: Female

License number: A71304

NPI: 1972732584

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital Chula Vista

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH
CENTER

2400 E 8TH ST STE A
NATIONAL CITY, CA

91950-2956

Phone: (619) 662-4100

Fax: (619) 259-2807

After Hours Phone: (619)
662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,
T, W

Hours: M-F 8AM-5PM, SA
9AM-5PM

FQHC

FAMILY HEALTH CTR SD NATIONAL CITY,

Provider ID: 418930

Provider Gender:

License number: 550000465

NPI: 1417409228

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty:
FAMILY HEALTH CENTERS OF
SAN DIEGO

1000 EUCLID AVE
NATIONAL CITY, CA
91950-3856

Phone: (619) 515-2399

Fax: (619) 269-0053

After Hours Phone: (619)
515-2399

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M,W,F 8:30AM-3:30PM,
TU,TH 10:30AM-5:30PM, SA
9AM-5PM

LA MAESTRA FAMILY CLINIC INC,

Provider ID: 185270

Provider Gender:

License number:

NPI: 1053526756

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty:
LA MAESTRA FAMILY CLINIC

217 HIGHLAND AVE
NATIONAL CITY, CA

91950-1518

Phone: (619) 434-7308

Fax: (619) 434-7310

After Hours Phone: (619)
434-7308

Website: www.lamaestra.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

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C. Directorio de proveedores de atención primaria

American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, W
Hours: M-W,F,SA 9AM-5PM, TH 8AM-2PM

LA MAESTRA FAMILY CLINIC INC,

Provider ID: 185270
Provider Gender:
License number:
NPI: 1336353721
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
LA MAESTRA FAMILY CLINIC
 217 HIGHLAND AVE
 NATIONAL CITY, CA
 91950-1518
Phone: (619) 434-7308
Fax: (619) 434-7310
After Hours Phone: (619) 434-7308
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, W
Hours: M-W,F,SA 9AM-5PM, TH 8AM-2PM

OPERATION SAMAHAN - NATIONAL C,

Provider ID: 417102
Provider Gender:
License number: 090000183
NPI: 1801907449
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
OPERATION SAMAHAN
 2743 HIGHLAND AVE
 NATIONAL CITY, CA
 91950-7410
Phone: (844) 200-2426
Fax: (619) 474-3919
After Hours Phone: (844) 200-2426
Website:
 www.operationsamahan.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-TH 8AM-6PM, F 8AM-5PM, SA 9AM-5PM

OPERATION SAMAHAN GRANGER SCHOOL BASED,

Provider ID: 418302
Provider Gender:
License number: 550002622
NPI: 1205134517
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
OPERATION SAMAHAN
 2101 GRANGER AVE
 NATIONAL CITY, CA
 91950-6208
Phone: (844) 200-2426
Fax: (619) 434-8999
After Hours Phone: (844) 200-2426
Website:
 www.operationsamahan.org
Email:
Medi-Cal Open Panel: Yes

Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-F 8AM-5PM, SA 9AM-5PM

SAN YSIDRO HEALTH NATIONAL CITY,

Provider ID: 227412
Provider Gender:
License number:
NPI: 1003869363
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
IHP-SAN YSIDRO HEALTH CENTER
 1136 D AVE
 NATIONAL CITY, CA
 91950-3412

Phone: (619) 662-4100
Fax: (619) 336-2323
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM

SAN YSIDRO HEALTH PARADISE HILLS,

Provider ID: 227418
Provider Gender:
License number:
NPI: 1598907487
Provider English Spoken: Yes
Provider Language(s) Spoken:

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C. Directorio de proveedores de atención primaria

Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
 IHP-SAN YSIDRO HEALTH CENTER
 2400 E 8TH ST STE A
 NATIONAL CITY, CA
 91950-2956

Phone: (619) 662-4100

Fax: (619) 259-2807

After Hours Phone: (619) 662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

Accessibility: P, EB, IB, E, R, T, W

Hours: M-F 8AM-5PM, SA 9AM-5PM

SAN YSIDRO HEALTH SOUTH BAY,

Provider ID: 361428

Provider Gender:

License number:

NPI: 1851757215

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty:

IHP-SAN YSIDRO HEALTH CENTER

330 E 8TH ST

NATIONAL CITY, CA

91950-2312

Phone: (619) 662-4100

Fax: (619) 259-2807

After Hours Phone: (619)

662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

Accessibility: W

Hours: M-F 8AM-5PM, SA 9AM-5PM

HEPATOLOGY

GISH, ROBERT G

Provider ID: 185270

Provider Gender: Male

License number: G45632

NPI: 1548281322

Provider English Spoken: Yes

Provider Language(s) Spoken:

Dutch, French, Spanish, Vietnamese

Cultural Competency: No

Hospital Affiliation: Providence Santa Rosa Memorial Hospital, Ucsd Medical Ctr, Stanford

Health Care, California Pacific

Med Ctr, Selma Community

Hospital, Adventist Medical

Center, Adventist Med Ctr

Reedley, Loma Linda University

Comm Med Ctr, Regional

Medical Ctr Of San Jose

Board Certified Specialty: No

LA MAESTRA FAMILY CLINIC

217 HIGHLAND AVE

NATIONAL CITY, CA

91950-1518

Phone: (619) 434-7308

Fax:

After Hours Phone: (619)

434-7308

Website: www.lamaestra.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: P, EB, IB, E, R, W

Hours: M-W,F,SA 9AM-5PM, TH 8AM-2PM

INTERNAL MEDICINE

ALTAVAS, VALERIE C , MD

Provider ID: 57963

Provider Gender: Female

License number: C52243

NPI: 1245231174

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Tagalog

Cultural Competency: No

Hospital Affiliation: Paradise Valley Hospital

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

655 EUCLID AVE STE 209

NATIONAL CITY, CA

91950-2970

Phone: (619) 470-7000

Fax: (619) 470-7009

After Hours Phone: (619)

470-7000

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility: W

Hours: M-SA 9AM-5PM

BAUTISTA, ARWINNAH

Provider ID: 383973

Provider Gender: Female

License number: C51221

NPI: 1073579173

Provider English Spoken: Yes

Provider Language(s) Spoken:

Tagalog

Cultural Competency: No

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C. Directorio de proveedores de atención primaria

Hospital Affiliation: Alvarado Hospital Llc, Paradise Valley Hospital, Sharp Memorial Hospital
Board Certified Specialty: No
HEALTH EXCEL IPA INC
1430 E PLAZA BLVD STE E19A
NATIONAL CITY, CA
91950-3690
Phone: (619) 434-2813
Fax: (855) 631-3720
After Hours Phone: (619) 434-2813
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM

BAUTISTA, ARWINNAH

Provider ID: 383973
Provider Gender: Female
License number: C51221
NPI: 1073579173
Provider English Spoken: Yes
Provider Language(s) Spoken: Tagalog
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc, Paradise Valley Hospital, Sharp Memorial Hospital
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
1430 E PLAZA BLVD STE E19A
NATIONAL CITY, CA
91950-3690
Phone: (619) 434-2813
Fax: (855) 631-3720
After Hours Phone: (619) 434-2813

Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM

BRAVERMAN, IRA R

Provider ID: 10635
Provider Gender: Male
License number: A37912
NPI: 1124039755
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital
Board Certified Specialty: Yes
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
610 EUCLID AVE STE 201
NATIONAL CITY, CA
91950-2952
Phone: (619) 267-8181
Fax: (619) 479-6750
After Hours Phone: (619) 267-8181
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM

CANTU-REYNA, GUILLERMO A

Provider ID: 525563
Provider Gender: Male
License number: A41375
NPI: 1447389101

Provider English Spoken: Yes
Provider Language(s) Spoken: Korean, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr
Board Certified Specialty: No
HEALTH EXCEL IPA INC
217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518
Phone: (619) 434-7308
Fax: (619) 434-7310
After Hours Phone: (619) 434-7308
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM

HEKMAT, RAZI D

Provider ID: 78388
Provider Gender: Male
License number: A75886
NPI: 1871501205
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
610 EUCLID AVE STE 201
NATIONAL CITY, CA
91950-2952
Phone: (619) 267-8181
Fax: (619) 479-6750
After Hours Phone: (619) 267-8181
Website:

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM

LAMANTIA, MICHELE A

Provider ID: 227412
Provider Gender: Female
License number: G71855
NPI: 1124176102
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER
1136 D AVE
NATIONAL CITY, CA
91950-3412

Phone: (619) 428-4463

Fax:

After Hours Phone: (619)
428-4463

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA
9AM-5PM

LAMANTIA, MICHELE A

Provider ID: 361428
Provider Gender: Female
License number: G71855
NPI: 1124176102
Provider English Spoken: Yes
Provider Language(s) Spoken:

Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER
330 E 8TH ST
NATIONAL CITY, CA
91950-2312
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM

NIGUIDULA, TROY H

Provider ID: 413964
Provider Gender: Male
License number: A92543
NPI: 1215948849
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Paradise
Valley Hospital
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
610 EUCLID AVE
NATIONAL CITY, CA
91950-2951
Phone: (619) 267-8181
Fax: (619) 479-6750
After Hours Phone: (619)
267-8181
Website:

Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

SACAMAY, ELENA MARIA B , MD

Provider ID: 109971
Provider Gender: Female
License number: A63422
NPI: 1992777882
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital Chula Vista
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
655 EUCLID AVE STE 209
NATIONAL CITY, CA
91950-2970
Phone: (619) 470-7000
Fax: (619) 470-7009
After Hours Phone: (619)
470-7000
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

TIANGCO, IRINEO D

Provider ID: 103444
Provider Gender: Male
License number: A52655
NPI: 1245322213
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital, Sharp Chula Vista Med Ctr
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 2340 E 8TH ST STE J
 NATIONAL CITY, CA
 91950-2876
Phone: (619) 479-0320
Fax: (619) 479-0367
After Hours Phone: (619) 479-0320
Website:

Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM

TIU, GRISELDA E

Provider ID: 227418
Provider Gender: Female
License number: A49565
NPI: 1619088440
Provider English Spoken: Yes
Provider Language(s) Spoken: Tagalog
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital, Sharp Chula Vista Med Ctr, Scripps Memorial Hospital Encinitas
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
 2400 E 8TH ST STE A
 NATIONAL CITY, CA
 91950-2956

Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* P, EB, IB, E, R, T, W
Hours: M-F 8AM-5PM, SA 9AM-5PM

OBSTETRICS / GYNECOLOGY

ASLIAN, AZITA

Provider ID: 227418
Provider Gender: Female
License number: A118227
NPI: 1851667661
Provider English Spoken: Yes
Provider Language(s) Spoken: Fataleka
Cultural Competency: No
Hospital Affiliation: Hemet Global Medical Center, Meniffee Global Medical Center, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
 2400 E 8TH ST STE A
 NATIONAL CITY, CA
 91950-2956
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None

American Sign Language (ASL): No
 ☯ *Accessibility:* P, EB, IB, E, R, T, W
Hours: M-F 8AM-5PM, SA 9AM-5PM

FAKSH, ARIJ

Provider ID: 185270
Provider Gender: Female
License number: 20A14222
NPI: 1912166737
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Tri City Medical Ctr, Scripps Mercy Hospital, Scripps Green Hospital, Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC
 217 HIGHLAND AVE
 NATIONAL CITY, CA
 91950-1518
Phone: (619) 434-7308
Fax:
After Hours Phone: (619) 434-7308
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* P, EB, IB, E, R, W
Hours: M-W,F,SA 9AM-5PM, TH 8AM-2PM

PEDIATRICS

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

ABRAMSON, RACHEL A

Provider ID: 556681
Provider Gender: Female
License number: A104918
NPI: 1588707178
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Board Certified Specialty: No
HEALTH EXCEL IPA INC
 217 HIGHLAND AVE
 NATIONAL CITY, CA
 91950-1518
Phone: (619) 434-7308
Fax: (619) 434-7310
After Hours Phone: (619) 434-7308
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☒ *Accessibility:*
Hours: M-SA 9AM-5PM

ASSER, SETH M

Provider ID: 227412
Provider Gender: Male
License number: G46444
NPI: 1205049038
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
 1136 D AVE

NATIONAL CITY, CA
 91950-3412
Phone: (619) 662-4100
Fax: (619) 474-3722
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☒ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM

BAILONY, AHMAD L

Provider ID: 146949
Provider Gender: Male
License number: A108665
NPI: 1790914422
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Mary Birch Hosp For Women And Newborns, Paradise Valley Hospital, Sharp Chula Vista Med Ctr, Sharp Memorial Hospital
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 655 EUCLID AVE STE 205
 NATIONAL CITY, CA
 91950-2967
Phone: (619) 470-1945
Fax: (619) 475-5048
After Hours Phone: (619) 470-1945
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☒ *Accessibility:* W
Hours: M-SA 9AM-5PM

No
 ☒ *Accessibility:* W
Hours: M-SA 9AM-5PM

BAILONY, MOHAMMED T

Provider ID: 30132
Provider Gender: Male
License number: A34406
NPI: 1376625913
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Mary Birch Hosp For Women And Newborns, Paradise Valley Hospital, Sharp Chula Vista Med Ctr, Rady Childrens Hospital San Diego, Scripps Mercy Hospital Chula Vista
Board Certified Specialty: Yes
RADY CHILDRENS HEALTH NETWORK
 655 EUCLID AVE STE 205
 NATIONAL CITY, CA
 91950-2967
Phone: (619) 470-1945
Fax: (619) 475-5048
After Hours Phone: (619) 470-1945
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☒ *Accessibility:* W
Hours: M-SA 9AM-5PM

BARBADILLO, TERESITA T

Provider ID: 84258
Provider Gender: Female
License number: A38742
NPI: 1952416695
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 655 EUCLID AVE STE 201
 NATIONAL CITY, CA
 91950-2966
Phone: (619) 267-8601
Fax: (619) 267-2242
After Hours Phone: (619) 267-8601
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☒ *Accessibility:* P, EB, IB, E, R, W
Hours: M-SA 9AM-5PM

BARBADILLO, TERESITA T
Provider ID: 84258
Provider Gender: Female
License number: A38742
NPI: 1952416695
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital
Board Certified Specialty: No
HEALTH EXCEL IPA INC
 655 EUCLID AVE STE 201
 NATIONAL CITY, CA
 91950-2966
Phone: (619) 267-8601
Fax: (619) 267-2242
After Hours Phone: (619) 267-8601
Website:

Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/21
American Sign Language (ASL): No
 ☒ *Accessibility:* P, EB, IB, E, R, W
Hours: M-SA 9AM-5PM

BONSU, BEMA K
Provider ID: 227412
Provider Gender: Male
License number: C55180
NPI: 1932106986
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
 1136 D AVE
 NATIONAL CITY, CA
 91950-3412
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☒ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM

CONE, STEPHANIE E
Provider ID: 185270
Provider Gender: Female
License number: A123929

NPI: 1437444858
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Rady Childrens Hospital San Diego
Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC
 217 HIGHLAND AVE
 NATIONAL CITY, CA
 91950-1518
Phone: (619) 434-7308
Fax:
After Hours Phone: (619) 434-7308
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☒ *Accessibility:* P, EB, IB, E, R, W
Hours: M-W,F,SA 9AM-5PM, TH 8AM-2PM

FRESNO, BLANCA I
Provider ID: 102433
Provider Gender: Female
License number: A45205
NPI: 1346258787
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital, Sharp Chula Vista Med Ctr
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 655 EUCLID AVE STE 207

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

NATIONAL CITY, CA

91950-2968

Phone: (619) 475-4575

Fax: (619) 475-4578

After Hours Phone: (619)

475-4575

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

GARCIA, RAFAEL A

Provider ID: 84954

Provider Gender: Male

License number: A50715

NPI: 1053414086

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Tagalog

Cultural Competency: No

Hospital Affiliation: Sharp Chula

Vista Med Ctr, Rady Childrens

Hospital San Diego

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

610 EUCLID AVE STE 302

NATIONAL CITY, CA

91950-2953

Phone: (619) 527-7700

Fax: (619) 527-3226

After Hours Phone: (619)

527-7700

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

HIPOLITO, CECILIA L

Provider ID: 418930

Provider Gender: Female

License number: A145850

NPI: 1770999773

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

1000 EUCLID AVE

NATIONAL CITY, CA

91950-3856

Phone: (619) 515-2399

Fax:

After Hours Phone: (619)

515-2399

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M,W,F 8:30AM-3:30PM,

TU,TH 10:30AM-5:30PM, SA

9AM-5PM

MANRIQUEZ-CASTILLO, ERENDIRA

Provider ID: 473848

Provider Gender: Female

License number: A75533

NPI: 1356397418

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Valley

Childrens Hospital, Rady

Childrens Hospital San Diego

Board Certified Specialty: No

HEALTH EXCEL IPA INC

217 HIGHLAND AVE

NATIONAL CITY, CA

91950-1518

Phone: (619) 434-7308

Fax: (619) 434-7310

After Hours Phone: (619)

434-7308

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

RANA, DEBORAH T

Provider ID: 227418

Provider Gender: Female

License number: G88347

NPI: 1033191457

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH
CENTER

2400 E 8TH ST STE A

NATIONAL CITY, CA

91950-2956

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, R,

T, W

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

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

9AM-5PM

UY, CARMELITA

Provider ID: 424443

Provider Gender: Female

License number: C50548

NPI: 1154431484

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp Chula

Vista Med Ctr, Scripps Mercy

Hospital Chula Vista, Paradise

Valley Hospital

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

2340 E 8TH ST STE E

NATIONAL CITY, CA

91950-2870

Phone: (619) 216-8500

Fax: (619) 216-8511

After Hours Phone: (619)

216-8500

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

UY, CARMELITA

Provider ID: 424443

Provider Gender: Female

License number: C50548

NPI: 1154431484

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp Chula

Vista Med Ctr, Scripps Mercy

Hospital Chula Vista, Paradise

Valley Hospital

Board Certified Specialty: No

HEALTH EXCEL IPA INC

2340 E 8TH ST STE E

NATIONAL CITY, CA

91950-2870

Phone: (619) 216-8500

Fax: (619) 216-8511

After Hours Phone: (619)

216-8500

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

VALENCIA, MARILES F

Provider ID: 104060

Provider Gender: Female

License number: A54929

NPI: 1275541625

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Tagalog

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital Chula Vista, Paradise

Valley Hospital, Sharp Chula

Vista Med Ctr, Rady Childrens

Hospital San Diego

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

655 EUCLID AVE STE 207

NATIONAL CITY, CA

91950-2968

Phone: (619) 475-4575

Fax: (619) 475-4578

After Hours Phone: (619)

475-4575

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

VITUG, ELENA P

Provider ID: 74967

Provider Gender: Female

License number: A44349

NPI: 1285746214

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Tagalog

Cultural Competency: No

Hospital Affiliation: Paradise

Valley Hospital, Sharp Chula

Vista Med Ctr, Rady Childrens

Hospital San Diego

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

502 EUCLID AVE STE 201

NATIONAL CITY, CA

91950-2949

Phone: (619) 475-6204

Fax: (619) 475-5174

After Hours Phone: (619)

475-6204

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ *Accessibility:* P, EB, IB, E, R,

W

Hours: M-SA 9AM-5PM

PHYSICIANS ASSISTANT

ARMENTA, JORGE

Provider ID: 185270

Provider Gender: Male

License number: PA13694

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

NPI: 1346382611
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518
Phone: (619) 434-7308
Fax:
After Hours Phone: (619)
434-7308
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: P, EB, IB, E, R,
W
Hours: M-W,F,SA 9AM-5PM, TH
8AM-2PM

BANGS, SASHA S

Provider ID: 418930
Provider Gender: Female
License number: PA55660
NPI: 1720524374
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
1000 EUCLID AVE
NATIONAL CITY, CA
91950-3856
Phone: (619) 515-2399
Fax:
After Hours Phone: (619)
515-2399
Website: www.fhcsd.org

Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M,W,F 8:30AM-3:30PM,
TU,TH 10:30AM-5:30PM, SA
9AM-5PM

MARTINEZ MURGUIA, IRENE

Provider ID: 185270
Provider Gender: Female
License number: PA20296
NPI: 1447492889
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518
Phone: (619) 434-7308
Fax:

After Hours Phone: (619)
434-7308
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: P, EB, IB, E, R,
W
Hours: M-W,F,SA 9AM-5PM, TH
8AM-2PM

MERCER, KELLY C

Provider ID: 185270
Provider Gender: Female
License number: PA21625
NPI: 1154609790
Provider English Spoken: Yes

Provider Language(s) Spoken:
Arabic
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518
Phone: (619) 434-7308
Fax:
After Hours Phone: (619)
434-7308
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: P, EB, IB, E, R,
W
Hours: M-W,F,SA 9AM-5PM, TH
8AM-2PM

OCEANSIDE

CERTIFIED NURSE PRACTITIONER

BEECHER-VAN HORN, JOANNE B

Provider ID: 296476
Provider Gender: Female
License number: NP95013879
NPI: 1457665424
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-NORTH COUNTY HEALTH
SERVICES
605 CROUCH ST BLDG C
OCEANSIDE, CA 92054-4415

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Phone: (760) 736-6767

Fax:

After Hours Phone: (760)
736-6767

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 8AM-5PM

BROMAN, GRETCHEN L

Provider ID: 402434

Provider Gender: Female

License number: NP95007885

NPI: 1922421288

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-VISTA COMMUNITY

CLINIC

818 PIER VIEW WAY

OCEANSIDE, CA 92054-2803

Phone: (760) 631-5000

Fax:

After Hours Phone: (760)

631-5000

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M,TU,TH,F 8AM-5PM, W

8AM-7PM, SA 9AM-4PM

HALGEDAHL, YI T

Provider ID: 206341

Provider Gender: Female

License number: NP95006826

NPI: 1619246907

Provider English Spoken: Yes

Provider Language(s) Spoken:

Chinese

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-VISTA COMMUNITY

CLINIC

4700 N RIVER RD

OCEANSIDE, CA 92057-6043

Phone: (844) 308-5003

Fax:

After Hours Phone: (844)

308-5003

Website:

www.vistacommunityclinic.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility: W

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

9AM-4PM

HALGEDAHL, YI T

Provider ID: 402434

Provider Gender: Female

License number: NP95006826

NPI: 1619246907

Provider English Spoken: Yes

Provider Language(s) Spoken:

Chinese

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-VISTA COMMUNITY

CLINIC

818 PIER VIEW WAY

OCEANSIDE, CA 92054-2803

Phone: (760) 631-5000

Fax:

After Hours Phone: (760)

631-5000

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M,TU,TH,F 8AM-5PM, W

8AM-7PM, SA 9AM-4PM

HALGEDAHL, YI T

Provider ID: 402436

Provider Gender: Female

License number: NP95006826

NPI: 1619246907

Provider English Spoken: Yes

Provider Language(s) Spoken:

Chinese

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-VISTA COMMUNITY

CLINIC

517 N HORNE ST

OCEANSIDE, CA 92054-2518

Phone: (760) 631-5000

Fax:

After Hours Phone: (760)

631-5000

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility: W

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

9AM-4PM

KELLEHER, BRIDGET M

Provider ID: 206341

Provider Gender: Female

License number: NP95003447

NPI: 1245695006

Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr
Board Certified Specialty: No
 IHP-VISTA COMMUNITY CLINIC
 4700 N RIVER RD
 OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-4PM

KELLEHER, BRIDGET M

Provider ID: 402434
Provider Gender: Female
License number: NP95003447
NPI: 1245695006
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr
Board Certified Specialty: No
 IHP-VISTA COMMUNITY CLINIC
 818 PIER VIEW WAY
 OCEANSIDE, CA 92054-2803
Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000

Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M,TU,TH,F 8AM-5PM, W 8AM-7PM, SA 9AM-4PM

SAHELIJO, NIENKE A

Provider ID: 206341
Provider Gender: Female
License number: NP95015096
NPI: 1528686318
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Board Certified Specialty: No
 IHP-VISTA COMMUNITY CLINIC
 4700 N RIVER RD
 OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000

Fax:
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-4PM

SCHAEPE, RHODORA A

Provider ID: 402434
Provider Gender: Female
License number: NP7791
NPI: 1700974789
Provider English Spoken: Yes

Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Board Certified Specialty: No
 IHP-VISTA COMMUNITY CLINIC
 818 PIER VIEW WAY
 OCEANSIDE, CA 92054-2803
Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M,TU,TH,F 8AM-5PM, W 8AM-7PM, SA 9AM-4PM

SCHAEPE, RHODORA A

Provider ID: 402434
Provider Gender: Female
License number: RN410247
NPI: 1700974789
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Board Certified Specialty: No
 IHP-VISTA COMMUNITY CLINIC
 818 PIER VIEW WAY
 OCEANSIDE, CA 92054-2803
Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

No
 ☯ *Accessibility: W*
Hours: M,TU,TH,F 8AM-5PM, W 8AM-7PM, SA 9AM-4PM

CERTIFIED REGISTERED NURSE MIDWIFE

ZAMORA-FLYR, MARIA M

Provider ID: 402434
Provider Gender: Female
License number: NM1634
NPI: 1194938647
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: IHP-VISTA COMMUNITY CLINIC
 818 PIER VIEW WAY
 OCEANSIDE, CA 92054-2803
Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility: W*
Hours: M,TU,TH,F 8AM-5PM, W 8AM-7PM, SA 9AM-4PM

FAMILY PRACTICE

DONNELL, MARTI M

Provider ID: 206341
Provider Gender: Female
License number: C50708
NPI: 1235151366
Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Tri City Medical Ctr
Board Certified Specialty: No
 IHP-VISTA COMMUNITY CLINIC
 4700 N RIVER RD
 OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility: W*
Hours: M-F 8AM-5PM, SA 9AM-4PM

DONNELL, MARTI M

Provider ID: 402436
Provider Gender: Female
License number: C50708
NPI: 1235151366
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Tri City Medical Ctr
Board Certified Specialty: No
 IHP-VISTA COMMUNITY CLINIC
 517 N HORNE ST
 OCEANSIDE, CA 92054-2518

Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility: W*
Hours: M-F 8AM-5PM, SA 9AM-4PM

ESPINOSA-SILVA, YAMINAH

Provider ID: 206341
Provider Gender: Female
License number: 20A12958
NPI: 1003172016
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Tri City Medical Ctr
Board Certified Specialty: No
 IHP-VISTA COMMUNITY CLINIC
 4700 N RIVER RD
 OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility: W*
Hours: M-F 8AM-5PM, SA 9AM-4PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

ESPINOSA-SILVA, YAMINAH

Provider ID: 402434
Provider Gender: Female
License number: 20A12958
NPI: 1003172016
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Tri City Medical Ctr
Board Certified Specialty: No

IHP-VISTA COMMUNITY CLINIC

818 PIER VIEW WAY
OCEANSIDE, CA 92054-2803
Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: W
Hours: M,TU,TH,F 8AM-5PM, W 8AM-7PM, SA 9AM-4PM

ESPINOSA-SILVA, YAMINAH

Provider ID: 402436
Provider Gender: Female
License number: 20A12958
NPI: 1003172016
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Tri City Medical Ctr
Board Certified Specialty: No

IHP-VISTA COMMUNITY CLINIC

517 N HORNE ST
OCEANSIDE, CA 92054-2518
Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-4PM

HAIDER, ABDULLAH T

Provider ID: 296476
Provider Gender: Male
License number: A64435
NPI: 1730156936
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-NORTH COUNTY HEALTH SERVICES
605 CROUCH ST BLDG C
OCEANSIDE, CA 92054-4415
Phone: (760) 757-4566
Fax:
After Hours Phone: (760) 757-4566
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 8AM-5PM

KETCHEL, CLINT

Provider ID: 206341
Provider Gender: Male
License number: A135564
NPI: 1699038125
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Southwest Healthcare System Murrieta, Southwest Healthcare System Wildomar, Scripps Memorial Hospital Encinitas, Tri City Medical Ctr, Whittier Hospital Medical Center
Board Certified Specialty: No
IHP-VISTA COMMUNITY CLINIC

4700 N RIVER RD
OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-4PM

KETCHEL, CLINT

Provider ID: 402434
Provider Gender: Male
License number: A135564
NPI: 1699038125
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Southwest

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Healthcare System Murrieta,
Southwest Healthcare System
Wildomar, Scripps Memorial
Hospital Encinitas, Tri City
Medical Ctr, Whittier Hospital
Medical Center
Board Certified Specialty: No
IHP-VISTA COMMUNITY
CLINIC
818 PIER VIEW WAY
OCEANSIDE, CA 92054-2803
Phone: (760) 631-5000
Fax:
After Hours Phone: (760)
631-5000
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M,TU,TH,F 8AM-5PM, W
8AM-7PM, SA 9AM-4PM

KETCHEL, CLINT

Provider ID: 402436
Provider Gender: Male
License number: A135564
NPI: 1699038125
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Southwest
Healthcare System Murrieta,
Southwest Healthcare System
Wildomar, Scripps Memorial
Hospital Encinitas, Tri City
Medical Ctr, Whittier Hospital
Medical Center
Board Certified Specialty: No
IHP-VISTA COMMUNITY
CLINIC
517 N HORNE ST
OCEANSIDE, CA 92054-2518

Phone: (760) 631-5000
Fax:
After Hours Phone: (760)
631-5000
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
9AM-4PM

KURUKULASURIYA, DAYANTHI N

Provider ID: 296476
Provider Gender: Female
License number: 20A15689
NPI: 1205246865
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-NORTH COUNTY HEALTH
SERVICES

605 CROUCH ST BLDG C
OCEANSIDE, CA 92054-4415
Phone: (760) 757-4566
Fax:
After Hours Phone: (760)
757-4566
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 8AM-5PM

LAROCQUE, MICHAEL A

Provider ID: 206341
Provider Gender: Male

License number: C34614
NPI: 1306879549
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas, Tri
City Medical Ctr
Board Certified Specialty: No
IHP-VISTA COMMUNITY
CLINIC
4700 N RIVER RD
OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000
Fax:
After Hours Phone: (760)
631-5000
Website:
www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
9AM-4PM

PANICKER, CIBU

Provider ID: 206341
Provider Gender: Male
License number: A149340
NPI: 1235492760
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr
Board Certified Specialty: No
IHP-VISTA COMMUNITY
CLINIC
4700 N RIVER RD
OCEANSIDE, CA 92057-6043

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Phone: (760) 631-5000

Fax:

After Hours Phone: (760)
631-5000

Website:

www.vistacommunityclinic.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA
9AM-4PM

PONSFORD, DIANA O

Provider ID: 402436

Provider Gender: Female

License number: 20A17371

NPI: 1407204969

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Tri City

Medical Ctr

Board Certified Specialty: No

IHP-VISTA COMMUNITY

CLINIC

517 N HORNE ST

OCEANSIDE, CA 92054-2518

Phone: (760) 631-5000

Fax:

After Hours Phone: (760)

631-5000

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility: W

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

9AM-4PM

SAFI, ROOZCHEHR

Provider ID: 296476

Provider Gender: Female

License number: A116562

NPI: 1659563641

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
IHP-NORTH COUNTY HEALTH
SERVICES

605 CROUCH ST BLDG C
OCEANSIDE, CA 92054-4415

Phone: (760) 757-4566

Fax: (760) 757-3004

After Hours Phone: (760)

757-4566

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 8AM-5PM

SEFA-BOAKYE, MAMIE S

Provider ID: 402434

Provider Gender: Female

License number: A137549

NPI: 1194067215

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-VISTA COMMUNITY

CLINIC

818 PIER VIEW WAY

OCEANSIDE, CA 92054-2803

Phone: (760) 631-5000

Fax:

After Hours Phone: (760)
631-5000

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M,TU,TH,F 8AM-5PM, W
8AM-7PM, SA 9AM-4PM

SEFA-BOAKYE, MAMIE S

Provider ID: 402436

Provider Gender: Female

License number: A137549

NPI: 1194067215

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-VISTA COMMUNITY

CLINIC

517 N HORNE ST

OCEANSIDE, CA 92054-2518

Phone: (760) 631-5000

Fax:

After Hours Phone: (760)

631-5000

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility: W

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

9AM-4PM

SIMATI, BETH L

Provider ID: 206341

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Provider Gender: Female
License number: C156596
NPI: 1417187618
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Whittier
 Hospital Medical Center, Scripps
 Memorial Hospital Encinitas, Tri
 City Medical Ctr
Board Certified Specialty: No
 IHP-VISTA COMMUNITY
 CLINIC
 4700 N RIVER RD
 OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000

Fax:
After Hours Phone: (760)
 631-5000
Website:
 www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
 9AM-4PM

SIMATI, BETH L

Provider ID: 402434
Provider Gender: Female
License number: C156596
NPI: 1417187618
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Whittier
 Hospital Medical Center, Scripps
 Memorial Hospital Encinitas, Tri
 City Medical Ctr
Board Certified Specialty: No
 IHP-VISTA COMMUNITY
 CLINIC

818 PIER VIEW WAY
 OCEANSIDE, CA 92054-2803
Phone: (760) 631-5000
Fax:
After Hours Phone: (760)
 631-5000
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M,TU,TH,F 8AM-5PM, W
 8AM-7PM, SA 9AM-4PM

SIMATI, BETH L

Provider ID: 402436
Provider Gender: Female
License number: C156596
NPI: 1417187618
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Whittier
 Hospital Medical Center, Scripps
 Memorial Hospital Encinitas, Tri
 City Medical Ctr
Board Certified Specialty: No
 IHP-VISTA COMMUNITY
 CLINIC
 517 N HORNE ST
 OCEANSIDE, CA 92054-2518
Phone: (760) 631-5000
Fax:
After Hours Phone: (760)
 631-5000
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-F 8AM-5PM, SA

9AM-4PM

FQHC

NCHS MISSION MESA COMMUNITY HEALTH CENTER,

Provider ID: 480247
Provider Gender:
License number: 080000531
NPI: 1245246917
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
 IHP-NORTH COUNTY HEALTH
 SERVICES
 2210 MESA DR STE 300
 OCEANSIDE, CA 92054-3701
Phone: (760) 966-3306
Fax: (760) 736-8740
After Hours Phone: (760)
 966-3306
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-F 8AM-5PM, SA
 8AM-4:30PM

NORTH COUNTY HEALTH SERVICE-LA MISSION,

Provider ID: 480315
Provider Gender:
License number: 080000240
NPI: 1245246917
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

IHP-NORTH COUNTY HEALTH SERVICES

3220 MISSION AVE STE 1
OCEANSIDE, CA 92058-1354

Phone: (760) 433-3155

Fax: (760) 736-8740

After Hours Phone: (760)

433-3155

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

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

9AM-5PM

OCEANSIDE-CARLSBAD COMMUNITY CLINIC,

Provider ID: 296476

Provider Gender:

License number:

NPI: 1245246917

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty:

IHP-NORTH COUNTY HEALTH SERVICES

605 CROUCH ST BLDG C

OCEANSIDE, CA 92054-4415

Phone: (760) 757-4566

Fax: (760) 736-8740

After Hours Phone: (760)

757-4566

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 8AM-5PM

VISTA COMMUNITY CLINIC HORNE STREET,

Provider ID: 402436

Provider Gender:

License number: 080000745

NPI: 1437245412

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty:

IHP-VISTA COMMUNITY CLINIC

517 N HORNE ST

OCEANSIDE, CA 92054-2518

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)

631-5000

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility: W

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

9AM-4PM

VISTA COMMUNITY CLINIC PIER VIEW WAY,

Provider ID: 402434

Provider Gender:

License number: 080000510

NPI: 1649363375

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty:

IHP-VISTA COMMUNITY CLINIC

818 PIER VIEW WAY

OCEANSIDE, CA 92054-2803

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)

631-5000

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M,TU,TH,F 8AM-5PM, W

8AM-7PM, SA 9AM-4PM

VISTA COMMUNITY CLINIC,

Provider ID: 206341

Provider Gender:

License number: 080000002

NPI: 1316501562

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty:

IHP-VISTA COMMUNITY CLINIC

4700 N RIVER RD STE B

OCEANSIDE, CA 92057-6043

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)

631-5000

Website:

www.vistacommunityclinic.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility: W

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

9AM-4PM

VISTA COMMUNITY CLINIC,

Provider ID: 206341

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Provider Gender:
License number: 080000002
NPI: 1851300123
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
 IHP-VISTA COMMUNITY
 CLINIC
 4700 N RIVER RD STE B
 OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
 631-5000
Website:

www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
 9AM-4PM

GENERAL PRACTICE

RONAN, KEVIN J
Provider ID: 402436
Provider Gender: Male
License number: G77176
NPI: 1225017353
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Tri City
 Medical Ctr, Scripps Memorial
 Hospital Encinitas
Board Certified Specialty: No
 IHP-VISTA COMMUNITY
 CLINIC
 517 N HORNE ST

OCEANSIDE, CA 92054-2518
Phone: (760) 631-5000
Fax:
After Hours Phone: (760)
 631-5000
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
 9AM-4PM

INTERNAL MEDICINE

CHONG, ILSONG J
Provider ID: 296476
Provider Gender: Male
License number: C152937
NPI: 1831240159
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Korean
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-NORTH COUNTY HEALTH
 SERVICES
 605 CROUCH ST BLDG C
 OCEANSIDE, CA 92054-4415
Phone: (760) 757-4566
Fax:
After Hours Phone: (760)
 757-4566
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:* W
Hours: M-SA 8AM-5PM

DELGADILLO, ALEXANDER
Provider ID: 206341
Provider Gender: Male
License number: G89399
NPI: 1245298769
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Temecula
 Valley Hospital Inc
Board Certified Specialty: No
 IHP-VISTA COMMUNITY
 CLINIC

4700 N RIVER RD
 OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000
Fax:
After Hours Phone: (760)
 631-5000
Website:
 www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
 9AM-4PM

DELGADILLO, ALEXANDER
Provider ID: 402434
Provider Gender: Male
License number: G89399
NPI: 1245298769
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Temecula
 Valley Hospital Inc
Board Certified Specialty: No
 IHP-VISTA COMMUNITY

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

CLINIC
818 PIER VIEW WAY
OCEANSIDE, CA 92054-2803
Phone: (760) 631-5000
Fax:
After Hours Phone: (760)
631-5000
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M,TU,TH,F 8AM-5PM, W
8AM-7PM, SA 9AM-4PM

DELGADILLO, ALEXANDER

Provider ID: 402436
Provider Gender: Male
License number: G89399
NPI: 1245298769
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Temecula
Valley Hospital Inc
Board Certified Specialty: No
IHP-VISTA COMMUNITY
CLINIC
517 N HORNE ST
OCEANSIDE, CA 92054-2518
Phone: (760) 631-5000
Fax:
After Hours Phone: (760)
631-5000
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA

9AM-4PM
GOMEZ, DENISE Y
Provider ID: 296476
Provider Gender: Female
License number: A66289
NPI: 1407871817
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr, Palomar Health
Downtown Campus, Palomar
Medical Center
Board Certified Specialty: No
IHP-NORTH COUNTY HEALTH
SERVICES

605 CROUCH ST BLDG C
OCEANSIDE, CA 92054-4415
Phone: (760) 757-4566
Fax: (760) 757-3004
After Hours Phone: (760)
757-4566
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 8AM-5PM

JEFFERIS, LAUREN R

Provider ID: 296476
Provider Gender: Female
License number: A80674
NPI: 1346354776
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-NORTH COUNTY HEALTH
SERVICES

605 CROUCH ST BLDG C
OCEANSIDE, CA 92054-4415
Phone: (760) 757-4566
Fax:
After Hours Phone: (760)
757-4566
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 8AM-5PM

JEFFERIS, LAUREN R

Provider ID: 480247
Provider Gender: Female
License number: A80674
NPI: 1346354776
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-NORTH COUNTY HEALTH
SERVICES
2210 MESA DR STE 300
OCEANSIDE, CA 92054-3701
Phone: (760) 891-4667
Fax:
After Hours Phone: (760)
891-4667
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-F 8AM-5PM, SA
8AM-4:30PM

PEDIATRICS

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

CALHOUN, CHANELLE R
Provider ID: 480247
Provider Gender: Female
License number: G75390
NPI: 1437166709
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital Encinitas
Board Certified Specialty: No
IHP-NORTH COUNTY HEALTH SERVICES

2210 MESA DR STE 300
OCEANSIDE, CA 92054-3701
Phone: (760) 891-4667
Fax:

After Hours Phone: (760) 891-4667

Website:
Email:

Medi-Cal Open Panel: Yes
Min/Max Age: None

American Sign Language (ASL): No

♿ Accessibility:

Hours: M-F 8AM-5PM, SA 8AM-4:30PM

CHEN, MING

Provider ID: 480247
Provider Gender: Female
License number: A56246
NPI: 1851525505
Provider English Spoken: Yes
Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency: No
Hospital Affiliation: Delano Regional Med Ctr
Board Certified Specialty: No
IHP-NORTH COUNTY HEALTH SERVICES

2210 MESA DR STE 300
OCEANSIDE, CA 92054-3701
Phone: (760) 891-4667
Fax:
After Hours Phone: (760) 891-4667
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-F 8AM-5PM, SA 8AM-4:30PM

CURLEY, EDWARD R

Provider ID: 480247
Provider Gender: Male
License number: A73814
NPI: 1164434312
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr
Board Certified Specialty: No
IHP-NORTH COUNTY HEALTH SERVICES

2210 MESA DR STE 300
OCEANSIDE, CA 92054-3701
Phone: (760) 891-4667
Fax:

After Hours Phone: (760) 891-4667

Website:
Email:

Medi-Cal Open Panel: Yes
Min/Max Age: None

American Sign Language (ASL): No

♿ Accessibility:

Hours: M-F 8AM-5PM, SA 8AM-4:30PM

DANIELS, SARAH R

Provider ID: 433806
Provider Gender: Female
License number: A130872
NPI: 1730446527
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Rady Childrens Hospital San Diego, Scripps Memorial Hospital Encinitas,
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3605 VISTA WAY STE 130B
OCEANSIDE, CA 92056-4565
Phone: (760) 547-1010

Fax:

After Hours Phone: (760) 547-1010

Website:
Email:

Medi-Cal Open Panel: Yes
Min/Max Age: 0/18

American Sign Language (ASL): No

♿ Accessibility:

Hours: M-SA 9AM-5PM

FALLON, TINA U

Provider ID: 480247
Provider Gender: Female
License number: A161739
NPI: 1013371004
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: IHP-NORTH COUNTY HEALTH SERVICES
2210 MESA DR STE 300

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

OCEANSIDE, CA 92054-3701

Phone: (760) 891-4667

Fax:

After Hours Phone: (760)

891-4667

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

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

8AM-4:30PM

GUNTA, SUJANA S

Provider ID: 402434

Provider Gender: Female

License number: A109056

NPI: 1932304342

Provider English Spoken: Yes

Provider Language(s) Spoken:

Hindi, Marathi, Spanish, Telugu

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego, Tri

City Medical Ctr

Board Certified Specialty: No

IHP-VISTA COMMUNITY

CLINIC

818 PIER VIEW WAY

OCEANSIDE, CA 92054-2803

Phone: (760) 631-5000

Fax:

After Hours Phone: (760)

631-5000

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M,TU,TH,F 8AM-5PM, W

8AM-7PM, SA 9AM-4PM

HARTFORD, NICOLE P

Provider ID: 206341

Provider Gender: Female

License number: 20A14390

NPI: 1346530466

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital Encinitas, Tri

City Medical Ctr

Board Certified Specialty: No

IHP-VISTA COMMUNITY

CLINIC

4700 N RIVER RD

OCEANSIDE, CA 92057-6043

Phone: (760) 631-5000

Fax:

After Hours Phone: (760)

631-5000

Website:

www.vistacommunityclinic.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility: W

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

9AM-4PM

KRAMER, MELISSA S

Provider ID: 469759

Provider Gender: Female

License number: A146613

NPI: 1467833467

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

3605 VISTA WAY BLDG B

OCEANSIDE, CA 92056-4565

Phone: (760) 547-1010

Fax: (760) 547-1011

After Hours Phone: (760)

547-1010

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

MACINTYRE, ELIZABETH T

Provider ID: 543354

Provider Gender: Female

License number: A172352

NPI: 1336520766

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

3605 VISTA WAY BLDG B # 130

OCEANSIDE, CA 92056-4565

Phone: (760) 547-1010

Fax: (760) 547-1011

After Hours Phone: (760)

547-1010

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

MCCAMMACK, BRADLEY D

Provider ID: 206341

Provider Gender: Male

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

License number: A130883
 NPI: 1629368857
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Tri City Medical Ctr
 Board Certified Specialty: No
 IHP-VISTA COMMUNITY CLINIC
 4700 N RIVER RD
 OCEANSIDE, CA 92057-6043
 Phone: (760) 631-5000
 Fax: (760) 414-3731
 After Hours Phone: (760) 631-5000
 Website: www.vistacommunityclinic.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-4PM

MILLER, DONALD T

Provider ID: 433589
 Provider Gender: Male
 License number: G69645
 NPI: 1154356582
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital Encinitas, Rady Childrens Hospital San Diego, Palomar Medical Center, Childrens Hosp And Resrch Ctr At Oakland, Scripps Memorial Hospital
 Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK
 3605 VISTA WAY BLDG B # 130
 OCEANSIDE, CA 92056-4565
 Phone: (760) 547-1010
 Fax:
 After Hours Phone: (760) 547-1010
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM

PERKINS, RACHEL E

Provider ID: 435952
 Provider Gender: Female
 License number: A123956
 NPI: 1427398320
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Tri City Medical Ctr, Childrens Hosp And Resrch Ctr At Oakland, Rady Childrens Hospital San Diego
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3605 VISTA WAY STE 130B
 OCEANSIDE, CA 92056-4565
 Phone: (760) 547-1010
 Fax:
 After Hours Phone: (760) 547-1010
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18

American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM

PERTL, URSULA G

Provider ID: 69068
 Provider Gender: Female
 License number: A89997
 NPI: 1609947464
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital Encinitas, Rady Childrens Hospital San Diego, Childrens Hosp Of Los Angeles
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3605 VISTA WAY # B
 OCEANSIDE, CA 92056-4565
 Phone: (760) 547-1010
 Fax: (760) 547-1011
 After Hours Phone: (760) 547-1010
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM

ZACHRY, ALISON D

Provider ID: 296476
 Provider Gender: Female
 License number: A131678
 NPI: 1922402858
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No

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C. Directorio de proveedores de atención primaria

Hospital Affiliation: Rady
 Childrens Hospital San Diego, Tri
 City Medical Ctr
Board Certified Specialty: No
 IHP-NORTH COUNTY HEALTH
 SERVICES
 605 CROUCH ST BLDG C
 OCEANSIDE, CA 92054-4415
Phone: (760) 757-4566
Fax: (760) 757-3004
After Hours Phone: (760)
 757-4566
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:* W
Hours: M-SA 8AM-5PM

ZACHRY, ALISON D

Provider ID: 480247
Provider Gender: Female
License number: A131678
NPI: 1922402858
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego, Tri
 City Medical Ctr
Board Certified Specialty: No
 IHP-NORTH COUNTY HEALTH
 SERVICES
 2210 MESA DR STE 300
 OCEANSIDE, CA 92054-3701
Phone: (760) 891-4667
Fax:
After Hours Phone: (760)
 891-4667
Website:
Email:
Medi-Cal Open Panel: Yes

Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-F 8AM-5PM, SA
 8AM-4:30PM

ZACHRY, ALISON D

Provider ID: 480315
Provider Gender: Female
License number: A131678
NPI: 1922402858
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego, Tri
 City Medical Ctr
Board Certified Specialty: No
 IHP-NORTH COUNTY HEALTH
 SERVICES
 3220 MISSION AVE STE 1
 OCEANSIDE, CA 92058-1354
Phone: (760) 891-4667
Fax:
After Hours Phone: (760)
 891-4667
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-F 8AM-5PM, SA
 9AM-5PM

License number: A120771
NPI: 1912141391
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Hindi, Urdu
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-NEIGHBORHOOD
 HEALTHCARE
 13010 POWAY RD
 POWAY, CA 92064
Phone: (858) 218-3000
Fax:
After Hours Phone: (858)
 218-3000
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-F 8AM-5PM, SA
 9AM-5PM

SAURIOL, TAWNY R

Provider ID: 481187
Provider Gender: Female
License number: A135955
NPI: 1164780219
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-NEIGHBORHOOD
 HEALTHCARE
 13010 POWAY RD
 POWAY, CA 92064
Phone: (858) 218-3000
Fax:
After Hours Phone: (858)
 218-3000

POWAY

FAMILY PRACTICE

KAUR, JATINDER

Provider ID: 481187
Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-F 8AM-5PM, SA
 9AM-5PM

FQHC

NEIGHBORHOOD HEALTHCARE GOLD FAMILY HEALTH CENTER,

Provider ID: 481187
 Provider Gender:
 License number: 550004321
 NPI: 1023518768
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty:
 IHP-NEIGHBORHOOD
 HEALTHCARE
 13010 POWAY RD
 POWAY, CA 92064
 Phone: (858) 218-3000
 Fax: (360) 462-2742
 After Hours Phone: (858)
 218-3000
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-F 8AM-5PM, SA
 9AM-5PM

PEDIATRICS

CURET, ZULMA

Provider ID: 481187
 Provider Gender: Female
 License number: A119661
 NPI: 1841561107
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Board Certified Specialty: No
 IHP-NEIGHBORHOOD
 HEALTHCARE
 13010 POWAY RD
 POWAY, CA 92064
 Phone: (858) 218-3000
 Fax:
 After Hours Phone: (858)
 218-3000
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-F 8AM-5PM, SA
 9AM-5PM

PHYSICIANS ASSISTANT

BALDWIN, DONNA J
 Provider ID: 481187
 Provider Gender: Female
 License number: PA23310
 NPI: 1649692369
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-NEIGHBORHOOD
 HEALTHCARE
 13010 POWAY RD
 POWAY, CA 92064

Phone: (858) 218-3000
 Fax:
 After Hours Phone: (858)
 218-3000
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-F 8AM-5PM, SA
 9AM-5PM

PAUMA VALLEY

FAMILY PRACTICE

AYON MARTINEZ, CARLOS X

Provider ID: 206267
 Provider Gender: Male
 License number: A114419
 NPI: 1154583128
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-NEIGHBORHOOD
 HEALTHCARE
 16650 HIGHWAY 76
 PAUMA VALLEY, CA
 92061-9524
 Phone: (760) 742-9919
 Fax:
 After Hours Phone: (760)
 742-9919
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: P, EB, IB, E, R,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

T, W
Hours: M-F 8AM-4:30PM, SA
9AM-5PM

SCHULTZ, JAMES H

Provider ID: 206267
Provider Gender: Male
License number: G61829
NPI: 1356376164
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Greek, Spanish
Cultural Competency: No
Hospital Affiliation: Palomar
Health Downtown Campus,
Southwest Healthcare System
Wildomar, Southwest Healthcare
System Murrieta, Palomar
Medical Center
Board Certified Specialty: No
IHP-NEIGHBORHOOD
HEALTHCARE
16650 HIGHWAY 76
PAUMA VALLEY, CA
92061-9524
Phone: (760) 742-9919
Fax:
After Hours Phone: (760)
742-9919
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
T, W
Hours: M-F 8AM-4:30PM, SA
9AM-5PM

FQHC

NEIGHBORHOOD HEALTHCARE PAUMA VALLEY,

Provider ID: 206267
Provider Gender:
License number: 080000611
NPI: 1407031693
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
IHP-NEIGHBORHOOD
HEALTHCARE
16650 HIGHWAY 76
PAUMA VALLEY, CA
92061-9524
Phone: (760) 742-9919
Fax: (858) 633-4696
After Hours Phone: (760)
742-9919
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
T, W
Hours: M-F 8AM-4:30PM, SA
9AM-5PM

POWAY

FAMILY PRACTICE

IONESCU, LUDMILLA N , MD

Provider ID: 505945
Provider Gender: Female
License number: C130451
NPI: 1568498145
Provider English Spoken: Yes
Provider Language(s) Spoken:
Russian
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
COMMUNITY CARE IPA LLC

15611 POMERADO RD FL 3
POWAY, CA 92064-2437
Phone: (858) 675-3210
Fax: (858) 613-2938
After Hours Phone: (858)
675-3210
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

MAGAT, PATROCINIA A

Provider ID: 532910
Provider Gender: Female
License number: A37781
NPI: 1417028663
Provider English Spoken: Yes
Provider Language(s) Spoken:
Chinese, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Pomerado
Hospital
Board Certified Specialty: No
HEALTH EXCEL IPA INC
15644 POMERADO RD STE 100
POWAY, CA 92064-2419
Phone: (858) 485-5111
Fax: (858) 485-6747
After Hours Phone: (858)
485-5111
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

MALETZ, LOUIS, MD

Provider ID: 70756

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Provider Gender: Male
License number: G50801
NPI: 1013983055
Provider English Spoken: Yes
Provider Language(s) Spoken: German, Spanish
Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus, Pomerado Hospital
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
15611 POMERADO RD STE 400
POWAY, CA 92064-2437
Phone: (858) 675-3100
Fax: (858) 613-2938
After Hours Phone: (858) 675-3100
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ *Accessibility:* P, EB, IB, E, R
Hours: M-SA 9AM-5PM

MERAM, SUSAN, MD

Provider ID: 38214
Provider Gender: Female
License number: A53727
NPI: 1588630735
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: St Johns Regional Medical Center
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
15611 POMERADO RD STE 400
POWAY, CA 92064-2437

Phone: (858) 675-3100
Fax: (858) 613-2938
After Hours Phone: (858) 675-3100
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ *Accessibility:* P, EB, IB, E, R
Hours: M-SA 9AM-5PM

MIR, YUSRA A , MD

Provider ID: 104018
Provider Gender: Female
License number: A101298
NPI: 1932435757
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Spanish, Urdu
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
15611 POMERADO RD STE 400
POWAY, CA 92064-2437
Phone: (858) 675-3100
Fax: (858) 613-2932
After Hours Phone: (858) 675-3100
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ *Accessibility:* P, EB, IB, E, R
Hours: M-SA 9AM-5PM

PUTNAM, RICHARD L , MD

Provider ID: 506946
Provider Gender: Male
License number: G50068
NPI: 1861468027

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
15611 POMERADO RD STE 300
POWAY, CA 92064-2437
Phone: (858) 675-3100
Fax: (858) 207-0039
After Hours Phone: (858) 675-3100
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM

INTERNAL MEDICINE

ANDERSEN, STUART J

Provider ID: 546663
Provider Gender: Male
License number: A162976
NPI: 1205270956
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
15611 POMERADO RD STE 400
POWAY, CA 92064-2437
Phone: (858) 675-3100
Fax: (858) 673-5187
After Hours Phone: (858) 675-3100
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

<p>No ☯ <i>Accessibility</i>: <i>Hours</i>: M-SA 9AM-5PM</p> <p>CARTY, DAVID J , MD <i>Provider ID</i>: 53596 <i>Provider Gender</i>: Male <i>License number</i>: A41501 <i>NPI</i>: 1205802568 <i>Provider English Spoken</i>: Yes <i>Provider Language(s) Spoken</i>: Spanish <i>Cultural Competency</i>: No <i>Hospital Affiliation</i>: Pomerado Hospital <i>Board Certified Specialty</i>: Yes COMMUNITY CARE IPA LLC 15611 POMERADO RD STE 400 POWAY, CA 92064-2437 <i>Phone</i>: (858) 675-3293 <i>Fax</i>: (858) 487-3823 <i>After Hours Phone</i>: (858) 675-3293 <i>Website</i>: <i>Email</i>: <i>Medi-Cal Open Panel</i>: Yes <i>Min/Max Age</i>: None <i>American Sign Language (ASL)</i>: No ☯ <i>Accessibility</i>: P, EB, IB, E, R <i>Hours</i>: M-SA 9AM-5PM</p> <p>DURE-SMITH, BELINDA A , MD <i>Provider ID</i>: 25721 <i>Provider Gender</i>: Female <i>License number</i>: A52257 <i>NPI</i>: 1487620662 <i>Provider English Spoken</i>: Yes <i>Provider Language(s) Spoken</i>: <i>Cultural Competency</i>: No <i>Hospital Affiliation</i>: Pomerado Hospital <i>Board Certified Specialty</i>: No COMMUNITY CARE IPA LLC 15611 POMERADO RD STE 400</p>	<p>POWAY, CA 92064-2437 <i>Phone</i>: (858) 675-3293 <i>Fax</i>: (858) 487-3823 <i>After Hours Phone</i>: (858) 675-3293 <i>Website</i>: <i>Email</i>: <i>Medi-Cal Open Panel</i>: Yes <i>Min/Max Age</i>: 18/999 <i>American Sign Language (ASL)</i>: No ☯ <i>Accessibility</i>: P, EB, IB, E, R <i>Hours</i>: M-SA 9AM-5PM</p> <p>MAMARIL, DENNIS M , MD <i>Provider ID</i>: 53861 <i>Provider Gender</i>: Male <i>License number</i>: A90180 <i>NPI</i>: 1508832601 <i>Provider English Spoken</i>: Yes <i>Provider Language(s) Spoken</i>: Spanish <i>Cultural Competency</i>: No <i>Hospital Affiliation</i>: Pomerado Hospital <i>Board Certified Specialty</i>: Yes COMMUNITY CARE IPA LLC 15611 POMERADO RD STE 400 POWAY, CA 92064-2437 <i>Phone</i>: (858) 675-3293 <i>Fax</i>: (858) 613-5192 <i>After Hours Phone</i>: (858) 675-3293 <i>Website</i>: <i>Email</i>: <i>Medi-Cal Open Panel</i>: Yes <i>Min/Max Age</i>: None <i>American Sign Language (ASL)</i>: No ☯ <i>Accessibility</i>: P, EB, IB, E, R <i>Hours</i>: M-SA 9AM-5PM</p> <p>PRESANT, LARRY A , MD <i>Provider ID</i>: 57940 <i>Provider Gender</i>: Male</p>	<p><i>License number</i>: G42579 <i>NPI</i>: 1790751956 <i>Provider English Spoken</i>: Yes <i>Provider Language(s) Spoken</i>: Spanish <i>Cultural Competency</i>: No <i>Hospital Affiliation</i>: Pomerado Hospital <i>Board Certified Specialty</i>: Yes COMMUNITY CARE IPA LLC 15611 POMERADO RD STE 400 POWAY, CA 92064-2437 <i>Phone</i>: (858) 675-3100 <i>Fax</i>: (858) 618-1523 <i>After Hours Phone</i>: (858) 675-3100 <i>Website</i>: <i>Email</i>: <i>Medi-Cal Open Panel</i>: Yes <i>Min/Max Age</i>: None <i>American Sign Language (ASL)</i>: No ☯ <i>Accessibility</i>: P, EB, IB, E, R <i>Hours</i>: M-SA 9AM-5PM</p> <hr/> <p style="text-align: center;">PEDIATRICS</p> <hr/> <p>BOWERS, HILARY M <i>Provider ID</i>: 41436 <i>Provider Gender</i>: Female <i>License number</i>: A78338 <i>NPI</i>: 1891884318 <i>Provider English Spoken</i>: Yes <i>Provider Language(s) Spoken</i>: <i>Cultural Competency</i>: No <i>Hospital Affiliation</i>: Palomar Health Downtown Campus, Rady Childrens Hospital San Diego, Pomerado Hospital, Palomar Medical Center <i>Board Certified Specialty</i>: No RADY CHILDRENS HEALTH NETWORK 15725 POMERADO RD STE 203 POWAY, CA 92064-2058</p>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Phone: (858) 673-3340
Fax: (858) 673-1075
After Hours Phone: (858)
673-3340

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R

Hours: M-SA 9AM-5PM

CHANG, IRENE S

Provider ID: 462361

Provider Gender: Female

License number: A73533

NPI: 1790756799

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp Chula

Vista Med Ctr, Rady Childrens

Hospital San Diego, Scripps

Mercy Hospital Chula Vista,

Scripps Mercy Hospital,

Pomerado Hospital

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

15725 POMERADO RD STE 203

POWAY, CA 92064-2058

Phone: (858) 673-3340

Fax:

After Hours Phone: (858)

673-3340

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

DIEP, THUAN M

Provider ID: 462977

Provider Gender: Male

License number: A146685

NPI: 1477948479

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Rady

Childrens Hospital San Diego

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

15725 POMERADO RD STE 203

POWAY, CA 92064-2058

Phone: (858) 673-3340

Fax: (858) 673-1075

After Hours Phone: (858)

673-3340

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

GRAHAM, STUART N , MD

Provider ID: 508717

Provider Gender: Male

License number: G70035

NPI: 1083680060

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Pomerado

Hospital

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

15611 POMERADO RD STE 300

POWAY, CA 92064-2437

Phone: (858) 924-1900

Fax: (858) 924-1949

After Hours Phone: (858)
924-1900

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R

Hours: M-SA 9AM-5PM

KHATTRI, SONAL, MD

Provider ID: 506565

Provider Gender: Female

License number: A105678

NPI: 1013997303

Provider English Spoken: Yes

Provider Language(s) Spoken:

Hindi

Cultural Competency: No

Hospital Affiliation: Pomerado

Hospital

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

15611 POMERADO RD FL 3

POWAY, CA 92064-2437

Phone: (858) 675-3170

Fax: (858) 675-0518

After Hours Phone: (858)

675-3170

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

LINDBACK, SARAH M

Provider ID: 161834

Provider Gender: Female

License number: A117823

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

NPI: 1427345487
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Pomerado
 Hospital, Scripps Memorial
 Hospital, Rady Childrens
 Hospital San Diego
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 15725 POMERADO RD STE 203
 POWAY, CA 92064-2058
 Phone: (858) 673-3340
 Fax: (858) 673-1075
 After Hours Phone: (858)
 673-3340
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 Accessibility: P, EB, IB, E, R
 Hours: M-SA 9AM-5PM

LOSTETTER, ADRIENNE L

Provider ID: 261797
 Provider Gender: Female
 License number: C54914
 NPI: 1881607984
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Sharp Mary Birch Hosp For
 Women And Newborns, Palomar
 Health Downtown Campus,
 Pomerado Hospital
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 15725 POMERADO RD STE 203
 POWAY, CA 92064-2058

Phone: (858) 673-3340
 Fax: (858) 673-1075
 After Hours Phone: (858)
 673-3340
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 Accessibility: P, EB, IB, E, R
 Hours: M-SA 9AM-5PM

MOREIRA, LUCILA K

Provider ID: 523761
 Provider Gender: Female
 License number: 20A15437
 NPI: 1104846567
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps
 Memorial Hospital Encinitas,
 Rady Childrens Hospital San
 Diego
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 15725 POMERADO RD STE 203
 POWAY, CA 92064-2058
 Phone: (858) 673-3340
 Fax: (858) 673-1075
 After Hours Phone: (858)
 673-3340
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 Accessibility: P, EB, IB, E, R
 Hours: M-SA 9AM-5PM

MORTIMER, DORI R

Provider ID: 230552

Provider Gender: Female
 License number: A75016
 NPI: 1417928417
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Palomar Health Downtown
 Campus, Sharp Mary Birch Hosp
 For Women And Newborns,
 Pomerado Hospital
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 15725 POMERADO RD STE 203
 POWAY, CA 92064-2058
 Phone: (858) 673-3340
 Fax: (858) 673-1075
 After Hours Phone: (858)
 673-3340
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 Accessibility: P, EB, IB, E, R
 Hours: M-SA 9AM-5PM

RAMGREN, AILEEN N

Provider ID: 397707
 Provider Gender: Female
 License number: 20A14418
 NPI: 1356785505
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 15725 POMERADO RD STE 203
 POWAY, CA 92064-2058

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Phone: (858) 673-3340

Fax:

After Hours Phone: (858)
673-3340

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R

Hours: M-SA 9AM-5PM

RENDLER, NATHAN

Provider ID: 30205

Provider Gender: Male

License number: G64231

NPI: 1275531337

Provider English Spoken: Yes

Provider Language(s) Spoken:

Hebrew, Spanish, Yiddish

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Rady
Childrens Hospital San Diego,
Pomerado Hospital

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

15525 POMERADO RD STE B1
1

POWAY, CA 92064-2425

Phone: (858) 487-8333

Fax: (858) 487-0856

After Hours Phone: (858)

487-8333

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

SHANMUGAM, CHERYL L , MD

Provider ID: 509248

Provider Gender: Female

License number: G86245

NPI: 1053387134

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Pomerado
Hospital

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
15611 POMERADO RD STE 300
POWAY, CA 92064-2437

Phone: (858) 675-3100

Fax: (858) 618-1523

After Hours Phone: (858)

675-3100

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

TAI, KUANGKAI

Provider ID: 351834

Provider Gender: Male

License number: A68063

NPI: 1396744066

Provider English Spoken: Yes

Provider Language(s) Spoken:

Chinese, Mandarin, Spanish

Cultural Competency: No

Hospital Affiliation: Pomerado
Hospital, Rady Childrens
Hospital San Diego

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

15525 POMERADO RD STE B1
POWAY, CA 92064-2425

Phone: (858) 487-8333

Fax: (858) 487-0856

After Hours Phone: (858)
484-4003

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R

Hours: M-SA 9AM-5PM

RAMONA

FAMILY PRACTICE

DASSOFF, DAVID S , MD

Provider ID: 323006

Provider Gender: Male

License number: G137536

NPI: 1063547420

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
211 13TH ST

RAMONA, CA 92065-2711

Phone: (760) 789-5160

Fax: (760) 788-5892

After Hours Phone: (760)

789-5160

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E

Hours: M-SA 9AM-5PM

HARDISON, CHARLES L

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Provider ID: 82228
Provider Gender: Male
License number: G70382
NPI: 1538475793
Provider English Spoken: Yes
Provider Language(s) Spoken: Russian, Spanish
Cultural Competency: No
Hospital Affiliation: Natividad Medical Center
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
211 13TH ST
RAMONA, CA 92065-2711
Phone: (760) 789-5160
Fax: (858) 613-2938
After Hours Phone: (760) 789-5160
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ *Accessibility:* P, EB, IB, E
Hours: M-SA 9AM-5PM

KASCH, JANINE

Provider ID: 78918
Provider Gender: Female
License number: 20A5832
NPI: 1871569087
Provider English Spoken: Yes
Provider Language(s) Spoken: German, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Rady Childrens Hospital San Diego, Pomerado Hospital
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
211 13TH ST
RAMONA, CA 92065-2711

Phone: (760) 789-5160
Fax: (760) 788-7983
After Hours Phone: (760) 789-5160
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ *Accessibility:* P, EB, IB, E
Hours: M-SA 9AM-5PM

MILLER, JERRY, MD

Provider ID: 247912
Provider Gender: Male
License number: A119340
NPI: 1871543199
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
211 13TH ST
RAMONA, CA 92065-2711
Phone: (760) 789-5160
Fax: (760) 788-5892
After Hours Phone: (760) 789-5160
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ *Accessibility:* P, EB, IB, E
Hours: M-SA 9AM-5PM

FQHC

NORTH COUNTY HEALTH SERVICES RAMONA,
Provider ID: 449438

Provider Gender:
License number:
NPI: 1245246917
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: IHP-NORTH COUNTY HEALTH SERVICES
220 ROTANZI ST
RAMONA, CA 92065-2583
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ *Accessibility:* P, EB, IB, E, R
Hours: M-F 8AM-5PM, SA 8AM-12PM

INTERNAL MEDICINE

JEFFERIS, LAUREN R

Provider ID: 449438
Provider Gender: Female
License number: A80674
NPI: 1346354776
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-NORTH COUNTY HEALTH SERVICES
220 ROTANZI ST
RAMONA, CA 92065-2583

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Phone: (760) 891-4667

Fax:

After Hours Phone: (760)
891-4667

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R

Hours: M-F 8AM-5PM, SA
8AM-12PM

YUNG, DORIS A

Provider ID: 449438

Provider Gender: Female

License number: A89893

NPI: 1730386863

Provider English Spoken: Yes

Provider Language(s) Spoken:

Chinese, Mandarin, Spanish

Cultural Competency: No

Hospital Affiliation: Scripps
Memorial Hospital Encinitas

Board Certified Specialty: No
IHP-NORTH COUNTY HEALTH
SERVICES

220 ROTANZI ST

RAMONA, CA 92065-2583

Phone: (760) 891-4667

Fax:

After Hours Phone: (760)
891-4667

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R

Hours: M-F 8AM-5PM, SA
8AM-12PM

SAN DIEGO

FAMILY PRACTICE

KUNIN-RIDA, TERI L

Provider ID: 556711

Provider Gender: Female

License number: G80071

NPI: 1265580112

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, Armenian, Spanish

Cultural Competency: No

Hospital Affiliation: Alvarado
Hosp Med Ctr, Sharp Mary Birch
Hosp For Women And

Newborns, Sharp Memorial
Hospital, Alvarado Hospital Llc

Board Certified Specialty: No
HEALTH EXCEL IPA INC
1032 BROADWAY

SAN DIEGO, CA 92101

Phone: (619) 795-5991

Fax: (619) 795-5992

After Hours Phone: (619)
795-5991

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

SAN DIEGO

CARDIOLOGY

NARAYANAN, MEENA R

Provider ID: 206363

Provider Gender: Female

License number: A113448

NPI: 1508170697

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi, Spanish

Cultural Competency: No

Hospital Affiliation: Sharp
Memorial Hospital, Sharp Chula
Vista Med Ctr

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: (619) 515-2560

Fax:

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

CARDIOVASCULAR DISEASE

BLUM, RICHARD I

Provider ID: 417937

Provider Gender: Male

License number: G53758

NPI: 1043310030

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2545

Fax:

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-TH 8AM-9PM, F
 8AM-5PM, SA 9AM-5PM

CHRISTOPHY, ANTONIO C

Provider ID: 417937
Provider Gender: Male
License number: 20A15088
NPI: 1871897678
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Persian, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital, Scripps Memorial
 Hospital
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619)
 515-2545
Website: www.fhcsd.org

Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-TH 8AM-9PM, F
 8AM-5PM, SA 9AM-5PM

GARIBYAN, VARTAN N

Provider ID: 417937
Provider Gender: Male
License number: 20A12504
NPI: 1790084143

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital, Scripps
 Mercy Hospital, Scripps Mercy
 Hospital Chula Vista, Scripps
 Green Hospital
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619)
 515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-TH 8AM-9PM, F
 8AM-5PM, SA 9AM-5PM

CERTIFIED NURSE PRACTITIONER

AQUINO, FELINO V

Provider ID: 418535
Provider Gender: Male
License number: NP22974
NPI: 1356684781
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Tagalog
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 OPERATION SAMAHAN
 9995 CARMEL MOUNTAIN RD
 STE B10 AND B11
 SAN DIEGO, CA 92129-2889

Phone: (844) 200-2426
Fax:
After Hours Phone: (844)
 200-2426
Website:
 www.operationsamahan.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M,TU,TH,F
 8:30AM-5:30PM, W 10AM-7PM,
 SA 9AM-5PM

AQUINO, FELINO V

Provider ID: 432308
Provider Gender: Male
License number: NP22974
NPI: 1356684781
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Tagalog
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 OPERATION SAMAHAN
 9855 ERMA RD STE 105
 SAN DIEGO, CA 92131-1007
Phone: (844) 200-2426

Fax:
After Hours Phone: (844)
 200-2426
Website:
 www.operationsamahan.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM

ARTS, SERENA C

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C. Directorio de proveedores de atención primaria

Provider ID: 403583
Provider Gender: Female
License number: NP10769
NPI: 1801881552
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-ST VINCENT DE PAUL
 VILLA
 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101-7638
Phone: (619) 233-8500
Fax:
After Hours Phone: (619)
 233-8500
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-F 8AM-5:30PM, SA
 9AM-5PM

BANUELOS, KAREN D
Provider ID: 206046
Provider Gender: Female
License number: NP95007883
NPI: 1629421839
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN DIEGO FAMILY CARE
 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111-6342
Phone: (858) 279-0925
Fax:
After Hours Phone: (858)
 279-0925

Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility: P, EB, IB, E, R,
 T, W
Hours: M-F 8:30AM-5:30PM, SA
 9AM-5PM

BELEN, NEZER B
Provider ID: 206363
Provider Gender: Male
License number: NP95009292
NPI: 1386120723
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2560
Fax:
After Hours Phone: (619)
 515-2560
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility: ME
Hours: M-SA 9AM-5PM

**BERNARDO-GREGORY, ELSIE
 S**
Provider ID: 418535
Provider Gender: Female
License number: NP15257
NPI: 1588808349
Provider English Spoken: Yes

Provider Language(s) Spoken:
 Tagalog
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 OPERATION SAMAHAN
 9995 CARMEL MOUNTAIN RD
 STE B10 AND B11
 SAN DIEGO, CA 92129-2889
Phone: (844) 200-2426
Fax:
After Hours Phone: (844)
 200-2426
Website:
 www.operationsamahan.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility:
Hours: M,TU,TH,F
 8:30AM-5:30PM, W 10AM-7PM,
 SA 9AM-5PM

BESTERFELDT, LYDIA
Provider ID: 482070
Provider Gender: Female
License number: NP95013060
NPI: 1265929442
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN DIEGO FAMILY CARE
 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111-6307
Phone: (858) 810-8700
Fax:
After Hours Phone: (858)
 810-8700
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes

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C. Directorio de proveedores de atención primaria

Min/Max Age: None

American Sign Language (ASL):
No

♿ *Accessibility:* P, EB, IB, E, R, W

Hours: M,W-F 8:30AM-5:30PM,
TU 8:30AM-8:30PM, SA
9AM-4PM

BURNS, DELLA E

Provider ID: 233597

Provider Gender: Female

License number: NP7413

NPI: 1871577023

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE
4290 POLK AVE

SAN DIEGO, CA 92105-1524

Phone: (619) 563-0507

Fax:

After Hours Phone: (619)

563-0507

Website: www.sdfamilycare.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

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

8AM-2PM

CHASE, AVA LOU C

Provider ID: 206353

Provider Gender: Female

License number: NP95000602

NPI: 1164496386

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2400

Fax:

After Hours Phone: (619)

515-2400

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* ME

Hours: M-SA 9AM-5PM

CHASE, AVA LOU C

Provider ID: 206360

Provider Gender: Female

License number: NP95000602

NPI: 1164496386

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* ME

Hours: M-SA 9AM-5PM

CONNER, PAMELA M

Provider ID: 417937

Provider Gender: Female

License number: NP18098

NPI: 1770558967

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Green Hospital

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2545

Fax:

After Hours Phone: (619)

515-2545

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-TH 8AM-9PM, F

8AM-5PM, SA 9AM-5PM

DACANAY-HERMAN, ROWENA S

Provider ID: 432308

Provider Gender: Female

License number: NP22378

NPI: 1144689175

Provider English Spoken: Yes

Provider Language(s) Spoken:

Tagalog

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

OPERATION SAMAHAN

9855 ERMA RD STE 105

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C. Directorio de proveedores de atención primaria

SAN DIEGO, CA 92131-1007
 Phone: (844) 200-2426
 Fax:
 After Hours Phone: (844) 200-2426
 Website:
 www.operationsamahan.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ☞ Accessibility:
 Hours: M-SA 9AM-5PM

DE LA NOVAL, BARBARA I
 Provider ID: 206046
 Provider Gender: Female
 License number: NP792725
 NPI: 1881149797
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-SAN DIEGO FAMILY CARE
 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111-6342
 Phone: (858) 279-0925
 Fax:
 After Hours Phone: (858) 279-0925
 Website: www.sdfamilycare.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ☞ Accessibility: P, EB, IB, E, R, T, W
 Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

DHARKAR SURBER, SAPNA A
 Provider ID: 185268

Provider Gender: Female
 License number: NP95013257
 NPI: 1538707765
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105-1608
 Phone: (619) 255-9155
 Fax:
 After Hours Phone: (619) 255-9155
 Website: www.lamaestra.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ☞ Accessibility: P, EB, IB, E, W
 Hours: M-F 8AM-5PM, SA 9AM-5PM

DOW, RAEHELLE L
 Provider ID: 482070
 Provider Gender: Female
 License number: NP15667
 NPI: 1184679789
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish, Vietnamese
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-SAN DIEGO FAMILY CARE
 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111-6307
 Phone: (858) 279-0925
 Fax:
 After Hours Phone: (858) 279-0925
 Website: www.sdfamilycare.org
 Email:

Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ☞ Accessibility: P, EB, IB, E, R, W
 Hours: M,W-F 8:30AM-5:30PM, TU 8:30AM-8:30PM, SA 9AM-4PM

ESTRELLA, SUE K
 Provider ID: 417101
 Provider Gender: Female
 License number: NP95005047
 NPI: 1083137541
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Tagalog
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 OPERATION SAMAHAN
 10737 CAMINO RUIZ STE 235
 SAN DIEGO, CA 92126-2375
 Phone: (844) 200-2426
 Fax:
 After Hours Phone: (844) 200-2426
 Website:
 www.operationsamahan.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ☞ Accessibility: W
 Hours: M-F 8AM-4:30PM, SA 9AM-5PM

EVERHART, ANNE MICHELLE G
 Provider ID: 432308
 Provider Gender: Female
 License number: NP95002876
 NPI: 1821464835

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C. Directorio de proveedores de atención primaria

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
OPERATION SAMAHAN
 9855 ERMA RD STE 105
 SAN DIEGO, CA 92131-1007
Phone: (844) 200-2426
Fax:
After Hours Phone: (844)
 200-2426
Website:
 www.operationsamahan.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM

FERRARI, GINA E

Provider ID: 482070
Provider Gender: Female
License number: NP95016072
NPI: 1922639301
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE
 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111-6307
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858)
 810-8700
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No

Accessibility: P, EB, IB, E, R,
 W
Hours: M,W-F 8:30AM-5:30PM,
 TU 8:30AM-8:30PM, SA
 9AM-4PM

GARCIA, JOHNNY

Provider ID: 206363
Provider Gender: Male
License number: NP95007000
NPI: 1932622156
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
**FAMILY HEALTH CENTERS OF
 SAN DIEGO**
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2560
Fax:
After Hours Phone: (619)
 515-2560
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility: ME
Hours: M-SA 9AM-5PM

GOLDFINGER, SARAH N

Provider ID: 206360
Provider Gender: Female
License number: NP95011313
NPI: 1134686744
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF

SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility: ME
Hours: M-SA 9AM-5PM

GRAHAM, DEBRA J

Provider ID: 451167
Provider Gender: Female
License number: NP15657
NPI: 1790757623
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
**IHP-SAN YSIDRO HEALTH
 CENTER**
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility: P, EB, IB, E, R,
 T, W
Hours: M-F 8AM-5PM, SA
 8AM-4PM

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C. Directorio de proveedores de atención primaria

GREER, TRACY P

Provider ID: 206362
Provider Gender: Female
License number: NP95002226
NPI: 1891101754
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619)
515-2424
Website: www.fhcscd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* ME
Hours: M-SA 9AM-5PM

HARRINGTON, BARBARA LORRAINE R

Provider ID: 185268
Provider Gender: Female
License number: NP17008
NPI: 1659579134
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

Phone: (619) 255-9155
Fax:
After Hours Phone: (619)
255-9155
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* P, EB, IB, E, W
Hours: M-F 8AM-5PM, SA
9AM-5PM

HA, THU M

Provider ID: 206046
Provider Gender: Female
License number: NP95010517
NPI: 1346443983
Provider English Spoken: Yes
Provider Language(s) Spoken:
Vietnamese
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE
6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342
Phone: (858) 279-0925
Fax:
After Hours Phone: (858)
279-0925
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* P, EB, IB, E, R,
T, W
Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

HA, THU M

Provider ID: 482070

Provider Gender: Female
License number: NP95010517
NPI: 1346443983
Provider English Spoken: Yes
Provider Language(s) Spoken:
Vietnamese
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE
7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307
Phone: (858) 279-0925
Fax:
After Hours Phone: (858)
279-0925
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* P, EB, IB, E, R,
W
Hours: M,W-F 8:30AM-5:30PM,
TU 8:30AM-8:30PM, SA
9AM-4PM

HILLIARD, THESALONICA P

Provider ID: 417101
Provider Gender: Female
License number: NP95010585
NPI: 1861956724
Provider English Spoken: Yes
Provider Language(s) Spoken:
Tagalog
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126-2375

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Phone: (844) 200-2426

Fax:

After Hours Phone: (844)
200-2426

Website:

www.operationsamahan.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-F 8AM-4:30PM, SA
9AM-5PM

HOANG, CHI Q

Provider ID: 482070

Provider Gender: Female

License number: NP95004600

NPI: 1902350994

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE

7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307

Phone: (858) 279-0925

Fax:

After Hours Phone: (858)
279-0925

Website: www.sdfamilycare.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,
W

Hours: M,W-F 8:30AM-5:30PM,
TU 8:30AM-8:30PM, SA
9AM-4PM

HOGAN, ROSELYNN JOY S

Provider ID: 206360

Provider Gender: Female

License number: NP17852

NPI: 1205019510

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

HOGAN, ROSELYNN JOY S

Provider ID: 206362

Provider Gender: Female

License number: NP17852

NPI: 1205019510

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

3544 30TH ST
SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax:

After Hours Phone: (619)
515-2424

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

INSTONE, SUSAN L

Provider ID: 233532

Provider Gender: Female

License number: NP4858

NPI: 1710223268

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE
4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105-1690

Phone: (619) 280-2058

Fax:

After Hours Phone: (619)
280-2058

Website: www.sdfamilycare.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/22

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, W

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

INSTONE, SUSAN L

Provider ID: 482070

Provider Gender: Female

License number: NP4858

NPI: 1710223268

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

<p><i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No IHP-SAN DIEGO FAMILY CARE 7011 LINDA VISTA RD SAN DIEGO, CA 92111-6307 <i>Phone:</i> (858) 279-0925 <i>Fax:</i> <i>After Hours Phone:</i> (858) 279-0925 <i>Website:</i> www.sdfamilycare.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> P, EB, IB, E, R, W <i>Hours:</i> M,W-F 8:30AM-5:30PM, TU 8:30AM-8:30PM, SA 9AM-4PM</p>	<p>No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 8AM-2PM</p> <p>KHAN, MATTHEW P <i>Provider ID:</i> 206353 <i>Provider Gender:</i> Male <i>License number:</i> NP17838 <i>NPI:</i> 1942456124 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 <i>Phone:</i> (619) 515-2400 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2400 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM</p>	<p>SAN DIEGO, CA 92105-2026 <i>Phone:</i> (619) 515-2426 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2426 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-F 8:30AM-5:30PM, SA 9AM-5PM</p>
<p>JOHNSON, SHAWNA AKIKO H <i>Provider ID:</i> 233597 <i>Provider Gender:</i> Female <i>License number:</i> NP95002518 <i>NPI:</i> 1922237809 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No IHP-SAN DIEGO FAMILY CARE 4290 POLK AVE SAN DIEGO, CA 92105-1524 <i>Phone:</i> (619) 563-0507 <i>Fax:</i> <i>After Hours Phone:</i> (619) 563-0507 <i>Website:</i> www.sdfamilycare.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i></p>	<p>KHAN, MATTHEW P <i>Provider ID:</i> 417987 <i>Provider Gender:</i> Male <i>License number:</i> NP17838 <i>NPI:</i> 1942456124 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE</p>	<p>KI, TRISH H <i>Provider ID:</i> 206046 <i>Provider Gender:</i> Female <i>License number:</i> NP23847 <i>NPI:</i> 1376840199 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Vietnamese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No IHP-SAN DIEGO FAMILY CARE 6973 LINDA VISTA RD SAN DIEGO, CA 92111-6342 <i>Phone:</i> (858) 279-0925 <i>Fax:</i> <i>After Hours Phone:</i> (858) 279-0925 <i>Website:</i> www.sdfamilycare.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> P, EB, IB, E, R, T, W <i>Hours:</i> M-F 8:30AM-5:30PM, SA 9AM-5PM</p>
		<p>KI, TRISH H</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Provider ID: 482070
Provider Gender: Female
License number: NP23847
NPI: 1376840199
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE
7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307
Phone: (858) 810-8700
Fax:
After Hours Phone: (858)
810-8700
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, W
Hours: M,W-F 8:30AM-5:30PM,
TU 8:30AM-8:30PM, SA
9AM-4PM

KLOBERDANZ, KELSEY L
Provider ID: 417937
Provider Gender: Female
License number: NP95005293
NPI: 1235672502
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143

Phone: (619) 515-2545
Fax:
After Hours Phone: (619)
515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-TH 8AM-9PM, F
8AM-5PM, SA 9AM-5PM

LIEBER, CAROL L
Provider ID: 517403
Provider Gender: Female
License number: NP20849
NPI: 1487889846
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER
316 25TH ST
SAN DIEGO, CA 92102-3016
Phone: (619) 238-5551
Fax:
After Hours Phone: (619)
238-5551
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/120
American Sign Language (ASL): No
Accessibility:
Hours: M-F 8AM-5PM, SA
9AM-5PM

LIM, IMELDA B
Provider ID: 417101
Provider Gender: Female

License number: NP95000203
NPI: 1093130395
Provider English Spoken: Yes
Provider Language(s) Spoken: Tagalog
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126-2375
Phone: (844) 200-2426
Fax:
After Hours Phone: (844)
200-2426
Website:
www.operationsamahan.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-4:30PM, SA
9AM-5PM

LOVE, VICKI L
Provider ID: 206363
Provider Gender: Female
License number: NP17362
NPI: 1699759134
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2560
Fax:
After Hours Phone: (619)
515-2560
Website: www.fhcsd.org

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* ME
Hours: M-SA 9AM-5PM

MACARIOLA, AMPARO E

Provider ID: 417101
Provider Gender: Female
License number: NP95001709
NPI: 1932505401
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 OPERATION SAMAHAN
 10737 CAMINO RUIZ STE 235
 SAN DIEGO, CA 92126-2375
Phone: (800) 200-2426

Fax:
After Hours Phone: (800)
 200-2426
Website:
 www.operationsamahan.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-F 8AM-4:30PM, SA
 9AM-5PM

MACARIOLA, AMPARO E

Provider ID: 418535
Provider Gender: Female
License number: NP95001709
NPI: 1932505401
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish, Tagalog

Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 OPERATION SAMAHAN
 9995 CARMEL MOUNTAIN RD
 STE B10 AND B11
 SAN DIEGO, CA 92129-2889
Phone: (844) 200-2426

Fax:
After Hours Phone: (844)
 200-2426
Website:
 www.operationsamahan.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M,TU,TH,F
 8:30AM-5:30PM, W 10AM-7PM,
 SA 9AM-5PM

MACARIOLA, AMPARO E

Provider ID: 432308
Provider Gender: Female
License number: NP95001709
NPI: 1932505401
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 OPERATION SAMAHAN
 9855 ERMA RD STE 105
 SAN DIEGO, CA 92131-1007
Phone: (844) 200-2426

Fax:
After Hours Phone: (844)
 200-2426
Website:
 www.operationsamahan.org
Email:
Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM

MELTZER, VIRGINIA N

Provider ID: 233532
Provider Gender: Female
License number: NP95015948
NPI: 1821684390
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Board Certified Specialty: No
 IHP-SAN DIEGO FAMILY CARE
 4305 UNIVERSITY AVE STE
 150
 SAN DIEGO, CA 92105-1690
Phone: (619) 280-2058

Fax:
After Hours Phone: (619)
 280-2058
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/22
American Sign Language (ASL):
 No
 ☯ *Accessibility:* P, EB, IB, E, W
Hours: M-F 8AM-5PM, SA
 8AM-2PM

MILTON, JILL F

Provider ID: 185268
Provider Gender: Female
License number: NP13612
NPI: 1598757270
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation:

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C. Directorio de proveedores de atención primaria

Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608
Phone: (619) 255-9155

Fax:

After Hours Phone: (619)
255-9155

Website: www.lamaestra.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ *Accessibility:* P, EB, IB, E, W
Hours: M-F 8AM-5PM, SA
9AM-5PM

NEVAREZ, IRENE

Provider ID: 185268

Provider Gender: Female

License number: NP95009891

NPI: 1003166646

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr

Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608
Phone: (619) 564-8765

Fax:

After Hours Phone: (619)
564-8765

Website: www.lamaestra.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ *Accessibility:* P, EB, IB, E, W

Hours: M-F 8AM-5PM, SA
9AM-5PM

NOCEDA, ANA B

Provider ID: 233532

Provider Gender: Female

License number: NP19505

NPI: 1386971760

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego

Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE
4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105-1690

Phone: (619) 280-2058

Fax:

After Hours Phone: (619)
280-2058

Website: www.sdfamilycare.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/22

American Sign Language (ASL):
No

♿ *Accessibility:* P, EB, IB, E, W
Hours: M-F 8AM-5PM, SA
8AM-2PM

NOCEDA, ANA B

Provider ID: 482070

Provider Gender: Female

License number: NP19505

NPI: 1386971760

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego

Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE
7011 LINDA VISTA RD

SAN DIEGO, CA 92111-6307

Phone: (858) 810-8700

Fax:

After Hours Phone: (858)
810-8700

Website: www.sdfamilycare.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ *Accessibility:* P, EB, IB, E, R,
W

Hours: M,W-F 8:30AM-5:30PM,
TU 8:30AM-8:30PM, SA
9AM-4PM

OCAMPO, ELAINE R

Provider ID: 206046

Provider Gender: Female

License number: NP95003427

NPI: 1063856805

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE
6973 LINDA VISTA RD

SAN DIEGO, CA 92111-6342
Phone: (858) 279-0925

Fax:

After Hours Phone: (858)
279-0925

Website: www.sdfamilycare.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ *Accessibility:* P, EB, IB, E, R,
T, W

Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

OCAMPO, ELAINE R

Provider ID: 482070
Provider Gender: Female
License number: NP95003427
NPI: 1063856805
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE
7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307
Phone: (858) 279-0925

Fax:
After Hours Phone: (858)
279-0925
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
W
Hours: M,W-F 8:30AM-5:30PM,
TU 8:30AM-8:30PM, SA
9AM-4PM

ORPILLA, IMELDA M

Provider ID: 417101
Provider Gender: Female
License number: NP95003211
NPI: 1790785988
Provider English Spoken: Yes
Provider Language(s) Spoken:
Tagalog
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126-2375

Phone: (844) 200-2426
Fax:
After Hours Phone: (844)
200-2426
Website:
www.operationsamahan.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-4:30PM, SA
9AM-5PM

ORPILLA, IMELDA M

Provider ID: 418535
Provider Gender: Female
License number: NP95003211
NPI: 1790785988
Provider English Spoken: Yes
Provider Language(s) Spoken:
Tagalog
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
OPERATION SAMAHAN
9995 CARMEL MOUNTAIN RD
STE B10 AND B11
SAN DIEGO, CA 92129-2889
Phone: (844) 200-2426
Fax:
After Hours Phone: (844)
200-2426
Website:
www.operationsamahan.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M,TU,TH,F
8:30AM-5:30PM, W 10AM-7PM,
SA 9AM-5PM

OWEN, MICHAEL C

Provider ID: 206362
Provider Gender: Female
License number: NP95001492
NPI: 1073869145
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424

Fax:
After Hours Phone: (619)
515-2424
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

PATEL, KELLY M

Provider ID: 402851
Provider Gender: Female
License number: NP95004735
NPI: 1033493747
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Phone: (619) 515-2444

Fax:

After Hours Phone: (619)
515-2444

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

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

PATIAG, DANIEL B

Provider ID: 206046

Provider Gender: Male

License number: NP95012511

NPI: 1073169769

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE
6973 LINDA VISTA RD

SAN DIEGO, CA 92111-6342

Phone: (858) 279-0925

Fax:

After Hours Phone: (858)
279-0925

Website: www.sdfamilycare.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,
T, W

Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

PATIAG, DANIEL B

Provider ID: 482070

Provider Gender: Male

License number: NP95012511

NPI: 1073169769

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE

7011 LINDA VISTA RD

SAN DIEGO, CA 92111-6307

Phone: (858) 810-8700

Fax:

After Hours Phone: (858)
810-8700

Website: www.sdfamilycare.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,
W

Hours: M,W-F 8:30AM-5:30PM,
TU 8:30AM-8:30PM, SA
9AM-4PM

POLHEBER, AMELIA S

Provider ID: 233597

Provider Gender: Female

License number: NP95002509

NPI: 1780816082

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE

4290 POLK AVE

SAN DIEGO, CA 92105-1524

Phone: (619) 563-0507

Fax:

After Hours Phone: (619)
563-0507

Website: www.sdfamilycare.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

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

QUINTO, CINDY R

Provider ID: 233532

Provider Gender: Female

License number: NP16433

NPI: 1902810377

Provider English Spoken: Yes

Provider Language(s) Spoken:

French, Lao, Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105-1690

Phone: (619) 280-2058

Fax:

After Hours Phone: (619)
280-2058

Website: www.sdfamilycare.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/22

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, W

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

QUINTO, CINDY R

Provider ID: 482070

Provider Gender: Female

License number: NP16433

NPI: 1902810377

Provider English Spoken: Yes

Provider Language(s) Spoken:

French, Lao, Spanish

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN DIEGO FAMILY CARE
 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111-6307
Phone: (858) 279-0925

Fax:
After Hours Phone: (858)
 279-0925
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* P, EB, IB, E, R,
 W
Hours: M,W-F 8:30AM-5:30PM,
 TU 8:30AM-8:30PM, SA
 9AM-4PM

RAMOS-HAGGAN, ANNETTE M

Provider ID: 207382
Provider Gender: Female
License number: NP95002918
NPI: 1285091991
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Chula
 Vista Med Ctr
Board Certified Specialty: No
 IHP-SAN DIEGO AMERICAN
 INDIAN HEALTH CENTER
 2630 1ST AVE
 SAN DIEGO, CA 92103-6599
Phone: (619) 234-0505
Fax: (619) 234-2158
After Hours Phone: (619)
 234-0505
Website: www.sdaihc.org
Email:
Medi-Cal Open Panel: Yes

Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
 9AM-5PM

REID, EMILY

Provider ID: 185268
Provider Gender: Female
License number: NP95002766
NPI: 1083081467
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105-1608
Phone: (619) 255-9155
Fax:
After Hours Phone: (619)
 255-9155
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* P, EB, IB, E, W
Hours: M-F 8AM-5PM, SA
 9AM-5PM

ROGERS, TANYA L

Provider ID: 206353
Provider Gender: Female
License number: NP95004443
NPI: 1558710038
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF

SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619)
 515-2400
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* ME
Hours: M-SA 9AM-5PM

ROGERS, TANYA L

Provider ID: 417987
Provider Gender: Female
License number: NP95004443
NPI: 1558710038
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
Phone: (619) 515-2426
Fax:
After Hours Phone: (619)
 515-2426
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-F 8:30AM-5:30PM, SA
 9AM-5PM

RUTH, MARION A

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Provider ID: 207382
Provider Gender: Female
License number: NP95006781
NPI: 1740789288
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN DIEGO AMERICAN
INDIAN HEALTH CENTER
2630 1ST AVE
SAN DIEGO, CA 92103-6599
Phone: (619) 234-2158
Fax: (619) 234-0505
After Hours Phone: (619)
234-2158
Website: www.sdaihc.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM

SABIN, NANCY J

Provider ID: 206046
Provider Gender: Female
License number: NP4668
NPI: 1285732586
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE
6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342
Phone: (858) 279-0925
Fax:
After Hours Phone: (858)
279-0925
Website: www.sdfamilycare.org

Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: P, EB, IB, E, R,
T, W
Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

SABIN, NANCY J

Provider ID: 482070
Provider Gender: Female
License number: NP4668
NPI: 1285732586
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE
7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307
Phone: (858) 810-8700
Fax:
After Hours Phone: (858)
810-8700
Website: www.sdfamilycare.org

Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: P, EB, IB, E, R,
W
Hours: M,W-F 8:30AM-5:30PM,
TU 8:30AM-8:30PM, SA
9AM-4PM

SANTANGELO, JOANNE

Provider ID: 206046
Provider Gender: Female
License number: NP2390
NPI: 1619370475
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE
6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342
Phone: (858) 279-0925
Fax:
After Hours Phone: (858)
279-0925
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: P, EB, IB, E, R,
T, W
Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

SANTANGELO, JOANNE

Provider ID: 482070
Provider Gender: Female
License number: NP2390
NPI: 1619370475
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE
7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307
Phone: (858) 810-8700
Fax:
After Hours Phone: (858)
810-8700
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No

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C. Directorio de proveedores de atención primaria

♿ *Accessibility:* P, EB, IB, E, R, W
Hours: M,W-F 8:30AM-5:30PM, TU 8:30AM-8:30PM, SA 9AM-4PM

SATTERWHITE, MAURINE C

Provider ID: 206046
Provider Gender: Female
License number: NP7022
NPI: 1225012842
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE
6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342
Phone: (858) 279-0925
Fax:
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ *Accessibility:* P, EB, IB, E, R, T, W
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

SATTERWHITE, MAURINE C

Provider ID: 482070
Provider Gender: Female
License number: NP7022
NPI: 1225012842
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:

Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE
7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307
Phone: (858) 810-8700
Fax:
After Hours Phone: (858) 810-8700
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ *Accessibility:* P, EB, IB, E, R, W
Hours: M,W-F 8:30AM-5:30PM, TU 8:30AM-8:30PM, SA 9AM-4PM

SEBRING, JAN A

Provider ID: 417429
Provider Gender: Female
License number: NP10906
NPI: 1295750339
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1550 BROADWAY # 2
SAN DIEGO, CA 92101-5713
Phone: (619) 515-2525
Fax:
After Hours Phone: (619) 515-2525
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ *Accessibility:*
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

SEBRING, JAN A

Provider ID: 417429
Provider Gender: Female
License number: RN486421
NPI: 1295750339
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1550 BROADWAY # 2
SAN DIEGO, CA 92101-5713
Phone: (619) 515-2525
Fax:
After Hours Phone: (619) 515-2525
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ *Accessibility:*
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

SMITH, SHELLY J

Provider ID: 206046
Provider Gender: Female
License number: NP95006538
NPI: 1831626837
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE
6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Phone: (858) 279-0925
Fax:
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T, W
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

SMITH, SHELLY J

Provider ID: 482070
Provider Gender: Female
License number: NP95006538
NPI: 1831626837
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE
7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307
Phone: (858) 810-8700
Fax:
After Hours Phone: (858) 810-8700
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, W
Hours: M,W-F 8:30AM-5:30PM, TU 8:30AM-8:30PM, SA 9AM-4PM

SOTO, ROBIN J

Provider ID: 206360
Provider Gender: Female
License number: NP11778
NPI: 1487688099
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

SOTO, ROBIN J

Provider ID: 356145
Provider Gender: Female
License number: NP11778
NPI: 1487688099
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
2391 ISLAND AVE
SAN DIEGO, CA 92102-2941

Phone: (619) 515-2435
Fax:
After Hours Phone: (619) 515-2435
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM

STONE, JENINE Y

Provider ID: 482070
Provider Gender: Female
License number: NP95002748
NPI: 1801262332
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE
7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307
Phone: (858) 279-0925
Fax:
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, W
Hours: M,W-F 8:30AM-5:30PM, TU 8:30AM-8:30PM, SA 9AM-4PM

TAYLOR, KAYLA L

Provider ID: 206362

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C. Directorio de proveedores de atención primaria

Provider Gender: Female
License number: NP95006792
NPI: 1730604414
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619)
 515-2424
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

TAYLOR, KAYLA L
Provider ID: 417429
Provider Gender: Female
License number: NP95006792
NPI: 1730604414
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY # 2
 SAN DIEGO, CA 92101-5713
Phone: (619) 515-2525
Fax:
After Hours Phone: (619)
 515-2525
Website: www.fhcsd.org
Email:

Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-F 8:30AM-5:30PM, SA
 9AM-5PM

TODD, MIKAYLA S
Provider ID: 517998
Provider Gender: Female
License number: NP95005999
NPI: 1316478092
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 4690 EL CAJON BLVD
 SAN DIEGO, CA 92115-4403
Phone: (619) 662-4100
Fax:

After Hours Phone: (619)
 662-4100
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/120
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM

TRAN, KELLY T
Provider ID: 206360
Provider Gender: Female
License number: NP95003689
NPI: 1255799276
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Vietnamese
Cultural Competency: No

Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

TUEROS, VICTORIA S
Provider ID: 206360
Provider Gender: Female
License number: NP2286
NPI: 1598989261
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
♿ Accessibility: ME

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Hours: M-SA 9AM-5PM

VELASQUEZ, FERNANDO

Provider ID: 206360
 Provider Gender: Male
 License number: NP95011254
 NPI: 1386195535
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessability: ME
 Hours: M-SA 9AM-5PM

VELASQUEZ, FERNANDO

Provider ID: 356145
 Provider Gender: Male
 License number: NP95011254
 NPI: 1386195535
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 2391 ISLAND AVE
 SAN DIEGO, CA 92102-2941

Phone: (619) 515-2435
 Fax:
 After Hours Phone: (619) 515-2435
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessability: P, EB, IB, E, R, T, ME
 Hours: M-SA 9AM-5PM

VELASQUEZ, FERNANDO

Provider ID: 419529
 Provider Gender: Male
 License number: NP95011254
 NPI: 1386195535
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 2325 COMMERCIAL ST STE 1400
 SAN DIEGO, CA 92113-1195
 Phone: (619) 515-2422
 Fax:
 After Hours Phone: (619) 515-2422
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessability:
 Hours: M-F 8AM-5PM, SA 9AM-5PM

WALSH, DEBORAH A

Provider ID: 417782
 Provider Gender: Female
 License number: NP95003061
 NPI: 1255574612
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2430
 Fax:
 After Hours Phone: (619) 515-2430
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessability:
 Hours: M-F 8AM-5PM, SA 9AM-5PM

WALSH, DEBORAH A

Provider ID: 419167
 Provider Gender: Female
 License number: NP95003061
 NPI: 1255574612
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:
 After Hours Phone: (619) 515-2520

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C. Directorio de proveedores de atención primaria

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: IB, E, R

Hours: M-F 8AM-5PM, SA
9AM-5PM

WEICKERT, MARIA T

Provider ID: 206353

Provider Gender: Female

License number: NP95010814

NPI: 1841758984

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2400

Fax:

After Hours Phone: (619)

515-2400

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

WEICKERT, MARIA T

Provider ID: 417429

Provider Gender: Female

License number: NP95010814

NPI: 1841758984

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

1550 BROADWAY # 2

SAN DIEGO, CA 92101-5713

Phone: (619) 515-2525

Fax:

After Hours Phone: (619)

515-2525

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

WESTON, TIFFANIE

Provider ID: 206360

Provider Gender: Female

License number: NP95011458

NPI: 1154703718

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

WILLIAMS, BREAHA A

Provider ID: 185268

Provider Gender: Female

License number: NP95001840

NPI: 1063884864

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

LA MAESTRA FAMILY CLINIC

4060 FAIRMOUNT AVE

SAN DIEGO, CA 92105-1608

Phone: (619) 255-9155

Fax:

After Hours Phone: (619)

255-9155

Website: www.lamaestra.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, W

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

9AM-5PM

WOLF, CELIA C

Provider ID: 417937

Provider Gender: Female

License number: NP95001899

NPI: 1245635564

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Phone: (619) 515-2545

Fax:

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-TH 8AM-9PM, F
8AM-5PM, SA 9AM-5PM

CERTIFIED REGISTERED NURSE MIDWIFE

GEPSTEIN, YANA

Provider ID: 402851

Provider Gender: Female

License number: NM1662

NPI: 1396956512

Provider English Spoken: Yes

Provider Language(s) Spoken:
Hebrew

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2444

Fax:

After Hours Phone: (619)

515-2444

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

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

WINHOVEN, JUDITH A

Provider ID: 214492

Provider Gender: Female

License number: NM1155

NPI: 1619986460

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
IHP-IMPERIAL BEACH HEALTH
CENTER

1016 OUTER RD

SAN DIEGO, CA 92154-1351

Phone: (619) 429-3733

Fax:

After Hours Phone: (619)

429-3733

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, IB, E, R, T, W
Hours: M,F 8AM-5PM, TU-TH
8AM-8PM, SA 9AM-5PM

CHIROPRACTOR

ASSADIAN, MEHRAK S

Provider ID: 451167

Provider Gender: Female

License number: DC27523

NPI: 1295278281

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER

950 S EUCLID AVE

SAN DIEGO, CA 92114-6201

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)
662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,
T, W

Hours: M-F 8AM-5PM, SA
8AM-4PM

KAMSI, ALEX

Provider ID: 185268

Provider Gender: Male

License number: DC28966

NPI: 1851405955

Provider English Spoken: Yes

Provider Language(s) Spoken:
Farsi, Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC

4060 FAIRMOUNT AVE

SAN DIEGO, CA 92105-1608

Phone: (619) 255-9155

Fax:

After Hours Phone: (619)

255-9155

Website: www.lamaestra.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, W
Hours: M-F 8AM-5PM, SA
9AM-5PM

KAZEM, AHMAD N

Provider ID: 227409

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Provider Gender: Male
License number: DC33300
NPI: 1003296096
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM

KENNA, AARON A

Provider ID: 418535
Provider Gender: Male
License number: DC32051
NPI: 1457629495
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
OPERATION SAMAHAN
9995 CARMEL MOUNTAIN RD
STE B10 AND B11
SAN DIEGO, CA 92129-2889
Phone: (844) 200-2426
Fax:
After Hours Phone: (844) 200-2426

Website:
www.operationsamahan.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M,TU,TH,F
8:30AM-5:30PM, W 10AM-7PM,
SA 9AM-5PM

LOVERN, JENNIFER K

Provider ID: 418535
Provider Gender: Female
License number: DC29074
NPI: 1235469396
Provider English Spoken: Yes
Provider Language(s) Spoken: Italian
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
OPERATION SAMAHAN
9995 CARMEL MOUNTAIN RD
STE B10 AND B11
SAN DIEGO, CA 92129-2889
Phone: (844) 200-2426
Fax:
After Hours Phone: (844) 200-2426
Website:
www.operationsamahan.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M,TU,TH,F
8:30AM-5:30PM, W 10AM-7PM,
SA 9AM-5PM

PAGE, BIANCA M

Provider ID: 417937

Provider Gender: Female
License number: DC33688
NPI: 1649787607
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-TH 8AM-9PM, F
8AM-5PM, SA 9AM-5PM

ROJAS, RICHARD J

Provider ID: 417937
Provider Gender: Male
License number: DC31024
NPI: 1538318811
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org

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C. Directorio de proveedores de atención primaria

Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-TH 8AM-9PM, F
 8AM-5PM, SA 9AM-5PM

SOSA, DAVID S

Provider ID: 206363
Provider Gender: Male
License number: DC33150
NPI: 1013308675
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2560
Fax:
After Hours Phone: (619)
 515-2560
Website: www.fhcsd.org

Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

TAGHIZADEH, MAJID

Provider ID: 417937
Provider Gender: Male
License number: DC30121
NPI: 1750590600
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Farsi, Turkish
Cultural Competency: No

Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:

After Hours Phone: (619)
 515-2545

Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-TH 8AM-9PM, F
 8AM-5PM, SA 9AM-5PM

CLINIC OUTPATIENT

OPERATION SAMAHAN RANCHO PENASQUITOS,

Provider ID: 418535
Provider Gender:
License number: 550002478
NPI: 1699216622
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
 OPERATION SAMAHAN
 9995 CARMEL MOUNTAIN RD
 STE B10 AND B11
 SAN DIEGO, CA 92129-2889
Phone: (844) 200-2426
Fax: (858) 695-9074
After Hours Phone: (844)
 200-2426
Website:
 www.operationsamahan.org
Email:
Medi-Cal Open Panel: Yes

Min/Max Age: None
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M,TU,TH,F
 8:30AM-5:30PM, W 10AM-7PM,
 SA 9AM-5PM

OPERATION SAMAHAN RANCHO PENASQUITOS,

Provider ID: 418535
Provider Gender:
License number: 550003857
NPI: 1699216622
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
 OPERATION SAMAHAN

9995 CARMEL MOUNTAIN RD
 STE B10 AND B11
 SAN DIEGO, CA 92129-2889
Phone: (844) 200-2426
Fax: (858) 695-9074
After Hours Phone: (844)
 200-2426
Website:

www.operationsamahan.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M,TU,TH,F
 8:30AM-5:30PM, W 10AM-7PM,
 SA 9AM-5PM

DERMATOLOGY

BURROWS, WILLIAM M

Provider ID: 417937
Provider Gender: Male
License number: G16236

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C. Directorio de proveedores de atención primaria

NPI: 1639199292
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps
 Green Hospital, Scripps Mercy
 Hospital
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545

Fax:
 After Hours Phone: (619)
 515-2545
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: ME
 Hours: M-TH 8AM-9PM, F
 8AM-5PM, SA 9AM-5PM

CARTER, NATASHA F

Provider ID: 206363
 Provider Gender: Female
 License number: A140912
 NPI: 1033539184
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715

Phone: (619) 515-2560
 Fax:
 After Hours Phone: (619)
 515-2560
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: ME
 Hours: M-SA 9AM-5PM

ENDOCRINOLOGY METABOLISM DIABETES

AHMAD, AAKIF

Provider ID: 206360
 Provider Gender: Male
 License number: 20A12732
 NPI: 1720308331
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps
 Memorial Hospital, Scripps
 Green Hospital
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619)
 515-2300
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: ME
 Hours: M-SA 9AM-5PM

CARRILLO, MARITZA E

Provider ID: 206360
 Provider Gender: Female
 License number: A163183
 NPI: 1649628587
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2300

Fax:
 After Hours Phone: (619)
 515-2300
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: ME
 Hours: M-SA 9AM-5PM

CHANG, AMY S

Provider ID: 206360
 Provider Gender: Female
 License number: A93385
 NPI: 1750568911
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps
 Memorial Hospital, Scripps
 Memorial Hospital Encinitas,
 Saddleback Memorial Med Ctr,
 Scripps Green Hospital
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE

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C. Directorio de proveedores de atención primaria

SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: ME
 Hours: M-SA 9AM-5PM

HARRIS, SAMANTHA R

Provider ID: 206360
 Provider Gender: Female
 License number: A120043
 NPI: 1720305436
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: ME
 Hours: M-SA 9AM-5PM

HOSEIN, NADEEN

Provider ID: 417937
 Provider Gender: Female
 License number: A113255
 NPI: 1912051715
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545

Fax:
 After Hours Phone: (619) 515-2545
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM

LEVINE, MATTHEW J

Provider ID: 206360
 Provider Gender: Male
 License number: A77126
 NPI: 1801994231
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Green Hospital, Scripps Memorial Hospital, Ucsd Medical Ctr
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: ME
 Hours: M-SA 9AM-5PM

LORENZO, PATRICIA C

Provider ID: 206360
 Provider Gender: Female
 License number: A129599
 NPI: 1487913315
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Green Hospital, Scripps Memorial Hospital
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: ME
 Hours: M-SA 9AM-5PM

MARX, CHRISTOPHER W

Provider ID: 206360
 Provider Gender: Male

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C. Directorio de proveedores de atención primaria

License number: G58195
NPI: 1811958929
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Green Hospital, Scripps
Memorial Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300

Fax:
After Hours Phone: (619)
515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

MCCALLUM, JAMES D

Provider ID: 206360
Provider Gender: Male
License number: A55708
NPI: 1609838994
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Rady
Childrens Hospital San Diego,
Scripps Green Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

NAGELBERG, JODI B

Provider ID: 206360
Provider Gender: Female
License number: A146838
NPI: 1720474141
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300

Fax:
After Hours Phone: (619)
515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

PHILIS-TSIMIKAS, ATHENA

Provider ID: 206360
Provider Gender: Female
License number: A50477
NPI: 1922105964

Provider English Spoken: Yes
Provider Language(s) Spoken:
Greek
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas,
Scripps Green Hospital, Scripps
Memorial Hospital, Scripps
Mercy Hospital, Scripps Mercy
Hospital Chula Vista
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300

Fax:
After Hours Phone: (619)
515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

REDDY, NAVYA M

Provider ID: 206360
Provider Gender: Female
License number: A151525
NPI: 1083069611
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

RODRIGUEZ MARTINEZ, RENIL M

Provider ID: 206360

Provider Gender: Female

License number: A142703

NPI: 1477817757

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

FAMILY PRACTICE

AHN, EDWARD J

Provider ID: 96552

Provider Gender: Male

License number: A38304

NPI: 1093805103

Provider English Spoken: Yes

Provider Language(s) Spoken:
Korean

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital Chula Vista

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD

7750 DAGGET ST STE 108

SAN DIEGO, CA 92111-2235

Phone: (858) 571-1004

Fax: (858) 571-1006

After Hours Phone: (858)
571-1004

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: IB

Hours: M-SA 9AM-5PM

ALVAREZ-ESTRADA, MIGUEL

Provider ID: 227409

Provider Gender: Male

License number: A157505

NPI: 1588197826

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER

3177 OCEAN VIEW BLVD

SAN DIEGO, CA 92113-1432

Phone: (619) 232-5922

Fax:

After Hours Phone: (619)
232-5922

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA
9AM-5PM

ARRIETA, NOEMI J

Provider ID: 206360

Provider Gender: Female

License number: 20A11153

NPI: 1912223496

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

BACHARACH, REBECCA E

Provider ID: 417937

Provider Gender: Female

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C. Directorio de proveedores de atención primaria

License number: 20A15459
 NPI: 1225442643
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
 Fax:
 After Hours Phone: (619) 515-2545
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM

BAGINGITO, AUSTIN G

Provider ID: 206360
 Provider Gender: Male
 License number: A163977
 NPI: 1942705637
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
 Email:

Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: ME
 Hours: M-SA 9AM-5PM

BAGINGITO, AUSTIN G

Provider ID: 417429
 Provider Gender: Male
 License number: A163977
 NPI: 1942705637
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 1550 BROADWAY # 2
 SAN DIEGO, CA 92101-5713
 Phone: (619) 515-2525
 Fax:
 After Hours Phone: (619) 515-2525
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

BAGINGITO, AUSTIN G

Provider ID: 417937
 Provider Gender: Male
 License number: A163977
 NPI: 1942705637
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No

FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
 Fax:
 After Hours Phone: (619) 515-2545
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM

BAHMANPOUR, KAVEH

Provider ID: 388586
 Provider Gender: Male
 License number: A109450
 NPI: 1538368014
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Farsi
 Cultural Competency: No
 Hospital Affiliation: Palomar Medical Center
 Board Certified Specialty: No
HEALTH EXCEL IPA INC
 3023 BUNKER HILL ST STE 106
 SAN DIEGO, CA 92109-5701
 Phone: (858) 270-0010
 Fax: (858) 270-0011
 After Hours Phone: (858) 270-0010
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 1/110
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM

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C. Directorio de proveedores de atención primaria

BAHRAMZI, MARIA

Provider ID: 206362
Provider Gender: Female
License number: A173486
NPI: 1588141865
Provider English Spoken: Yes
Provider Language(s) Spoken: Pushto
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: ME
Hours: M-SA 9AM-5PM

BAHRAMZI, MARIA

Provider ID: 417987
Provider Gender: Female
License number: A173486
NPI: 1588141865
Provider English Spoken: Yes
Provider Language(s) Spoken: Pushto
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105-2026

Phone: (619) 515-2426

Fax:

After Hours Phone: (619) 515-2426

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

Accessibility:

Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

BAUTISTA, LUIS G

Provider ID: 517403
Provider Gender: Male
License number: A97270
NPI: 1295712206
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Fresno Community Hospital, St Agnes Medical Center
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
316 25TH ST
SAN DIEGO, CA 92102-3016
Phone: (619) 238-5551
Fax:
After Hours Phone: (619) 238-5551
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/120
American Sign Language (ASL): No
Accessibility:
Hours: M-F 8AM-5PM, SA 9AM-5PM

BORTNER, ADAM C

Provider ID: 206363
Provider Gender: Male
License number: A164879
NPI: 1811491749
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2560
Fax:
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: ME
Hours: M-SA 9AM-5PM

BORTNER, ADAM C

Provider ID: 417937
Provider Gender: Male
License number: A164879
NPI: 1811491749
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Phone: (619) 515-2545

Fax:

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-TH 8AM-9PM, F
8AM-5PM, SA 9AM-5PM

BRADY, PATRICIA H

Provider ID: 403583

Provider Gender: Female

License number: C53121

NPI: 1952390437

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally
Thornton

Board Certified Specialty: No
IHP-ST VINCENT DE PAUL

VILLA

1501 IMPERIAL AVE

SAN DIEGO, CA 92101-7638

Phone: (619) 233-8500

Fax:

After Hours Phone: (619)

233-8500

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-F 8AM-5:30PM, SA
9AM-5PM

BRODSKY, MARK E

Provider ID: 402851

Provider Gender: Male

License number: C53623

NPI: 1346337904

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2444

Fax:

After Hours Phone: (619)

515-2444

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

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

BROWNELL, KRISTIN J

Provider ID: 206353

Provider Gender: Female

License number: A80154

NPI: 1134232259

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2400

Fax: (619) 795-2756

After Hours Phone: (619)
515-2400

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

BROWN, BRANDON S

Provider ID: 206360

Provider Gender: Male

License number: A148499

NPI: 1013399559

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

BROWN, BRANDON S

Provider ID: 417937

Provider Gender: Male

License number: A148499

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C. Directorio de proveedores de atención primaria

NPI: 1013399559
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
 Fax:
 After Hours Phone: (619) 515-2545
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM

BUCHNER, WILLIAM H

Provider ID: 348871
 Provider Gender: Male
 License number: A109750
 NPI: 1356599443
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 3900 5TH AVE STE 110
 SAN DIEGO, CA 92103-3122
 Phone: (858) 554-1212
 Fax: (858) 795-1195
 After Hours Phone: (858) 554-1212
 Website:
 Email:
 Medi-Cal Open Panel: Yes

Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E
 Hours: M-SA 9AM-5PM

CAINE, TEAH O

Provider ID: 490600
 Provider Gender: Female
 License number: A152166
 NPI: 1972966679
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital, Sharp Chula Vista Med Ctr
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 550 WASHINGTON ST STE 300
 SAN DIEGO, CA 92103-2227
 Phone: (619) 297-5437
 Fax: (619) 297-4567
 After Hours Phone: (619) 297-5437
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM

CAMPOS, PRISCILLA J

Provider ID: 206360
 Provider Gender: Female
 License number: A152651
 NPI: 1508217399
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No

Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: ME
 Hours: M-SA 9AM-5PM

CARRIEDO CENICEROS, MARIA T

Provider ID: 227409
 Provider Gender: Female
 License number: A78373
 NPI: 1295746618
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 3177 OCEAN VIEW BLVD
 SAN DIEGO, CA 92113-1432
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619) 662-4100
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
 9AM-5PM

CARSON, COREY M

Provider ID: 206353
Provider Gender: Female
License number: A136616
NPI: 1245599778
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr

Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400

Fax:
After Hours Phone: (619)
 515-2400
Website: www.fhcsd.org

Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No

♿ *Accessibility:* ME
Hours: M-SA 9AM-5PM

CARSON, COREY M

Provider ID: 206360
Provider Gender: Female
License number: A136616
NPI: 1245599778
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr

Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:

After Hours Phone: (619)
 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No

♿ *Accessibility:* ME
Hours: M-SA 9AM-5PM

CARSON, COREY M

Provider ID: 417937
Provider Gender: Female
License number: A136616
NPI: 1245599778
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr

Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545

Fax:
After Hours Phone: (619)
 515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No

♿ *Accessibility:*
Hours: M-TH 8AM-9PM, F
 8AM-5PM, SA 9AM-5PM

CHOU, BILL

Provider ID: 206362
Provider Gender: Male
License number: 20A14794
NPI: 1730448101
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:

After Hours Phone: (619)
 515-2424
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No

♿ *Accessibility:* ME
Hours: M-SA 9AM-5PM

CHOU, BILL

Provider ID: 417937
Provider Gender: Male
License number: 20A14794
NPI: 1730448101
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545

Fax:
After Hours Phone: (619)
 515-2545
Website: www.fhcsd.org

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

<p><i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM</p> <p>CHUN, HYUN B <i>Provider ID:</i> 206360 <i>Provider Gender:</i> Male <i>License number:</i> A163978 <i>NPI:</i> 1083118988 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Korean <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM</p> <p>COLLINS, WILLIAM M <i>Provider ID:</i> 206362 <i>Provider Gender:</i> Male <i>License number:</i> 20A15413 <i>NPI:</i> 1417361973 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 <i>Phone:</i> (619) 515-2545 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2545 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None</p>	<p><i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120 <i>Phone:</i> (619) 515-2424 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2424 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM</p> <p>COLLINS, WILLIAM M <i>Provider ID:</i> 417937 <i>Provider Gender:</i> Male <i>License number:</i> 20A15413 <i>NPI:</i> 1417361973 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 <i>Phone:</i> (619) 515-2545 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2545 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None</p>	<p><i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM</p> <p>CORMAN, DANIEL M <i>Provider ID:</i> 206353 <i>Provider Gender:</i> Male <i>License number:</i> 20A13060 <i>NPI:</i> 1629339593 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 <i>Phone:</i> (619) 515-2400 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2400 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM</p> <p>CORMAN, DANIEL M <i>Provider ID:</i> 402851 <i>Provider Gender:</i> Male <i>License number:</i> 20A13060 <i>NPI:</i> 1629339593 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No</p>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

Phone: (619) 515-2444

Fax:

After Hours Phone: (619)

515-2444

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

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

COULSON, LAURA E

Provider ID: 206353

Provider Gender: Female

License number: A76301

NPI: 1447308424

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2400

Fax:

After Hours Phone: (619)

515-2400

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

DAMASCO GUTIERREZ, DAISY C

Provider ID: 418535

Provider Gender: Female

License number: A66993

NPI: 1700841582

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp Chula
Vista Med Ctr, Scripps Memorial
Hospital

Board Certified Specialty: No

OPERATION SAMAHAN
9995 CARMEL MOUNTAIN RD
STE B10 AND B11

SAN DIEGO, CA 92129-2889

Phone: (844) 200-2426

Fax:

After Hours Phone: (844)

200-2426

Website:

www.operationsamahan.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M,TU,TH,F
8:30AM-5:30PM, W 10AM-7PM,
SA 9AM-5PM

DANGREMOND, ADRIANNA J

Provider ID: 206360

Provider Gender: Female

License number: G138260

NPI: 1508802828

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

DAO, VIET T

Provider ID: 365444

Provider Gender: Male

License number: A96409

NPI: 1861406225

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Hi Desert
Medical Center

Board Certified Specialty: No

HEALTH EXCEL IPA INC
4616 EL CAJON BLVD STE 9
SAN DIEGO, CA 92115-4426

Phone: (619) 583-0553

Fax: (619) 583-5702

After Hours Phone: (619)

583-0553

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

DAPPEN, AMANDA K

Provider ID: 227409
Provider Gender: Female
License number: A153414
NPI: 1689037111
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM

DAVIS, DEIRDRE S

Provider ID: 451167
Provider Gender: Female
License number: A165432
NPI: 1265921365
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER
950 S EUCLID AVE
SAN DIEGO, CA 92114-6201

Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: P, EB, IB, E, R,
T, W
Hours: M-F 8AM-5PM, SA
8AM-4PM

DELGADO, GEORGE, MD

Provider ID: 77238
Provider Gender: Male
License number: G66807
NPI: 1083639470
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Palomar
Health Downtown Campus,
Scripps Memorial Hospital
Encinitas, Scripps Mercy
Hospital, Palomar Medical
Center, Pomerado Hospital
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
5030 CAMINO DE LA SIESTA
STE 106
SAN DIEGO, CA 92108-3117
Phone: (619) 692-4401
Fax: (619) 692-8147
After Hours Phone: (800)
667-5960
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

Accessibility: P, EB, IB, E, R,
T, W
Hours: M-SA 9AM-5PM

DWABE, KEFAH T

Provider ID: 108795
Provider Gender: Male
License number: A94193
NPI: 1477656049
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Burmese, Cambodian,
Thai
Cultural Competency: No
Hospital Affiliation: Alvarado
Hosp Med Ctr
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
4863 EL CAJON BLVD # A
SAN DIEGO, CA 92115-4636
Phone: (619) 286-9000
Fax: (619) 286-9004
After Hours Phone: (619)
286-9000
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM

FAMBRO, CYNTHIA L

Provider ID: 451167
Provider Gender: Female
License number: A153223
NPI: 1710331707
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

<p>CENTER 950 S EUCLID AVE SAN DIEGO, CA 92114-6201 Phone: (619) 662-4100 Fax: After Hours Phone: (619) 662-4100 Website: www.ihpsocal.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: P, EB, IB, E, R, T, W Hours: M-F 8AM-5PM, SA 8AM-4PM</p>	<p>8AM-2PM GLEASON ROHRER, GWEN E Provider ID: 233597 Provider Gender: Female License number: A112176 NPI: 1710140462 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No IHP-SAN DIEGO FAMILY CARE 4290 POLK AVE SAN DIEGO, CA 92105-1524 Phone: (619) 563-0250 Fax: After Hours Phone: (619) 563-0250 Website: www.sdfamilycare.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-F 8AM-5PM, SA 8AM-2PM</p>	<p>Phone: (619) 515-2400 Fax: After Hours Phone: (619) 515-2400 Website: www.fhcsd.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: ME Hours: M-SA 9AM-5PM</p>
<p>GLEASON ROHRER, GWEN E Provider ID: 233532 Provider Gender: Female License number: A112176 NPI: 1710140462 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No IHP-SAN DIEGO FAMILY CARE 4305 UNIVERSITY AVE STE 150 SAN DIEGO, CA 92105-1690 Phone: (619) 280-2058 Fax: After Hours Phone: (619) 280-2058 Website: www.sdfamilycare.org Email: Medi-Cal Open Panel: Yes Min/Max Age: 0/22 American Sign Language (ASL): No ♿ Accessibility: P, EB, IB, E, W Hours: M-F 8AM-5PM, SA</p>	<p>GREEN, BRENDA Provider ID: 206353 Provider Gender: Female License number: A134406 NPI: 1508125410 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621</p>	<p>GRIFFITHS, KENNETH J Provider ID: 417937 Provider Gender: Male License number: C52451 NPI: 1760563068 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 Phone: (619) 515-2545 Fax: After Hours Phone: (619) 515-2545 Website: www.fhcsd.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM</p> <p>HAMIDI, MAHSHID M Provider ID: 106481 Provider Gender: Female</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

License number: A63702
NPI: 1174534101
Provider English Spoken: Yes
Provider Language(s) Spoken: Faroese, Farsi, French, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital
Board Certified Specialty: No
HEALTH EXCEL IPA INC
5222 BALBOA AVE STE 31
SAN DIEGO, CA 92117-6952
Phone: (858) 565-6394
Fax: (858) 999-2006
After Hours Phone: (858) 565-6394
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, W
Hours: M-SA 9AM-5PM

HAMILTON, LISA MARIE S
Provider ID: 206363
Provider Gender: Female
License number: 20A14772
NPI: 1235576059
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2560
Fax:
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email:

Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

HAMILTON, LISA MARIE S
Provider ID: 418142
Provider Gender: Female
License number: 20A14772
NPI: 1235576059
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
5160 FEDERAL BLVD
SAN DIEGO, CA 92105-5429
Phone: (619) 515-2454
Fax:
After Hours Phone: (619) 515-2454
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

HARRIS, JILLION T
Provider ID: 233597
Provider Gender: Female
License number: A141442
NPI: 1366768525
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:

Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE
4290 POLK AVE
SAN DIEGO, CA 92105-1524
Phone: (619) 563-0507
Fax:
After Hours Phone: (619) 563-0507
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 8AM-2PM

HASSANEIN, TAREK I
Provider ID: 414056
Provider Gender: Male
License number: A54452
NPI: 1801854450
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, French, German, Spanish, Urdu
Cultural Competency: No
Hospital Affiliation: Parkview Community Hospital Medical Center, Sharp Coronado Hosp And Healthcare Ctr, Sharp Chula Vista Med Ctr, Saddleback Memorial Med Ctr, Scripps Mercy Hospital Chula Vista, Riverside Community Hosp, Childrens Hospital At Mission, Grossmont Hospital, Hoag Hospital Irvine, Doctors Hosp Of West Covina Inc
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
995 GATEWAY CENTER WAY
STE 105

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

SAN DIEGO, CA 92102-4544

Phone: (619) 264-1934

Fax: (619) 264-1937

After Hours Phone: (619)

264-1934

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

HEINRICI, ALEKA D

Provider ID: 451167

Provider Gender: Female

License number: A125329

NPI: 1780979120

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: John Muir

Medical Center Walnut Creek

Campus

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH

CENTER

950 S EUCLID AVE

SAN DIEGO, CA 92114-6201

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, R,

T, W

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

8AM-4PM

HOLTZMAN, AURY L

Provider ID: 417101

Provider Gender: Male

License number: A43970

NPI: 1548462567

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

OPERATION SAMAHAN

10737 CAMINO RUIZ STE 235

SAN DIEGO, CA 92126-2375

Phone: (844) 200-2426

Fax:

After Hours Phone: (844)

200-2426

Website:

www.operationsamahan.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-F 8AM-4:30PM, SA

9AM-5PM

HOLTZMAN, AURY L

Provider ID: 418535

Provider Gender: Male

License number: A43970

NPI: 1548462567

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

OPERATION SAMAHAN

9995 CARMEL MOUNTAIN RD

STE B10 AND B11

SAN DIEGO, CA 92129-2889

Phone: (844) 200-2426

Fax:

After Hours Phone: (844)

200-2426

Website:

www.operationsamahan.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M,TU,TH,F

8:30AM-5:30PM, W 10AM-7PM,

SA 9AM-5PM

JEAN-MURAT, CAROLLE

Provider ID: 403583

Provider Gender: Female

License number: A39012

NPI: 1336474568

Provider English Spoken: Yes

Provider Language(s) Spoken:

French, Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-ST VINCENT DE PAUL

VILLA

1501 IMPERIAL AVE

SAN DIEGO, CA 92101-7638

Phone: (619) 233-8500

Fax:

After Hours Phone: (619)

233-8500

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

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

9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

JENKIN, FREDERICK D

Provider ID: 391783
Provider Gender: Male
License number: 20A5034
NPI: 1225069123
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Naval Medical
 Ctr Sd Rbe
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 3562 GOVERNOR DR # 1
 SAN DIEGO, CA 92122-2904
Phone: (858) 774-5157
Fax: (858) 731-1021
After Hours Phone: (858)
 774-5157
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM

KAUFHOLD, ANNE D

Provider ID: 227409
Provider Gender: Female
License number: A88893
NPI: 1164508073
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Arabic, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital Chula Vista
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 3177 OCEAN VIEW BLVD
 SAN DIEGO, CA 92113-1432

Phone: (619) 662-4100
Fax: (619) 858-1003
After Hours Phone: (619)
 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
 9AM-5PM

KAUFMAN, JENNIFER CHILYN L

Provider ID: 206353
Provider Gender: Female
License number: G149974
NPI: 1407818768
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Mandarin
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619)
 515-2400
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* ME
Hours: M-SA 9AM-5PM

KAUFMAN, JENNIFER CHILYN L

Provider ID: 417987
Provider Gender: Female
License number: G149974
NPI: 1407818768
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Mandarin
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
Phone: (619) 515-2426
Fax:
After Hours Phone: (619)
 515-2426
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-F 8:30AM-5:30PM, SA
 9AM-5PM

KEFLEZIGHI, BAHGHI R

Provider ID: 206363
Provider Gender: Female
License number: A100391
NPI: 1124210844
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital, Scripps Mercy Hospital
 Chula Vista, Rady Childrens
 Hospital San Diego
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

SAN DIEGO, CA 92102-4715
Phone: (619) 515-2560
Fax: (619) 263-2499
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

KIDDER, BRENDAN J

Provider ID: 227409
Provider Gender: Male
License number: A112379
NPI: 1275793929
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM

KIM, ERNEST S

Provider ID: 417429
Provider Gender: Male

License number: A156221
NPI: 1124414925
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1550 BROADWAY # 2
SAN DIEGO, CA 92101-5713
Phone: (619) 515-2525
Fax:
After Hours Phone: (619) 515-2525
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

KIM, ERNEST S

Provider ID: 417937
Provider Gender: Male
License number: A156221
NPI: 1124414925
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email:

Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM

KUNDU, SURITI

Provider ID: 206353
Provider Gender: Female
License number: G80882
NPI: 1326132754
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619) 515-2400
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

KUNIN-RIDA, TERI L

Provider ID: 283850
Provider Gender: Female
License number: G80071
NPI: 1265580112
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Armenian, Spanish
Cultural Competency: No
Hospital Affiliation: Alvarado

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C. Directorio de proveedores de atención primaria

Hosp Med Ctr, Sharp Mary Birch
Hosp For Women And
Newborns, Sharp Memorial
Hospital, Alvarado Hospital Llc
Board Certified Specialty: No
HEALTH EXCEL IPA INC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608
Phone: (619) 255-9155
Fax: (619) 795-9849
After Hours Phone: (619)
255-9155
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility: P, EB, IB, E
Hours: M-SA 9AM-5PM

KUNIN-RIDA, TERI L

Provider ID: 556712
Provider Gender: Female
License number: G80071
NPI: 1265580112
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Armenian, Spanish
Cultural Competency: No
Hospital Affiliation: Alvarado
Hosp Med Ctr, Sharp Mary Birch
Hosp For Women And
Newborns, Sharp Memorial
Hospital, Alvarado Hospital Llc
Board Certified Specialty: No
HEALTH EXCEL IPA INC
4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1609
Phone: (619) 269-1269
Fax: (619) 269-1271
After Hours Phone: (619)
269-1269
Website:
Email:

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM

LEE, SANDRINE J

Provider ID: 206360
Provider Gender: Female
License number: 20A15068
NPI: 1073909651
Provider English Spoken: Yes
Provider Language(s) Spoken:
French
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: ME
Hours: M-SA 9AM-5PM

LEE, SANDRINE J

Provider ID: 402851
Provider Gender: Female
License number: 20A15068
NPI: 1073909651
Provider English Spoken: Yes
Provider Language(s) Spoken:
French
Cultural Competency: No
Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2444
Fax:
After Hours Phone: (619)
515-2444
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-W,F 8:30AM-5:30PM,
TH 9AM-6PM, SA 9AM-5PM

LEE, SANDRINE J

Provider ID: 417429
Provider Gender: Female
License number: 20A15068
NPI: 1073909651
Provider English Spoken: Yes
Provider Language(s) Spoken:
French
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
1550 BROADWAY # 2
SAN DIEGO, CA 92101-5713
Phone: (619) 515-2525
Fax:
After Hours Phone: (619)
515-2525
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

LEE, SANDRINE J

Provider ID: 419529

Provider Gender: Female

License number: 20A15068

NPI: 1073909651

Provider English Spoken: Yes

Provider Language(s) Spoken:

French

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF SAN DIEGO

2325 COMMERCIAL ST STE 1400

SAN DIEGO, CA 92113-1195

Phone: (619) 515-2422

Fax:

After Hours Phone: (619)

515-2422

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

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

9AM-5PM

LE, TRAM B, MD

Provider ID: 44947

Provider Gender: Female

License number: A105829

NPI: 1346442985

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Vietnamese

Cultural Competency: No

Hospital Affiliation: Alvarado

Hosp Med Ctr, Scripps Mercy

Hospital, Scripps Mercy Hospital

Chula Vista, Sharp Memorial Hospital

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

5507 EL CAJON BLVD # L

SAN DIEGO, CA 92115-3624

Phone: (619) 286-2789

Fax: (619) 265-2070

After Hours Phone: (619)

286-2789

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

LE, TRAM B

Provider ID: 44947

Provider Gender: Female

License number: A105829

NPI: 1346442985

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Vietnamese

Cultural Competency: No

Hospital Affiliation: Alvarado

Hosp Med Ctr, Scripps Mercy

Hospital, Scripps Mercy Hospital

Chula Vista, Sharp Memorial

Hospital

Board Certified Specialty: No

HEALTH EXCEL IPA INC

5507 EL CAJON BLVD # L

SAN DIEGO, CA 92115-3624

Phone: (619) 286-2789

Fax: (619) 265-2070

After Hours Phone: (619)

286-2789

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

LINDEMAN, KURTIS P

Provider ID: 403583

Provider Gender: Male

License number: A104052

NPI: 1124155791

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Board Certified Specialty: No

IHP-ST VINCENT DE PAUL

VILLA

1501 IMPERIAL AVE

SAN DIEGO, CA 92101-7638

Phone: (619) 233-8500

Fax:

After Hours Phone: (619)

233-8500

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

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

9AM-5PM

LIU, JIE

Provider ID: 206362

Provider Gender: Female

License number: A147758

NPI: 1780066472

Provider English Spoken: Yes

Provider Language(s) Spoken:

Chinese, Mandarin, Spanish

Cultural Competency: No

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Hospital Affiliation: Scripps Mercy Hospital
Hours: M-SA 9AM-5PM

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424

Fax:
After Hours Phone: (619) 515-2424

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* ME

Hours: M-SA 9AM-5PM

LUAN, GORDON C

Provider ID: 547159

Provider Gender: Male

License number: A83256

NPI: 1548236771

Provider English Spoken: Yes

Provider Language(s) Spoken:

Chinese, Mandarin

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

HEALTH EXCEL IPA INC

4282 GENESEE AVE STE 102

SAN DIEGO, CA 92117-4986

Phone: (858) 598-6789

Fax: (858) 598-6720

After Hours Phone: (858)

598-6789

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

LU, JULIE P

Provider ID: 418142

Provider Gender: Female

License number: 20A14804

NPI: 1619210614

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

5160 FEDERAL BLVD

SAN DIEGO, CA 92105-5429

Phone: (619) 515-2454

Fax:

After Hours Phone: (619)

515-2454

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:*

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

9AM-5PM

MANDOYAN, AUSTIN

Provider ID: 206360

Provider Gender: Female

License number: A161682

NPI: 1841726148

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* ME

Hours: M-SA 9AM-5PM

MARSTON, JACQUELINE N

Provider ID: 206046

Provider Gender: Female

License number: 20A12402

NPI: 1417205055

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital

Board Certified Specialty: No

IHP-SAN DIEGO FAMILY CARE

6973 LINDA VISTA RD

SAN DIEGO, CA 92111-6342

Phone: (858) 810-8700

Fax:

After Hours Phone: (858)

810-8700

Website: www.sdfamilycare.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* P, EB, IB, E, R,

T, W

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

9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

<p>MARSTON, JACQUELINE N <i>Provider ID:</i> 482070 <i>Provider Gender:</i> Female <i>License number:</i> 20A12402 <i>NPI:</i> 1417205055 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Memorial Hospital <i>Board Certified Specialty:</i> No IHP-SAN DIEGO FAMILY CARE 7011 LINDA VISTA RD SAN DIEGO, CA 92111-6307 <i>Phone:</i> (858) 279-0925 <i>Fax:</i> <i>After Hours Phone:</i> (858) 279-0925 <i>Website:</i> www.sdfamilycare.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> P, EB, IB, E, R, W <i>Hours:</i> M,W-F 8:30AM-5:30PM, TU 8:30AM-8:30PM, SA 9AM-4PM</p>	<p>SAN DIEGO, CA 92154-1351 <i>Phone:</i> (619) 429-3733 <i>Fax:</i> <i>After Hours Phone:</i> (619) 429-3733 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> P, IB, E, R, T, W <i>Hours:</i> M,F 8AM-5PM, TU-TH 8AM-8PM, SA 9AM-5PM</p> <p>MELGAR, MONICA L <i>Provider ID:</i> 402851 <i>Provider Gender:</i> Female <i>License number:</i> A154399 <i>NPI:</i> 1629432174 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104 <i>Phone:</i> (619) 515-2444 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2444 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-W,F 8:30AM-5:30PM, TH 9AM-6PM, SA 9AM-5PM</p>	<p><i>Provider ID:</i> 227409 <i>Provider Gender:</i> Female <i>License number:</i> A162332 <i>NPI:</i> 1063945657 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No IHP-SAN YSIDRO HEALTH CENTER 3177 OCEAN VIEW BLVD SAN DIEGO, CA 92113-1432 <i>Phone:</i> (619) 662-4100 <i>Fax:</i> <i>After Hours Phone:</i> (619) 662-4100 <i>Website:</i> www.ihpsocal.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM</p>
<p>MASIFI, SHEEREN L <i>Provider ID:</i> 214492 <i>Provider Gender:</i> Female <i>License number:</i> A155926 <i>NPI:</i> 1336598184 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No IHP-IMPERIAL BEACH HEALTH CENTER 1016 OUTER RD</p>	<p>MORALES, ALEJANDRA</p>	<p>NATERAS ARREOLA, AICHEL <i>Provider ID:</i> 206360 <i>Provider Gender:</i> Female <i>License number:</i> A151610 <i>NPI:</i> 1093197543 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

NGUYEN CLEARY, THAI C

Provider ID: 417937

Provider Gender: Male

License number: A86079

NPI: 1467442624

Provider English Spoken: Yes

Provider Language(s) Spoken:
Vietnamese

Cultural Competency: No

Hospital Affiliation: Hollywood
Presbyterian Med Ctr

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2545

Fax:

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-TH 8AM-9PM, F
8AM-5PM, SA 9AM-5PM

NIAZI, HARRIS O

Provider ID: 206360

Provider Gender: Male

License number: A146111

NPI: 1174905871

Provider English Spoken: Yes

Provider Language(s) Spoken:
Farsi

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

NIKZAD, JASON

Provider ID: 206360

Provider Gender: Male

License number: 20A12653

NPI: 1508121674

Provider English Spoken: Yes

Provider Language(s) Spoken:
Farsi, Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

NORRIS, JEFFREY M

Provider ID: 403583

Provider Gender: Male

License number: A136275

NPI: 1073870374

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
IHP-ST VINCENT DE PAUL
VILLA

1501 IMPERIAL AVE

SAN DIEGO, CA 92101-7638

Phone: (619) 233-8500

Fax:

After Hours Phone: (619)
233-8500

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-F 8AM-5:30PM, SA
9AM-5PM

NUQUI, JOSIE C

Provider ID: 432308

Provider Gender: Female

License number: A71544

NPI: 1184773673

Provider English Spoken: Yes

Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 OPERATION SAMAHAN
 9855 ERMA RD STE 105
 SAN DIEGO, CA 92131-1007
Phone: (844) 200-2426
Fax:
After Hours Phone: (844)
 200-2426
Website:
 www.operationsamahan.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM

NUQUI, JOSIE C , MD

Provider ID: 448997
Provider Gender: Female
License number: A71544
NPI: 1184773673
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 9855 ERMA RD STE 105
 SAN DIEGO, CA 92131-1007
Phone: (844) 200-2426
Fax:
After Hours Phone: (844)
 200-2426
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No

☯ *Accessibility:*
Hours: M-SA 9AM-5PM
ORTIZ, KENNETH K
Provider ID: 517403
Provider Gender: Male
License number: A156607
NPI: 1356761571
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
 Hospital
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 316 25TH ST
 SAN DIEGO, CA 92102-3016
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
 662-4100
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/120
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-F 8AM-5PM, SA
 9AM-5PM

PACE, GARY J

Provider ID: 207382
Provider Gender: Male
License number: A52538
NPI: 1326105313
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Mendocino
 Coast District Hospital,
 Healdsburg District Hosp, Sutter
 Santa Rosa Regional Hospital,

Providence Santa Rosa
 Memorial Hospital
Board Certified Specialty: No
 IHP-SAN DIEGO AMERICAN
 INDIAN HEALTH CENTER
 2630 1ST AVE
 SAN DIEGO, CA 92103-6599
Phone: (619) 234-2158
Fax:
After Hours Phone: (619)
 234-2158
Website: www.sdaihc.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
 9AM-5PM

PALOMINO, VERONICA N

Provider ID: 206353
Provider Gender: Female
License number: A121451
NPI: 1255569083
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619)
 515-2400
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

<p>No ☯ <i>Accessibility</i>: ME <i>Hours</i>: M-SA 9AM-5PM</p>	<p>2325 COMMERCIAL ST STE 1400 SAN DIEGO, CA 92113-1195 <i>Phone</i>: (619) 515-2422</p>	<p><i>Provider ID</i>: 417429 <i>Provider Gender</i>: Female <i>License number</i>: 20A14012 <i>NPI</i>: 1336484104</p>
<p>PALOMINO, VERONICA N <i>Provider ID</i>: 206360 <i>Provider Gender</i>: Female <i>License number</i>: A121451 <i>NPI</i>: 1255569083 <i>Provider English Spoken</i>: Yes <i>Provider Language(s) Spoken</i>: Spanish <i>Cultural Competency</i>: No <i>Hospital Affiliation</i>: <i>Board Certified Specialty</i>: No FAMILY HEALTH CENTERS OF SAN DIEGO</p>	<p><i>Fax</i>: <i>After Hours Phone</i>: (619) 515-2422 <i>Website</i>: www.fhcsd.org <i>Email</i>: <i>Medi-Cal Open Panel</i>: Yes <i>Min/Max Age</i>: None <i>American Sign Language (ASL)</i>: No ☯ <i>Accessibility</i>: <i>Hours</i>: M-F 8AM-5PM, SA 9AM-5PM</p>	<p><i>Provider English Spoken</i>: Yes <i>Provider Language(s) Spoken</i>: <i>Cultural Competency</i>: No <i>Hospital Affiliation</i>: <i>Board Certified Specialty</i>: No FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY # 2 SAN DIEGO, CA 92101-5713 <i>Phone</i>: (619) 515-2525 <i>Fax</i>: <i>After Hours Phone</i>: (619) 515-2525</p>
<p>1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 <i>Phone</i>: (619) 515-2300 <i>Fax</i>: <i>After Hours Phone</i>: (619) 515-2300 <i>Website</i>: www.fhcsd.org <i>Email</i>: <i>Medi-Cal Open Panel</i>: Yes <i>Min/Max Age</i>: None <i>American Sign Language (ASL)</i>: No ☯ <i>Accessibility</i>: ME <i>Hours</i>: M-SA 9AM-5PM</p>	<p>PARK, RO JONG <i>Provider ID</i>: 38042 <i>Provider Gender</i>: Male <i>License number</i>: C51913 <i>NPI</i>: 1699799593 <i>Provider English Spoken</i>: Yes <i>Provider Language(s) Spoken</i>: Korean <i>Cultural Competency</i>: No <i>Hospital Affiliation</i>: <i>Board Certified Specialty</i>: No HEALTH EXCEL IPA INC 7825 ENGINEER RD STE 101 SAN DIEGO, CA 92111-1929 <i>Phone</i>: (858) 277-7111 <i>Fax</i>: (858) 277-7667 <i>After Hours Phone</i>: (858) 277-7111 <i>Website</i>: <i>Email</i>: <i>Medi-Cal Open Panel</i>: Yes <i>Min/Max Age</i>: None <i>American Sign Language (ASL)</i>: No ☯ <i>Accessibility</i>: W <i>Hours</i>: M-SA 9AM-5PM</p>	<p><i>Website</i>: www.fhcsd.org <i>Email</i>: <i>Medi-Cal Open Panel</i>: Yes <i>Min/Max Age</i>: None <i>American Sign Language (ASL)</i>: No ☯ <i>Accessibility</i>: <i>Hours</i>: M-F 8:30AM-5:30PM, SA 9AM-5PM</p>
<p>PALOMINO, VERONICA N <i>Provider ID</i>: 419529 <i>Provider Gender</i>: Female <i>License number</i>: A121451 <i>NPI</i>: 1255569083 <i>Provider English Spoken</i>: Yes <i>Provider Language(s) Spoken</i>: Spanish <i>Cultural Competency</i>: No <i>Hospital Affiliation</i>: <i>Board Certified Specialty</i>: No FAMILY HEALTH CENTERS OF SAN DIEGO</p>	<p><i>Fax</i>: (858) 277-7667 <i>After Hours Phone</i>: (858) 277-7111 <i>Website</i>: <i>Email</i>: <i>Medi-Cal Open Panel</i>: Yes <i>Min/Max Age</i>: None <i>American Sign Language (ASL)</i>: No ☯ <i>Accessibility</i>: W <i>Hours</i>: M-SA 9AM-5PM</p>	<p>PEREZ, PERLITA A <i>Provider ID</i>: 206363 <i>Provider Gender</i>: Female <i>License number</i>: A119689 <i>NPI</i>: 1174810972 <i>Provider English Spoken</i>: Yes <i>Provider Language(s) Spoken</i>: Spanish <i>Cultural Competency</i>: No <i>Hospital Affiliation</i>: <i>Board Certified Specialty</i>: No FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST SAN DIEGO, CA 92102-4715</p>
<p>PALOMINO, VERONICA N</p>	<p>PAYAMI, MADDIHA</p>	

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C. Directorio de proveedores de atención primaria

Phone: (619) 515-2560

Fax:

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

PROPST, TOBE M

Provider ID: 403583

Provider Gender: Male

License number: A82123

NPI: 1194814277

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-ST VINCENT DE PAUL
VILLA

1501 IMPERIAL AVE

SAN DIEGO, CA 92101-7638

Phone: (619) 233-8500

Fax:

After Hours Phone: (619)

233-8500

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-F 8AM-5:30PM, SA
9AM-5PM

RAHMAN, AKBAR A

Provider ID: 403583

Provider Gender: Male

License number: A110134

NPI: 1720314933

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr

Board Certified Specialty: No

IHP-ST VINCENT DE PAUL
VILLA

1501 IMPERIAL AVE

SAN DIEGO, CA 92101-7638

Phone: (619) 233-8500

Fax:

After Hours Phone: (619)

233-8500

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-F 8AM-5:30PM, SA
9AM-5PM

RAMIREZ, CRISTHIAN E

Provider ID: 206360

Provider Gender: Female

License number: 20A17478

NPI: 1407200942

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

RAWI, BASHIR A

Provider ID: 407212

Provider Gender: Male

License number: A48140

NPI: 1003964834

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, Farsi, Spanish, Urdu

Cultural Competency: No

Hospital Affiliation: Sharp Chula

Vista Med Ctr, Sharp Coronado

Hosp And Healthcare Ctr,

Scripps Mercy Hospital Chula

Vista

Board Certified Specialty: No

IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD

955 GATEWAY CENTER WAY #
105

SAN DIEGO, CA 92102-4542

Phone: (619) 264-1934

Fax: (619) 264-1937

After Hours Phone: (619)

264-1934

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

RAWI, BASHIR A , MD

Provider ID: 407212

Provider Gender: Male

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C. Directorio de proveedores de atención primaria

License number: A48140
NPI: 1003964834
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Farsi, Spanish, Urdu
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr, Sharp Coronado
Hosp And Healthcare Ctr,
Scripps Mercy Hospital Chula
Vista
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
955 GATEWAY CENTER WAY #
105
SAN DIEGO, CA 92102-4542
Phone: (619) 264-1934
Fax: (619) 264-1937
After Hours Phone: (619)
264-1934
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

RECALDE, FRANCISCO J , MD

Provider ID: 13850
Provider Gender: Male
License number: C41872
NPI: 1538309067
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
3811 EL CAJON BLVD
SAN DIEGO, CA 92105-1020

Phone: (619) 284-5622
Fax: (619) 283-2572
After Hours Phone: (619)
507-3050
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
T, W
Hours: M-SA 9AM-5PM

RICHARDSON, DANIELLE M

Provider ID: 214492
Provider Gender: Female
License number: A127555
NPI: 1609142892
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: Yes
IHP-IMPERIAL BEACH HEALTH
CENTER
1016 OUTER RD
SAN DIEGO, CA 92154-1351
Phone: (619) 429-3733
Fax:
After Hours Phone: (619)
429-3733
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, IB, E, R, T, W
Hours: M,F 8AM-5PM, TU-TH
8AM-8PM, SA 9AM-5PM

RIM, CHOON S

Provider ID: 168570
Provider Gender: Male

License number: C50815
NPI: 1083827273
Provider English Spoken: Yes
Provider Language(s) Spoken:
Korean, Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: Yes
HEALTH EXCEL IPA INC
7825 ENGINEER RD STE 101
SAN DIEGO, CA 92111-1929
Phone: (858) 277-7111
Fax: (858) 277-7667
After Hours Phone: (858)
277-7111
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

RITTER, STEVEN F

Provider ID: 451167
Provider Gender: Male
License number: 20A7435
NPI: 1356556021
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER
950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes

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C. Directorio de proveedores de atención primaria

<p>Min/Max Age: None American Sign Language (ASL): No ☯ Accessibility: P, EB, IB, E, R, T, W Hours: M-F 8AM-5PM, SA 8AM-4PM</p>	<p>Hospital Affiliation: Scripps Mercy No Hospital Chula Vista Board Certified Specialty: No IHP-SAN YSIDRO HEALTH CENTER 3177 OCEAN VIEW BLVD SAN DIEGO, CA 92113-1432 Phone: (619) 662-4100 Fax: After Hours Phone: (619) 662-4100 Website: www.ihpsocal.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ☯ Accessibility: W Hours: M-F 8AM-5PM, SA 9AM-5PM</p>	<p>☯ Accessibility: Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM</p>
<p>RIVO, JULIE C Provider ID: 206360 Provider Gender: Female License number: A163562 NPI: 1689178949 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 Phone: (619) 515-2300 Fax: After Hours Phone: (619) 515-2300 Website: www.fhcsd.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ☯ Accessibility: ME Hours: M-SA 9AM-5PM</p>	<p>ROJAS, SARAH A Provider ID: 417937 Provider Gender: Female License number: A139169 NPI: 1245645076 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 Phone: (619) 515-2545 Fax: After Hours Phone: (619) 515-2545 Website: www.fhcsd.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL):</p>	<p>ROJAS, STEVEN M Provider ID: 227409 Provider Gender: Male License number: A132982 NPI: 1801230297 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No IHP-SAN YSIDRO HEALTH CENTER 3177 OCEAN VIEW BLVD SAN DIEGO, CA 92113-1432 Phone: (619) 662-4100 Fax: After Hours Phone: (619) 662-4100 Website: www.ihpsocal.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ☯ Accessibility: W Hours: M-F 8AM-5PM, SA 9AM-5PM</p>
<p>RODRIGUEZ, SEAN J Provider ID: 227409 Provider Gender: Male License number: A120576 NPI: 1780909903 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No</p>	<p>SADIQI, ARZOO Provider ID: 550256 Provider Gender: Female License number: 20A17686 NPI: 1114417581 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Scripps Memorial Hospital Board Certified Specialty: No</p>	

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C. Directorio de proveedores de atención primaria

HEALTH EXCEL IPA INC
555 W C ST STE 102
SAN DIEGO, CA 92101-8470
Phone: (858) 554-1212
Fax: (858) 795-1195
After Hours Phone: (858)
554-1212
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

SADIQI, ARZOO

Provider ID: 550257
Provider Gender: Female
License number: 20A17686
NPI: 1114417581
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital
Board Certified Specialty: No
HEALTH EXCEL IPA INC
3900 5TH AVE STE 110
SAN DIEGO, CA 92103-3122
Phone: (858) 554-1212
Fax: (858) 795-1195
After Hours Phone: (858)
554-1212
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

SAROKI, KAREN A

Provider ID: 97801

Provider Gender: Female
License number: A105032
NPI: 1215157284
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital Chula Vista
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
5030 CAMINO DE LA SIESTA
STE 106
SAN DIEGO, CA 92108-3117
Phone: (619) 692-4401
Fax: (619) 692-8147
After Hours Phone: (619)
692-4401
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
T, W
Hours: M-SA 9AM-5PM

SAZEGAR, PAYAM P

Provider ID: 542799
Provider Gender: Male
License number: A122685
NPI: 1750623716
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
HEALTH EXCEL IPA INC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608
Phone: (619) 255-9155
Fax: (619) 795-9849
After Hours Phone: (619)
255-9155

Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E
Hours: M-SA 9AM-5PM

SAZEGAR, PAYAM P

Provider ID: 542801
Provider Gender: Male
License number: A122685
NPI: 1750623716
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
HEALTH EXCEL IPA INC
4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1609
Phone: (619) 269-1269
Fax: (619) 269-1271
After Hours Phone: (619)
269-1269
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

SCHUMAKER, EDWARD W

Provider ID: 500626
Provider Gender: Male
License number: 20A6433
NPI: 1184616872
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Board Certified Specialty: No
HEALTH EXCEL IPA INC
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105-1608
Phone: (619) 280-4213
Fax:
After Hours Phone: (619)
 280-4213
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM

SCOTT, LAGINA R

Provider ID: 206360
Provider Gender: Female
License number: A160489
NPI: 1558897009
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
**FAMILY HEALTH CENTERS OF
 SAN DIEGO**
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* ME
Hours: M-SA 9AM-5PM

SCOTT, RYLEE

Provider ID: 402851
Provider Gender: Male
License number: A162946
NPI: 1457887911
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
**FAMILY HEALTH CENTERS OF
 SAN DIEGO**
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-W,F 8:30AM-5:30PM,
 TH 9AM-6PM, SA 9AM-5PM

SEARLES, ROBERT C

Provider ID: 403583
Provider Gender: Male
License number: A79566
NPI: 1891807764
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr
Board Certified Specialty: No
**IHP-ST VINCENT DE PAUL
 VILLA**
 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101-7638

Phone: (619) 233-8500
Fax:
After Hours Phone: (619)
 233-8500
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-F 8AM-5:30PM, SA
 9AM-5PM

SHAMANI, AZAM

Provider ID: 246900
Provider Gender: Female
License number: A109713
NPI: 1699906032
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Faroese, Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Palomar
 Medical Center, Grossmont
 Hospital, Palomar Health
 Downtown Campus, Pomerado
 Hospital, Paradise Valley
 Hospital
Board Certified Specialty: Yes
HEALTH EXCEL IPA INC
 5555 RESERVOIR DR STE 312
 SAN DIEGO, CA 92120-5173
Phone: (619) 639-7285
Fax: (619) 639-7286
After Hours Phone: (619)
 639-7285
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 4/120
American Sign Language (ASL):
 No
 ☯ *Accessibility:* P, EB
Hours: M-SA 9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

<p>SHIHATA, ALFRED A <i>Provider ID:</i> 37502 <i>Provider Gender:</i> Male <i>License number:</i> A37090 <i>NPI:</i> 1841225810 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital Chula Vista, Sharp Chula Vista Med Ctr <i>Board Certified Specialty:</i> No IMPERIAL HEALTH HOLDINGS</p>	<p>3802 NATIONAL AVE SAN DIEGO, CA 92113-3223 <i>Phone:</i> (619) 264-2591 <i>Fax:</i> (619) 264-4116 <i>After Hours Phone:</i> (619) 264-2591 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM</p>	<p><i>Provider Gender:</i> Female <i>License number:</i> 20A17577 <i>NPI:</i> 1144684382 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Japanese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026 <i>Phone:</i> (619) 515-2426 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2426 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-F 8:30AM-5:30PM, SA 9AM-5PM</p>
<p>MEDICAL GROUP-SD 3802 NATIONAL AVE SAN DIEGO, CA 92113-3223 <i>Phone:</i> (619) 264-2591 <i>Fax:</i> (619) 264-4116 <i>After Hours Phone:</i> (619) 264-2591 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM</p>	<p>SHIRAKI, JEAN M <i>Provider ID:</i> 206353 <i>Provider Gender:</i> Female <i>License number:</i> 20A17577 <i>NPI:</i> 1144684382 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Japanese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 <i>Phone:</i> (619) 515-2400 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2400 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM</p>	<p>SHUMILAK, KAILI J <i>Provider ID:</i> 418142 <i>Provider Gender:</i> Female <i>License number:</i> 20A12796 <i>NPI:</i> 1831489855 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 5160 FEDERAL BLVD SAN DIEGO, CA 92105-5429</p>
<p>SHIHATA, ALFRED A <i>Provider ID:</i> 37502 <i>Provider Gender:</i> Male <i>License number:</i> A37090 <i>NPI:</i> 1841225810 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital Chula Vista, Sharp Chula Vista Med Ctr <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC</p>	<p>SHIRAKI, JEAN M <i>Provider ID:</i> 417987</p>	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Phone: (619) 515-2454

Fax:

After Hours Phone: (619)
515-2454

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

SIDRICK, NADINE E

Provider ID: 367851

Provider Gender: Female

License number: G42131

NPI: 1134140718

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD

4440 EUCLID AVE # C

SAN DIEGO, CA 92115-4522

Phone: (619) 582-5105

Fax: (619) 582-5121

After Hours Phone: (619)
582-5105

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

SMOOT, CHARLES B

Provider ID: 206360

Provider Gender: Male

License number: A97036

NPI: 1245490358

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

SMOOT, CHARLES B

Provider ID: 356145

Provider Gender: Male

License number: A97036

NPI: 1245490358

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF

SAN DIEGO

2391 ISLAND AVE

SAN DIEGO, CA 92102-2941

Phone: (619) 515-2435

Fax:

After Hours Phone: (619)
515-2435

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,
T, ME

Hours: M-SA 9AM-5PM

SUH, YOUNG S

Provider ID: 207382

Provider Gender: Male

License number: C55546

NPI: 1710239223

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
IHP-SAN DIEGO AMERICAN

INDIAN HEALTH CENTER

2630 1ST AVE

SAN DIEGO, CA 92103-6599

Phone: (619) 234-2158

Fax:

After Hours Phone: (619)
234-2158

Website: www.sdaihc.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA
9AM-5PM

SUMMERS-DAY, COURTNEY A

Provider ID: 214492

Provider Gender: Female

License number: A112781

NPI: 1124288873

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

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C. Directorio de proveedores de atención primaria

Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
 IHP-IMPERIAL BEACH HEALTH CENTER
 1016 OUTER RD
 SAN DIEGO, CA 92154-1351
Phone: (619) 429-3733
Fax:
After Hours Phone: (619) 429-3733
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* P, IB, E, R, T, W
Hours: M,F 8AM-5PM, TU-TH 8AM-8PM, SA 9AM-5PM

SWARTZ, JOHN R

Provider ID: 403583
Provider Gender: Male
License number: G72486
NPI: 1396754131
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Board Certified Specialty: No
 IHP-ST VINCENT DE PAUL VILLA
 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101-7638
Phone: (619) 233-8500
Fax:
After Hours Phone: (619) 233-8500
Website:

Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-F 8AM-5:30PM, SA 9AM-5PM

SZMIDT, MARIA J

Provider ID: 104584
Provider Gender: Female
License number: A52235
NPI: 1033221171
Provider English Spoken: Yes
Provider Language(s) Spoken: Polish, Russian, Spanish
Cultural Competency: No
Hospital Affiliation:

Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 12395 EL CAMINO REAL STE 100
 SAN DIEGO, CA 92130-3083
Phone: (858) 259-5655
Fax: (858) 259-5638
After Hours Phone: (858) 259-5655
Website:

Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 12/99
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM

THOMAS, ZACHARY S

Provider ID: 206353
Provider Gender: Male
License number: A145023
NPI: 1326453119
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619) 515-2400
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* ME
Hours: M-SA 9AM-5PM

THOMAS, ZACHARY S

Provider ID: 417987
Provider Gender: Male
License number: A145023
NPI: 1326453119
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
Phone: (619) 515-2426
Fax:
After Hours Phone: (619) 515-2426
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-F 8:30AM-5:30PM, SA

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

9AM-5PM

TRAN, TONNIA T

Provider ID: 233597
Provider Gender: Female
License number: 20A7662
NPI: 1982746657
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese
Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
 IHP-SAN DIEGO FAMILY CARE
 4290 POLK AVE
 SAN DIEGO, CA 92105-1524
Phone: (619) 563-0507
Fax:
After Hours Phone: (619) 563-0507
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 8AM-2PM

TRAN, TU PHUONG T

Provider ID: 206353
Provider Gender: Female
License number: A152730
NPI: 1093179921
Provider English Spoken: Yes
Provider Language(s) Spoken: Sign Language, Spanish, Vietnamese
Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2400
Fax:
After Hours Phone: (619) 515-2400
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* ME
Hours: M-SA 9AM-5PM

TRAN, UYEN THAO P

Provider ID: 206353
Provider Gender: Female
License number: A76709
NPI: 1891720355
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619) 515-2400
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* ME
Hours: M-SA 9AM-5PM

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2400
Fax:
After Hours Phone: (619) 515-2400
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* ME
Hours: M-SA 9AM-5PM

TRAN, UYEN THAO P

Provider ID: 206360
Provider Gender: Female
License number: A76709
NPI: 1891720355
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax: (619) 795-2756
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* ME
Hours: M-SA 9AM-5PM

VALENZUELA, TRICIA E

Provider ID: 206363
Provider Gender: Female
License number: A161373
NPI: 1346776358
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Phone: (619) 515-2560

Fax:

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

VILLA, MARIA T , MD

Provider ID: 107710

Provider Gender: Female

License number: A86224

NPI: 1861541385

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Tagalog

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

655 SATURN BLVD STE J
SAN DIEGO, CA 92154-4734

Phone: (619) 575-4442

Fax: (619) 575-1297

After Hours Phone: (619)

575-4442

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,
T, W

Hours: M-SA 9AM-5PM

VILLA, MARIA T

Provider ID: 107710

Provider Gender: Female

License number: A86224

NPI: 1861541385

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Tagalog

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

HEALTH EXCEL IPA INC

655 SATURN BLVD STE J
SAN DIEGO, CA 92154-4734

Phone: (619) 575-4442

Fax: (619) 575-1297

After Hours Phone: (619)

575-4442

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,
T, W

Hours: M-SA 9AM-5PM

WANG, KEVIN

Provider ID: 206362

Provider Gender: Male

License number: A158708

NPI: 1932635281

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax:

After Hours Phone: (619)

515-2424

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

WANG, REGINA M

Provider ID: 403583

Provider Gender: Female

License number: A109828

NPI: 1154554871

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Long Beach

Memorial Med Ctr, Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Board Certified Specialty: No

IHP-ST VINCENT DE PAUL

VILLA

1501 IMPERIAL AVE

SAN DIEGO, CA 92101-7638

Phone: (619) 233-8500

Fax:

After Hours Phone: (619)

233-8500

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

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

9AM-5PM

WHITE, KATHERINE N

Provider ID: 227409

Provider Gender: Female

License number: A120447

NPI: 1801112925

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 3177 OCEAN VIEW BLVD
 SAN DIEGO, CA 92113-1432
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM

WU, JENNIFER J

Provider ID: 403583
Provider Gender: Female
License number: A54702
NPI: 1215953013
Provider English Spoken: Yes
Provider Language(s) Spoken: Mandarin, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Board Certified Specialty: No
 IHP-ST VINCENT DE PAUL VILLA
 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101-7638
Phone: (619) 233-8500
Fax:
After Hours Phone: (619) 233-8500
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-F 8AM-5:30PM, SA 9AM-5PM

YUEN, SELENE

Provider ID: 364029
Provider Gender: Female
License number: A99615
NPI: 1932379443
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 4282 GENESEE AVE STE 102
 SAN DIEGO, CA 92117-4986
Phone: (858) 598-6789
Fax: (858) 598-6720
After Hours Phone: (858) 598-6789
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM

ZAHLER, MARVIN W

Provider ID: 417937
Provider Gender: Male
License number: 20A11612
NPI: 1134380710
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF

SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM

ZINK, IRENE M

Provider ID: 227409
Provider Gender: Female
License number: C54198
NPI: 1215959549
Provider English Spoken: Yes
Provider Language(s) Spoken: German
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 3177 OCEAN VIEW BLVD
 SAN DIEGO, CA 92113-1432
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM

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C. Directorio de proveedores de atención primaria

FQHC	SAN DIEGO, CA 92102-4715 Phone: (619) 515-2560 Fax: (619) 263-2499 After Hours Phone: (619) 515-2560 Website: www.fhcsd.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: ME Hours: M-SA 9AM-5PM	Provider Gender: License number: 550003108 NPI: 1477953933 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Board Certified Specialty: FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026 Phone: (619) 515-2426 Fax: (619) 255-8002 After Hours Phone: (619) 515-2426 Website: www.fhcsd.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM
<p>CITY HEIGHTS FAMILY HEALTH CENTERS INC, Provider ID: 206353 Provider Gender: License number: NPI: 1023054004 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Board Certified Specialty: FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 Phone: (619) 515-2400 Fax: (619) 546-9800 After Hours Phone: (619) 515-2400 Website: www.fhcsd.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: ME Hours: M-SA 9AM-5PM</p>	<p>DOWNTOWN FAMILY CTR AT CONNECTIONS, Provider ID: 417782 Provider Gender: License number: 550002251 NPI: 1588901045 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Board Certified Specialty: FAMILY HEALTH CENTERS OF SAN DIEGO 1250 6TH AVE STE 100 SAN DIEGO, CA 92101-4368 Phone: (619) 515-2430 Fax: (619) 578-2410 After Hours Phone: (619) 515-2430 Website: www.fhcsd.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: Hours: M-F 8AM-5PM, SA 9AM-5PM</p>	<p>FAMILY HEALTH CTR IBARRA, Provider ID: 417987 Provider Gender: License number: 550003108 NPI: 1841476553 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Board Certified Specialty: FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026 Phone: (619) 515-2426 Fax: (619) 255-8002 After Hours Phone: (619) 515-2426 Website: www.fhcsd.org</p>
<p>DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC, Provider ID: 206363 Provider Gender: License number: NPI: 1982747671 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Board Certified Specialty: FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST</p>	<p>FAMILY HEALTH CTR IBARRA, Provider ID: 417987</p>	

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C. Directorio de proveedores de atención primaria

<p><i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-F 8:30AM-5:30PM, SA 9AM-5PM</p> <p>FAMILY HEALTH CTR OF SD-ELM ST, <i>Provider ID:</i> 419167 <i>Provider Gender:</i> <i>License number:</i> 550002061 <i>NPI:</i> 1528331287 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 140 ELM ST SAN DIEGO, CA 92101-2602 <i>Phone:</i> (619) 515-2520 <i>Fax:</i> (619) 231-0431 <i>After Hours Phone:</i> (619) 515-2520 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> IB, E, R <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM</p> <p>FAMILY HEALTH CTR SAN DIEGO-OAK PARK, <i>Provider ID:</i> 418142 <i>Provider Gender:</i> <i>License number:</i> 550003556 <i>NPI:</i> 1336525906 <i>Provider English Spoken:</i> Yes</p>	<p><i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 5160 FEDERAL BLVD SAN DIEGO, CA 92105-5429 <i>Phone:</i> (619) 515-2454 <i>Fax:</i> (619) 794-2696 <i>After Hours Phone:</i> (619) 515-2454 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-F 8:30AM-5:30PM, SA 9AM-5PM</p> <p>FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL, <i>Provider ID:</i> 419529 <i>Provider Gender:</i> <i>License number:</i> 550003113 <i>NPI:</i> 1235521782 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 2325 COMMERCIAL ST STE 1400 SAN DIEGO, CA 92113-1195 <i>Phone:</i> (619) 515-2422 <i>Fax:</i> (619) 269-0053 <i>After Hours Phone:</i> (619) 515-2422 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes</p>	<p><i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM</p> <p>FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE, <i>Provider ID:</i> 417429 <i>Provider Gender:</i> <i>License number:</i> 550002865 <i>NPI:</i> 1952729303 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY # 2 SAN DIEGO, CA 92101-5713 <i>Phone:</i> (619) 515-2525 <i>Fax:</i> (619) 501-5814 <i>After Hours Phone:</i> (619) 515-2525 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-F 8:30AM-5:30PM, SA 9AM-5PM</p> <p>FAMILY HLTH CTR SAN DIEGO-BEACH AREA, <i>Provider ID:</i> 402851 <i>Provider Gender:</i> <i>License number:</i> 080000115 <i>NPI:</i> 1386689701 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No</p>
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C. Directorio de proveedores de atención primaria

Hospital Affiliation:
Board Certified Specialty:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2444
Fax: (858) 488-1394
After Hours Phone: (619)
 515-2444
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-W,F 8:30AM-5:30PM,
 TH 9AM-6PM, SA 9AM-5PM

FAMILY HLTH CTR SD HILLCREST,

Provider ID: 417937
Provider Gender:
License number: 550003099
NPI: 1629456900
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax: (619) 501-9645
After Hours Phone: (619)
 515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No

☯ *Accessibility:*
Hours: M-TH 8AM-9PM, F
 8AM-5PM, SA 9AM-5PM
**KING CHAVEZ HEALTH
 CENTER,**
Provider ID: 451167
Provider Gender:
License number:
NPI: 1538262092
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
 IHP-SAN YSIDRO HEALTH
 CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100
Fax: (619) 662-4158
After Hours Phone: (619)
 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* P, EB, IB, E, R,
 T, W
Hours: M-F 8AM-5PM, SA
 8AM-4PM

LA MAESTRA FAMILY CLINIC INC,

Provider ID: 185268
Provider Gender:
License number:
NPI: 1336353721
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:

LA MAESTRA FAMILY CLINIC
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105-1608
Phone: (619) 255-9155
Fax: (619) 795-9849
After Hours Phone: (619)
 255-9155
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* P, EB, IB, E, W
Hours: M-F 8AM-5PM, SA
 9AM-5PM

LA MAESTRA FAMILY CLINIC INC,

Provider ID: 185268
Provider Gender:
License number:
NPI: 1053526756
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
 LA MAESTRA FAMILY CLINIC
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105-1608
Phone: (619) 255-9155
Fax: (619) 795-9849
After Hours Phone: (619)
 255-9155
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* P, EB, IB, E, W
Hours: M-F 8AM-5PM, SA
 9AM-5PM

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C. Directorio de proveedores de atención primaria

LINDA VISTA HEALTH CARE CTR,

Provider ID: 206046
Provider Gender:
License number:
NPI: 1609905215
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
 IHP-SAN DIEGO FAMILY CARE
 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111-6342
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* P, EB, IB, E, R, T, W
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

LINDA VISTA HEALTH CARE CTR,

Provider ID: 206046
Provider Gender:
License number:
NPI: 1780665877
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
 IHP-SAN DIEGO FAMILY CARE
 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111-6342

Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* P, EB, IB, E, R, T, W
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

LOGAN HEIGHTS FAMILY HEALTH CENTER,

Provider ID: 206360
Provider Gender:
License number:
NPI: 1447281936
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:

FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax: (619) 234-2447
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* ME
Hours: M-SA 9AM-5PM

MID-CITY COMMUNITY CLINIC,

Provider ID: 233532

Provider Gender:
License number:
NPI: 1962483040
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
 IHP-SAN DIEGO FAMILY CARE
 4305 UNIVERSITY AVE STE 150
 SAN DIEGO, CA 92105-1690
Phone: (619) 280-2058
Fax: (858) 633-4682
After Hours Phone: (619) 280-2058
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/22
American Sign Language (ASL):
 No
 ☯ *Accessibility:* P, EB, IB, E, W
Hours: M-F 8AM-5PM, SA 8AM-2PM

MID-CITY COMMUNITY CLINIC,

Provider ID: 233597
Provider Gender:
License number:
NPI: 1962483040
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
 IHP-SAN DIEGO FAMILY CARE
 4290 POLK AVE
 SAN DIEGO, CA 92105-1524
Phone: (619) 563-0507
Fax: (858) 633-4681
After Hours Phone: (619) 563-0507
Website: www.sdfamilycare.org
Email:

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C. Directorio de proveedores de atención primaria

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

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

8AM-2PM

NESTOR COMMUNITY HEALTH CENTER,

Provider ID: 214492

Provider Gender:

License number: 550001474

NPI: 1215246996

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty:

IHP-IMPERIAL BEACH HEALTH CENTER

1016 OUTER RD

SAN DIEGO, CA 92154-1351

Phone: (619) 429-3733

Fax: (619) 628-5550

After Hours Phone: (619)

429-3733

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: P, IB, E, R, T, W

Hours: M,F 8AM-5PM, TU-TH

8AM-8PM, SA 9AM-5PM

NORTH PARK FAMILY HEALTH CENTERS,

Provider ID: 206362

Provider Gender:

License number:

NPI: 1700821303

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty:

FAMILY HEALTH CENTERS OF

SAN DIEGO

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax: (619) 501-0627

After Hours Phone: (619)

515-2424

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

NORTH PARK FAMILY HEALTH CENTERS,

Provider ID: 416831

Provider Gender:

License number: 090000469

NPI: 1700821303

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty:

FAMILY HEALTH CENTERS OF

SAN DIEGO

3514 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax: (619) 683-7586

After Hours Phone: (619)

515-2424

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility: ME

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

9AM-5PM

OPERATION SAMAHAN - MIRA MESA,

Provider ID: 417101

Provider Gender:

License number: 080000146

NPI: 1871680397

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty:

OPERATION SAMAHAN

10737 CAMINO RUIZ STE 235

SAN DIEGO, CA 92126-2375

Phone: (844) 200-2426

Fax: (858) 578-4417

After Hours Phone: (844)

200-2426

Website:

www.operationsamahan.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-F 8AM-4:30PM, SA

9AM-5PM

OPERATION SAMAHAN - MIRA MESA,

Provider ID: 432308

Provider Gender:

License number: 080000146

NPI: 1861933897

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty:

OPERATION SAMAHAN

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

9855 ERMA RD STE 105
SAN DIEGO, CA 92131-1007
Phone: (844) 200-2426
Fax: (858) 536-8034
After Hours Phone: (844)
200-2426
Website:
www.operationsamahan.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

**OPERATION SAMAHAN
RANCHO PENASQUITOS,**
Provider ID: 418535
Provider Gender:
License number: 550003857
NPI: 1699216622
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
OPERATION SAMAHAN
9995 CARMEL MOUNTAIN RD
STE B10 AND B11
SAN DIEGO, CA 92129-2889
Phone: (844) 200-2426
Fax: (858) 695-9074
After Hours Phone: (844)
200-2426
Website:
www.operationsamahan.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M,TU,TH,F
8:30AM-5:30PM, W 10AM-7PM,

SA 9AM-5PM
**OPERATION SAMAHAN
RANCHO PENASQUITOS,**
Provider ID: 418535
Provider Gender:
License number: 550002478
NPI: 1699216622
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
OPERATION SAMAHAN
9995 CARMEL MOUNTAIN RD
STE B10 AND B11
SAN DIEGO, CA 92129-2889
Phone: (844) 200-2426
Fax: (858) 695-9074
After Hours Phone: (844)
200-2426
Website:
www.operationsamahan.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M,TU,TH,F
8:30AM-5:30PM, W 10AM-7PM,
SA 9AM-5PM

**SAN DIEGO AMERICAN
INDIAN HEALTH CENTER,**
Provider ID: 207382
Provider Gender:
License number: 090000168
NPI: 1003902917
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
IHP-SAN DIEGO AMERICAN

INDIAN HEALTH CENTER
2630 1ST AVE
SAN DIEGO, CA 92103-6599
Phone: (619) 234-2158
Fax: (619) 234-0505
After Hours Phone: (619)
234-2158
Website: www.sdaihc.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM

SAN DIEGO FAMILY CARE,
Provider ID: 482070
Provider Gender:
License number:
NPI: 1457724858
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
IHP-SAN DIEGO FAMILY CARE
7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858)
279-0925
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
W
Hours: M,W-F 8:30AM-5:30PM,
TU 8:30AM-8:30PM, SA
9AM-4PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

<p>SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE, <i>Provider ID:</i> 517403 <i>Provider Gender:</i> <i>License number:</i> <i>NPI:</i> 1598308926 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> IHP-SAN YSIDRO HEALTH CENTER</p>	<p><i>Phone:</i> (619) 662-4100 <i>Fax:</i> (619) 595-0258 <i>After Hours Phone:</i> (619) 662-4100 <i>Website:</i> www.ihpsocal.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM</p>	<p><i>Provider ID:</i> 356145 <i>Provider Gender:</i> <i>License number:</i> <i>NPI:</i> 1174549232 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 2391 ISLAND AVE SAN DIEGO, CA 92102-2941 <i>Phone:</i> (619) 515-2435 <i>Fax:</i> (619) 515-2435 <i>After Hours Phone:</i> (619) 515-2435 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> P, EB, IB, E, R, T, ME <i>Hours:</i> M-SA 9AM-5PM</p>
<p>SAN YSIDRO HEALTH CHC - OCEAN VIEW, <i>Provider ID:</i> 227409 <i>Provider Gender:</i> <i>License number:</i> <i>NPI:</i> 1326225632 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> IHP-SAN YSIDRO HEALTH CENTER 3177 OCEAN VIEW BLVD SAN DIEGO, CA 92113-1432</p>	<p>SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED, <i>Provider ID:</i> 517998 <i>Provider Gender:</i> <i>License number:</i> 550003882 <i>NPI:</i> 1205477841 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> IHP-SAN YSIDRO HEALTH CENTER 4690 EL CAJON BLVD SAN DIEGO, CA 92115-4403 <i>Phone:</i> (619) 662-4100 <i>Fax:</i> <i>After Hours Phone:</i> (619) 662-4100 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/120 <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM</p>	<p>ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER, <i>Provider ID:</i> 403583 <i>Provider Gender:</i> <i>License number:</i> 090000297 <i>NPI:</i> 1598122871 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> IHP-ST VINCENT DE PAUL VILLA 1501 IMPERIAL AVE SAN DIEGO, CA 92101-7638</p>
<p>SAN YSIDRO HEALTH CHC - OCEAN VIEW, <i>Provider ID:</i> 227409 <i>Provider Gender:</i> <i>License number:</i> <i>NPI:</i> 1326225632 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> IHP-SAN YSIDRO HEALTH CENTER 3177 OCEAN VIEW BLVD SAN DIEGO, CA 92113-1432</p>	<p>SHERMAN HEIGHTS FAMILY HLTH CTRS INC,</p>	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

<p>Phone: (619) 233-8500 Fax: (619) 687-1067 After Hours Phone: (619) 233-8500 Website: Email: Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-F 8AM-5:30PM, SA 9AM-5PM</p>	<p>8AM-5PM, SA 9AM-5PM CUMMINS, ANDREW B Provider ID: 417937 Provider Gender: Male License number: A102764 NPI: 1699917096 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 Phone: (619) 515-2545 Fax: After Hours Phone: (619) 515-2545 Website: www.fhcsd.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM</p>	<p>Chula Vista Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 Phone: (619) 515-2545 Fax: After Hours Phone: (619) 515-2545 Website: www.fhcsd.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM</p>
GASTROENTEROLOGY		
<p>CHANDRADAS, SAJIV H Provider ID: 417937 Provider Gender: Male License number: A122474 NPI: 1720350465 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Green Hospital, Scripps Mercy Hospital Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 Phone: (619) 515-2545 Fax: After Hours Phone: (619) 515-2545 Website: www.fhcsd.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: Hours: M-TH 8AM-9PM, F</p>	<p>DUBOIS, SUJA D Provider ID: 417937 Provider Gender: Female License number: A86651 NPI: 1013976612 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital</p>	<p>FRENETTE, CATHERINE T Provider ID: 417937 Provider Gender: Female License number: A80461 NPI: 1417935081 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Green Hospital, Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista, California Pacific Med Ctr Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 Phone: (619) 515-2545 Fax: After Hours Phone: (619) 515-2545 Website: www.fhcsd.org Email: Medi-Cal Open Panel: Yes</p>

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C. Directorio de proveedores de atención primaria

Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-TH 8AM-9PM, F
 8AM-5PM, SA 9AM-5PM

GADDIPATI, KISHORE V

Provider ID: 417937
 Provider Gender: Male
 License number: A111638
 NPI: 1720114093
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Hindi, Spanish, Telugu, Urdu
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy
 Hospital
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
 Fax:

After Hours Phone: (619)
 515-2545

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
 No

Accessibility:

Hours: M-TH 8AM-9PM, F
 8AM-5PM, SA 9AM-5PM

STIPHO, SALLY

Provider ID: 417937
 Provider Gender: Female
 License number: A104647
 NPI: 1467642215
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 French

Cultural Competency: No
 Hospital Affiliation: Scripps Mercy
 Hospital, Kindred Hospital San
 Diego, Scripps Mercy Hospital
 Chula Vista

Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

4094 4TH AVE
 SAN DIEGO, CA 92103-2143

Phone: (619) 515-2545

Fax:

After Hours Phone: (619)
 515-2545

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
 No

Accessibility:

Hours: M-TH 8AM-9PM, F
 8AM-5PM, SA 9AM-5PM

GENERAL PRACTICE

BORRERO, MARCOS

Provider ID: 100677
 Provider Gender: Male
 License number: A38907
 NPI: 1952312621
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp Chula
 Vista Med Ctr, Scripps Mercy
 Hospital Chula Vista
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 3490 PALM AVE
 SAN DIEGO, CA 92154-1664

Phone: (619) 423-5616

Fax: (619) 423-5686

After Hours Phone: (619)
 423-5616

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
 No

Accessibility: P, EB, IB, E, R

Hours: M-SA 9AM-5PM

BORRERO, MARCOS

Provider ID: 100677
 Provider Gender: Male
 License number: A38907
 NPI: 1952312621
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp Chula
 Vista Med Ctr, Scripps Mercy
 Hospital Chula Vista
 Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 3490 PALM AVE
 SAN DIEGO, CA 92154-1664
 Phone: (619) 423-5616
 Fax: (619) 423-5686
 After Hours Phone: (619)
 423-5616
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: P, EB, IB, E, R
 Hours: M-SA 9AM-5PM

DOAN STEPHENS, CRYSTAL T

Provider ID: 233532

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Provider Gender: Female
License number: A152267
NPI: 1730570144
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE
4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105-1690
Phone: (619) 280-2058

Fax:
After Hours Phone: (619)
280-2058
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/22
American Sign Language (ASL):
No
♿ *Accessibility:* P, EB, IB, E, W
Hours: M-F 8AM-5PM, SA
8AM-2PM

DWABE, KEFAH T , MD

Provider ID: 108795
Provider Gender: Male
License number: A94193
NPI: 1477656049
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Burmese, Cambodian,
Thai
Cultural Competency: No
Hospital Affiliation: Alvarado
Hosp Med Ctr
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4863 EL CAJON BLVD # A
SAN DIEGO, CA 92115-4636

Phone: (619) 286-9000
Fax: (619) 286-9004
After Hours Phone: (619)
286-9000
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM

DWABE, KEFAH T

Provider ID: 108795
Provider Gender: Male
License number: A94193
NPI: 1477656049
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Burmese, Cambodian,
Thai
Cultural Competency: No
Hospital Affiliation: Alvarado
Hosp Med Ctr
Board Certified Specialty: No
HEALTH EXCEL IPA INC
4863 EL CAJON BLVD # A
SAN DIEGO, CA 92115-4636
Phone: (619) 286-9000
Fax: (619) 286-9004
After Hours Phone: (619)
286-9000
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 3/99
American Sign Language (ASL):
No
♿ *Accessibility:* P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM

HEGYI, EDIT E

Provider ID: 471886
Provider Gender: Female

License number: A89002
NPI: 1396039301
Provider English Spoken: Yes
Provider Language(s) Spoken:
French, Hungarian
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Board Certified Specialty: No
HEALTH EXCEL IPA INC
16769 BERNARDO CENTER DR
K13
SAN DIEGO, CA 92128-2546
Phone: (760) 990-3523
Fax: (858) 524-6204
After Hours Phone: (760)
990-3523
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM

KIDOKORO, YASUKO

Provider ID: 496743
Provider Gender: Female
License number: A32727
NPI: 1124130901
Provider English Spoken: Yes
Provider Language(s) Spoken:
Japanese
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Sharp
Coronado Hosp And Healthcare
Ctr
Board Certified Specialty: No
HEALTH EXCEL IPA INC
5222 BALBOA AVE STE 31
SAN DIEGO, CA 92117-6952

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C. Directorio de proveedores de atención primaria

Phone: (858) 277-9669

Fax: (858) 277-9901

After Hours Phone: (858)
277-9669

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

RAZON, ANNABELLE S

Provider ID: 58323

Provider Gender: Female

License number: A42407

NPI: 1649301946

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Tagalog

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital

Board Certified Specialty: No

HEALTH EXCEL IPA INC

9190 MIRA MESA BLVD

SAN DIEGO, CA 92126-4804

Phone: (858) 689-1814

Fax: (858) 689-1807

After Hours Phone: (858)

689-1814

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

RECALDE, FRANCISCO J

Provider ID: 13850

Provider Gender: Male

License number: C41872

NPI: 1538309067

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital

Board Certified Specialty: No

IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD

3811 EL CAJON BLVD

SAN DIEGO, CA 92105-1020

Phone: (619) 284-5622

Fax: (619) 283-2572

After Hours Phone: (619)

507-3050

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, R,

T, W

Hours: M-SA 9AM-5PM

RECALDE, FRANCISCO J

Provider ID: 13850

Provider Gender: Male

License number: C41872

NPI: 1538309067

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital

Board Certified Specialty: No

HEALTH EXCEL IPA INC

3811 EL CAJON BLVD

SAN DIEGO, CA 92105-1020

Phone: (619) 284-5622

Fax: (619) 283-2572

After Hours Phone: (619)

507-3050

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, R,
T, W

Hours: M-SA 9AM-5PM

SIDRICK, NADINE E

Provider ID: 517998

Provider Gender: Female

License number: G42131

NPI: 1134140718

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH

CENTER

4690 EL CAJON BLVD

SAN DIEGO, CA 92115-4403

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/120

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

SIDRICK, NADINE E

Provider ID: 532698

Provider Gender: Female

License number: G42131

NPI: 1134140718

Provider English Spoken: Yes

Provider Language(s) Spoken:

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 4690 EL CAJON BLVD
 SAN DIEGO, CA 92115-4403
Phone: (619) 662-4100
Fax: (619) 824-9076
After Hours Phone: (619)
 662-4100
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM

TEW, RICHARD H

Provider ID: 207382
Provider Gender: Male
License number: G23820
NPI: 1679572911
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN DIEGO AMERICAN
 INDIAN HEALTH CENTER
 2630 1ST AVE
 SAN DIEGO, CA 92103-6599
Phone: (619) 234-2158
Fax:
After Hours Phone: (619)
 234-2158
Website: www.sdaihc.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W

Hours: M-F 8AM-5PM, SA
 9AM-5PM
VO, DUC D
Provider ID: 81143
Provider Gender: Male
License number: A43289
NPI: 1427096627
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish, Vietnamese
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital, Rady Childrens
 Hospital San Diego, Scripps
 Mercy Hospital Chula Vista
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 2418 ULRIC ST
 SAN DIEGO, CA 92111-6040
Phone: (858) 560-1226
Fax: (858) 560-1205
After Hours Phone: (858)
 560-1226
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM

VO, DUC D

Provider ID: 81143
Provider Gender: Male
License number: A43289
NPI: 1427096627
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish, Vietnamese
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital, Rady Childrens
 Hospital San Diego, Scripps

Mercy Hospital Chula Vista
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 2418 ULRIC ST
 SAN DIEGO, CA 92111-6040
Phone: (858) 560-1226
Fax: (858) 560-1205
After Hours Phone: (858)
 560-1226
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM

HEPATOLOGY

GISH, ROBERT G

Provider ID: 185268
Provider Gender: Male
License number: G45632
NPI: 1548281322
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Dutch, French, Spanish,
 Vietnamese
Cultural Competency: No
Hospital Affiliation: Providence
 Santa Rosa Memorial Hospital,
 Ucsd Medical Ctr, Stanford
 Health Care, California Pacific
 Med Ctr, Selma Community
 Hospital, Adventist Medical
 Center, Adventist Med Ctr
 Reedley, Loma Linda University
 Comm Med Ctr, Regional
 Medical Ctr Of San Jose
Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105-1608

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Phone: (619) 255-9155

Fax:

After Hours Phone: (619)
255-9155

Website: www.lamaestra.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, W

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

9AM-5PM

INFECTIOUS DISEASE

LEWINSKI, MARY K

Provider ID: 417937

Provider Gender: Female

License number: A109633

NPI: 1659535094

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2545

Fax:

After Hours Phone: (619)

515-2545

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-TH 8AM-9PM, F

8AM-5PM, SA 9AM-5PM

INTERNAL MEDICINE GERIATRIC MEDICINE

MBA, MBA UZOMA U

Provider ID: 206360

Provider Gender: Male

License number: A155048

NPI: 1659720647

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

INTERNAL MEDICINE

ALASSIL, SALLY

Provider ID: 206360

Provider Gender: Female

License number: A122238

NPI: 1982044483

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

ALASSIL, SALLY

Provider ID: 419529

Provider Gender: Female

License number: A122238

NPI: 1982044483

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

2325 COMMERCIAL ST STE

1400

SAN DIEGO, CA 92113-1195

Phone: (619) 515-2422

Fax:

After Hours Phone: (619)

515-2422

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

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

9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

ALDOUS, JEANNETTE L

Provider ID: 451167
Provider Gender: Female
License number: A101017
NPI: 1073650339
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus, Ucsd Medical Ctr, Pomerado Hospital, Palomar Medical Center
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:* P, EB, IB, E, R, T, W
Hours: M-F 8AM-5PM, SA 8AM-4PM

AMATYA, SUBHA L

Provider ID: 417429
Provider Gender: Female
License number: A150777
NPI: 1861837221
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF

SAN DIEGO

1550 BROADWAY # 2
 SAN DIEGO, CA 92101-5713
Phone: (619) 515-2525
Fax:
After Hours Phone: (619) 515-2525
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:*
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

ANDERSON, KENDELL R

Provider ID: 417937
Provider Gender: Female
License number: 20A15598
NPI: 1285028191
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:*
Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM

ANDREWS, JOHN S

Provider ID: 403583
Provider Gender: Male
License number: G71080
NPI: 1003164302
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-ST VINCENT DE PAUL VILLA
 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101-7638
Phone: (619) 233-8500
Fax:
After Hours Phone: (619) 233-8500
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ♿ *Accessibility:*
Hours: M-F 8AM-5:30PM, SA 9AM-5PM

BAUTISTA, ARWINNAH

Provider ID: 554239
Provider Gender: Female
License number: C51221
NPI: 1073579173
Provider English Spoken: Yes
Provider Language(s) Spoken: Tagalog
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc, Paradise Valley Hospital, Sharp Memorial Hospital
Board Certified Specialty: No
HEALTH EXCEL IPA INC

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

9190 MIRA MESA BLVD
SAN DIEGO, CA 92126-4804
Phone: (858) 689-1814
Fax:
After Hours Phone: (858)
689-1814
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-F 10AM-6PM, SA
9AM-5PM

BLACK, JENNIFER M

Provider ID: 540294
Provider Gender: Female
License number: A84075
NPI: 1194763326
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Board Certified Specialty: No
HEALTH EXCEL IPA INC
12843 EL CAMINO REAL STE
203
SAN DIEGO, CA 92130-2966
Phone: (858) 554-1212
Fax: (858) 554-1222
After Hours Phone: (858)
554-1212
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

BOHR, CHRISTINA T

Provider ID: 417937
Provider Gender: Female
License number: 20A17702
NPI: 1841794344
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619)
515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-TH 8AM-9PM, F
8AM-5PM, SA 9AM-5PM

CAMERON, SHERI A

Provider ID: 550223
Provider Gender: Female
License number: A144234
NPI: 1568859411
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Scripps
Memorial Hospital
Board Certified Specialty: No
HEALTH EXCEL IPA INC
4142 ADAMS AVE STE 102
SAN DIEGO, CA 92116-2593

Phone: (858) 617-0717
Fax: (858) 795-1195
After Hours Phone: (858)
617-0717
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

CAMERON, SHERI A

Provider ID: 550224
Provider Gender: Female
License number: A144234
NPI: 1568859411
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Scripps
Memorial Hospital
Board Certified Specialty: No
HEALTH EXCEL IPA INC
3180 UNIVERSITY AVE STE
120
SAN DIEGO, CA 92104-2046
Phone: (858) 529-7229
Fax: (858) 795-1195
After Hours Phone: (858)
529-7229
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

CARRERA, JORGE A

Provider ID: 451167
Provider Gender: Male

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C. Directorio de proveedores de atención primaria

License number: G58033
NPI: 1184728586
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital Encinitas
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100
Fax: (619) 662-4158
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* P, EB, IB, E, R, T, W
Hours: M-F 8AM-5PM, SA 8AM-4PM

CHEN, JAMES Y
Provider ID: 417937
Provider Gender: Male
License number: A86644
NPI: 1265495691
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143

Phone: (619) 515-2545
Fax:
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM

CSAPOCZI, PETER
Provider ID: 451167
Provider Gender: Male
License number: A96919
NPI: 1841357118
Provider English Spoken: Yes
Provider Language(s) Spoken: Hungarian, Ukrainian
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* P, EB, IB, E, R, T, W
Hours: M-F 8AM-5PM, SA 8AM-4PM

DAHMS, ERIC B

Provider ID: 417937
Provider Gender: Male
License number: G80316
NPI: 1306808464
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM

DARAMOLA, IYABO O , MD
Provider ID: 103742
Provider Gender: Female
License number: A63633
NPI: 1851378236
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital, Sharp Chula Vista Med Ctr
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 2401 REO DR
 SAN DIEGO, CA 92139-3025

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C. Directorio de proveedores de atención primaria

Phone: (619) 479-6767
Fax: (619) 434-8840
After Hours Phone: (619)
479-6767

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

DE CARVALHO, CARLOS T , MD

Provider ID: 440219

Provider Gender: Male

License number: A38504

NPI: 1518983543

Provider English Spoken: Yes

Provider Language(s) Spoken:

Portuguese, Spanish, Tagalog

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

2939 BEYER BLVD

SAN DIEGO, CA 92154-4604

Phone: (619) 423-0343

Fax: (619) 423-0340

After Hours Phone: (619)

423-0343

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 15/100

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, R, T

Hours: M-SA 9AM-5PM

DODGE, JOHN M

Provider ID: 417937

Provider Gender: Male

License number: G67831

NPI: 1770510489

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2545

Fax:

After Hours Phone: (619)

515-2545

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-TH 8AM-9PM, F

8AM-5PM, SA 9AM-5PM

ELIAS, RAMIZ N

Provider ID: 409335

Provider Gender: Male

License number: A99956

NPI: 1417164518

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital, Alvarado Hosp Med Ctr,

Sharp Chula Vista Med Ctr

Board Certified Specialty: No

HEALTH EXCEL IPA INC

7695 CARDINAL CT STE 375 #

370-375

SAN DIEGO, CA 92123-3339

Phone: (858) 384-7072

Fax: (858) 277-1475

After Hours Phone: (858)

384-7072

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

ELIAS, RAMIZ N , MD

Provider ID: 409335

Provider Gender: Male

License number: A99956

NPI: 1417164518

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital, Alvarado Hosp Med Ctr,

Sharp Chula Vista Med Ctr

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

7695 CARDINAL CT STE 375 #

370-375

SAN DIEGO, CA 92123-3339

Phone: (858) 384-7072

Fax: (858) 277-1475

After Hours Phone: (858)

384-7072

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

FABELLA, GABRIEL T , MD

Provider ID: 9774

Provider Gender: Male

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C. Directorio de proveedores de atención primaria

License number: A48087
NPI: 1124060827
Provider English Spoken: Yes
Provider Language(s) Spoken: Japanese, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
10737 CAMINO RUIZ STE 115
SAN DIEGO, CA 92126-2361
Phone: (858) 695-1262
Fax: (858) 695-2132
After Hours Phone: (858) 695-1262
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, W
Hours: M-SA 9AM-5PM

FARASAT, SADAF

Provider ID: 206360
Provider Gender: Female
License number: A147939
NPI: 1255696407
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Punjabi, Urdu
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr, Natividad Medical Center
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

FEDER, GLEN A

Provider ID: 417937
Provider Gender: Male
License number: 20A17926
NPI: 1518461110
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM

GEHR, MARC K

Provider ID: 417937

Provider Gender: Male
License number: G67338
NPI: 1306800180
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM

GRUNVALD, EUGENIO R

Provider ID: 290232
Provider Gender: Male
License number: C50471
NPI: 1942356662
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Alvarado Hosp Med Ctr
Board Certified Specialty: Yes
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
995 GATEWAY CENTER WAY
STE 202
SAN DIEGO, CA 92102-4545

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Phone: (619) 264-3107
Fax: (619) 264-6927
After Hours Phone: (619)
264-3107

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

GUHA ROY, ASIM

Provider ID: 236026

Provider Gender: Male

License number: A62010

NPI: 1083659528

Provider English Spoken: Yes

Provider Language(s) Spoken:

Bengali, Hindi, Malay, Spanish

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Scripps

Memorial Hospital

Board Certified Specialty: No

HEALTH EXCEL IPA INC

4540 KEARNY VILLA RD STE

106

SAN DIEGO, CA 92123-1564

Phone: (858) 430-6656

Fax: (858) 256-5424

After Hours Phone: (619)

270-4919

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 18/99

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

HAMMETT, ERIN K

Provider ID: 206363

Provider Gender: Female

License number: 20A14025

NPI: 1467884098

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Sharp

Coronado Hosp And Healthcare

Ctr, Santa Barbara Cottage

Hosp, Goleta Valley Cottage

Hosp

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: (619) 515-2560

Fax:

After Hours Phone: (619)

515-2560

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

HAN, PAUL J

Provider ID: 417937

Provider Gender: Male

License number: A116816

NPI: 1053553339

Provider English Spoken: Yes

Provider Language(s) Spoken:

Korean

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital Chula Vista, Scripps

Mercy Hospital

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2545

Fax:

After Hours Phone: (619)

515-2545

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-TH 8AM-9PM, F

8AM-5PM, SA 9AM-5PM

HAZELBAKER, PAUL N

Provider ID: 417782

Provider Gender: Male

License number: 20A7147

NPI: 1831106103

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

1250 6TH AVE STE 100

SAN DIEGO, CA 92101-4368

Phone: (619) 515-2430

Fax:

After Hours Phone: (619)

515-2430

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

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

9AM-5PM

HENDERSON, PHILIP L

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Provider ID: 417937
Provider Gender: Male
License number: A140324
NPI: 1447678834
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545

Fax:
After Hours Phone: (619)
 515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 & Accessibility:
Hours: M-TH 8AM-9PM, F
 8AM-5PM, SA 9AM-5PM

HIGGINSON, MICHELLE C

Provider ID: 417937
Provider Gender: Female
License number: A74420
NPI: 1114955879
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital, Scripps Mercy Hospital
 Chula Vista
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143

Phone: (619) 515-2545
Fax:
After Hours Phone: (619)
 515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 & Accessibility:
Hours: M-TH 8AM-9PM, F
 8AM-5PM, SA 9AM-5PM

JACKSON, GAVIN N

Provider ID: 417937
Provider Gender: Male
License number: A110647
NPI: 1609033182
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619)
 515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 & Accessibility:
Hours: M-TH 8AM-9PM, F
 8AM-5PM, SA 9AM-5PM

KARCHES, KELLI C

Provider ID: 417937
Provider Gender: Female
License number: A80931
NPI: 1891997631
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital, Scripps Mercy Hospital
 Chula Vista, Ucsd La Jolla John
 Sally Thornton, Ucsd Medical Ctr
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619)
 515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 & Accessibility:
Hours: M-TH 8AM-9PM, F
 8AM-5PM, SA 9AM-5PM

KHANNA, POORNIMA

Provider ID: 454121
Provider Gender: Female
License number: A70714
NPI: 1598862583
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Hindi, Kannada
Cultural Competency: No
Hospital Affiliation: Sharp
 Memorial Hospital
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105-1608

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Phone: (619) 255-9155

Fax: (619) 640-3584

After Hours Phone: (619)
255-9155

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E

Hours: M-SA 9AM-5PM

KRIJGER, LISA C

Provider ID: 403583

Provider Gender: Female

License number: A67762

NPI: 1932278710

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-ST VINCENT DE PAUL

VILLA

1501 IMPERIAL AVE

SAN DIEGO, CA 92101-7638

Phone: (619) 233-8500

Fax:

After Hours Phone: (619)

233-8500

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

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

9AM-5PM

LALITHAKUMARI, ARYA

Provider ID: 206362

Provider Gender: Female

License number: A140646

NPI: 1265874010

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Hemet Global

Medical Center, Menifee Global

Medical Center

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax:

After Hours Phone: (619)

515-2424

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

LAMANTIA, MICHELE A

Provider ID: 451167

Provider Gender: Female

License number: G71855

NPI: 1124176102

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH

CENTER

950 S EUCLID AVE

SAN DIEGO, CA 92114-6201

Phone: (619) 428-4463

Fax:

After Hours Phone: (619)

428-4463

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, R,

T, W

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

8AM-4PM

LEE, MICHAEL W

Provider ID: 206360

Provider Gender: Male

License number: A71671

NPI: 1760406649

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Scripps

Green Hospital

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

LE, CHARLES N

Provider ID: 165325

Provider Gender: Male

License number: A124891

NPI: 1821243759

Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc, Paradise Valley Hospital, Vibra Hospital Of San Diego, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
HEALTH EXCEL IPA INC
 4440 EUCLID AVE
 SAN DIEGO, CA 92115-4522
Phone: (619) 521-6812
Fax: (619) 521-6802
After Hours Phone: (619) 521-6812
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM

LE, CHARLES N , MD

Provider ID: 272919
Provider Gender: Male
License number: A124891
NPI: 1821243759
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Alvarado Hospital Llc, Paradise Valley Hospital, Vibra Hospital Of San Diego, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 4440 EUCLID AVE # A
 SAN DIEGO, CA 92115-4522

Phone: (619) 521-6812
Fax: (619) 521-6802
After Hours Phone: (619) 521-6812
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM

MARCINIAK, ROMAN J

Provider ID: 206360
Provider Gender: Male
License number: 20A17072
NPI: 1326579210
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* ME
Hours: M-SA 9AM-5PM

MARQUARDT, DIANA L

Provider ID: 233597
Provider Gender: Female
License number: G44220
NPI: 1114909454

Provider English Spoken: Yes
Provider Language(s) Spoken: French, German, Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: Yes
IHP-SAN DIEGO FAMILY CARE
 4290 POLK AVE
 SAN DIEGO, CA 92105-1524
Phone: (619) 563-0507
Fax:
After Hours Phone: (619) 563-0507
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 8AM-2PM

MOORE, LUCY D

Provider ID: 403583
Provider Gender: Female
License number: A52582
NPI: 1558396135
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Board Certified Specialty: No
IHP-ST VINCENT DE PAUL VILLA
 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101-7638
Phone: (619) 233-8500
Fax:
After Hours Phone: (619) 233-8500
Website:
Email:
Medi-Cal Open Panel: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-F 8AM-5:30PM, SA
 9AM-5PM

NANDURI, RAMACHANDER

Provider ID: 22720
 Provider Gender: Male
 License number: C50916
 NPI: 1093721896
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Hindi, Kannada, Spanish, Tamil,
 Telugu
 Cultural Competency: No
 Hospital Affiliation: Alvarado
 Hospital Llc
 Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 995 GATEWAY CENTER WAY
 STE 202
 SAN DIEGO, CA 92102-4545
 Phone: (619) 264-3107
 Fax: (619) 264-6927
 After Hours Phone: (619)
 264-3107
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM

NANDURI, RAMACHANDER, MD

Provider ID: 22720
 Provider Gender: Male
 License number: C50916
 NPI: 1093721896
 Provider English Spoken: Yes

Provider Language(s) Spoken:
 Hindi, Kannada, Spanish, Tamil,
 Telugu
 Cultural Competency: No
 Hospital Affiliation: Alvarado
 Hospital Llc
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 995 GATEWAY CENTER WAY
 STE 202
 SAN DIEGO, CA 92102-4545
 Phone: (619) 264-3107
 Fax: (619) 264-6927
 After Hours Phone: (619)
 264-3107
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM

NANDURI, RAMACHANDER

Provider ID: 22720
 Provider Gender: Male
 License number: C50916
 NPI: 1093721896
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Hindi, Kannada, Spanish, Tamil,
 Telugu
 Cultural Competency: No
 Hospital Affiliation: Alvarado
 Hospital Llc
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 995 GATEWAY CENTER WAY
 STE 202
 SAN DIEGO, CA 92102-4545
 Phone: (619) 264-3107
 Fax: (619) 264-6927
 After Hours Phone: (619)
 264-3107

Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 19/100
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM

NARANJO, RODRIGO A

Provider ID: 206046
 Provider Gender: Male
 License number: A119010
 NPI: 1609095264
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-SAN DIEGO FAMILY CARE
 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111-6342
 Phone: (858) 279-0925
 Fax:
 After Hours Phone: (858)
 279-0925
 Website: www.sdfamilycare.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: P, EB, IB, E, R,
 T, W
 Hours: M-F 8:30AM-5:30PM, SA
 9AM-5PM

NARANJO, RODRIGO A

Provider ID: 482070
 Provider Gender: Male
 License number: A119010
 NPI: 1609095264
 Provider English Spoken: Yes
 Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN DIEGO FAMILY CARE
 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111-6307
Phone: (858) 279-0925
Fax:
After Hours Phone: (858)
 279-0925
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* P, EB, IB, E, R,
 W
Hours: M,W-F 8:30AM-5:30PM,
 TU 8:30AM-8:30PM, SA
 9AM-4PM

NGUYEN, TUE T

Provider ID: 44830
Provider Gender: Female
License number: A49831
NPI: 1548226178
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Vietnamese
Cultural Competency: No
Hospital Affiliation: Sharp
 Memorial Hospital
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 4551 EL CAJON BLVD
 SAN DIEGO, CA 92115-4316
Phone: (619) 280-7185
Fax: (619) 280-0994
After Hours Phone: (619)
 280-7185
Website:
Email:
Medi-Cal Open Panel: Yes

Min/Max Age: 18/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:* P, EB, IB, E, W
Hours: M-SA 9AM-5PM

NGUYEN, TUE T , MD

Provider ID: 44830
Provider Gender: Female
License number: A49831
NPI: 1548226178
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Vietnamese
Cultural Competency: No
Hospital Affiliation: Sharp
 Memorial Hospital
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 4551 EL CAJON BLVD
 SAN DIEGO, CA 92115-4316
Phone: (619) 280-7185
Fax: (619) 280-0994
After Hours Phone: (619)
 280-7185
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:* P, EB, IB, E, W
Hours: M-SA 9AM-5PM

PARIKH, MILIND D

Provider ID: 206363
Provider Gender: Male
License number: 20A13745
NPI: 1194161406
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Gujarati, Hindi, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula
 Vista Med Ctr

Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2560
Fax:
After Hours Phone: (619)
 515-2560
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* ME
Hours: M-SA 9AM-5PM

PRATHIPATI, KUMARA S

Provider ID: 7778
Provider Gender: Male
License number: A40438
NPI: 1538267778
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Hindi, Spanish, Tagalog, Telugu
Cultural Competency: No
Hospital Affiliation: Alvarado
 Hospital Llc
Board Certified Specialty: Yes
 HEALTH EXCEL IPA INC
 4276 54TH PL STE B
 SAN DIEGO, CA 92115-6011
Phone: (619) 286-3222
Fax: (619) 286-3223
After Hours Phone: (619)
 286-3222
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

PRATHIPATI, LAKSHMI

Provider ID: 40002
Provider Gender: Female
License number: A47821
NPI: 1245338490
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog, Telugu
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc
Board Certified Specialty: No
HEALTH EXCEL IPA INC
4276 54TH PL STE B
SAN DIEGO, CA 92115-6011
Phone: (619) 286-3222
Fax: (619) 286-3223
After Hours Phone: (619) 286-3222
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM

RAMERS, CHRISTIAN

Provider ID: 417937
Provider Gender: Male
License number: A119631
NPI: 1730381385
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143

Phone: (619) 515-2545

Fax:

After Hours Phone: (619) 515-2545

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

Accessibility:

Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM

RESNIKOFF, PAMELA M

Provider ID: 417937
Provider Gender: Female
License number: G80358
NPI: 1841252533
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545

Fax:

After Hours Phone: (619) 515-2545

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

Accessibility:

Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM

RIVERA, TANIA L

Provider ID: 206363
Provider Gender: Female

License number: A126958

NPI: 1336346972

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency: No

Hospital Affiliation: Palomar Medical Center, Scripps

Memorial Hospital, Palomar Health Downtown Campus

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF SAN DIEGO

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: (619) 515-2560

Fax:

After Hours Phone: (619) 515-2560

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

Accessibility: ME

Hours: M-SA 9AM-5PM

ROLDAN, ANSELMO

Provider ID: 100798
Provider Gender: Male
License number: A42177
NPI: 1790898369
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
3490 PALM AVE
SAN DIEGO, CA 92154-1664

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Phone: (619) 423-5616

Fax: (619) 423-5684

After Hours Phone: (619) 423-5616

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

♿ Accessibility: P, EB, IB, E, R

Hours: M-SA 9AM-5PM

SINGHAL, BINDU

Provider ID: 414424

Provider Gender: Female

License number: A78248

NPI: 1073546057

Provider English Spoken: Yes

Provider Language(s) Spoken:

Hindi, Spanish, Urdu

Cultural Competency: No

Hospital Affiliation: Pomerado

Hospital, Paradise Valley

Hospital, Palomar Medical Center

Board Certified Specialty: No

HEALTH EXCEL IPA INC

5440 MOREHOUSE DR STE 1700

SAN DIEGO, CA 92121-6703

Phone: (858) 455-7657

Fax: (858) 455-5014

After Hours Phone: (858)

455-7657

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL): No

♿ Accessibility:

Hours: M-SA 9AM-5PM

SMILDE, RENEE I

Provider ID: 417937

Provider Gender: Female

License number: A70175

NPI: 1427010594

Provider English Spoken: Yes

Provider Language(s) Spoken:

Dutch

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital, Scripps Mercy Hospital

Chula Vista

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2545

Fax:

After Hours Phone: (619)

515-2545

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

♿ Accessibility:

Hours: M-TH 8AM-9PM, F

8AM-5PM, SA 9AM-5PM

SMITH, DAVID M

Provider ID: 206362

Provider Gender: Male

License number: A63610

NPI: 1609891761

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Rady

Childrens Hospital San Diego,

Scripps Green Hospital

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF SAN DIEGO

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax:

After Hours Phone: (619)

515-2424

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

SMITH, DAVID M

Provider ID: 417937

Provider Gender: Male

License number: A63610

NPI: 1609891761

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Rady

Childrens Hospital San Diego,

Scripps Green Hospital

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2545

Fax:

After Hours Phone: (619)

515-2545

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

No

♿ Accessibility:

Hours: M-TH 8AM-9PM, F

8AM-5PM, SA 9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

TOULOUIE, ELAHE

Provider ID: 489283
Provider Gender: Female
License number: A73141
NPI: 1235197856
Provider English Spoken: Yes
Provider Language(s) Spoken: Armenian, Faroese, Farsi, German, Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Alvarado Hosp Med Ctr
Board Certified Specialty: No
HEALTH EXCEL IPA INC
 4282 GENESEE AVE STE 204
 SAN DIEGO, CA 92117-4965
Phone: (858) 616-6430
Fax: (858) 452-9276
After Hours Phone: (858) 616-6430
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
 ☒ *Accessibility:*
Hours: M-SA 9AM-5PM

TRUONG, TU N

Provider ID: 53396
Provider Gender: Male
License number: A50756
NPI: 1194794263
Provider English Spoken: Yes
Provider Language(s) Spoken: Cambodian, Spanish, Vietnamese
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Ucsd La Jolla John Sally Thornton, Alvarado Hospital Llc, Kindred Hospital San Diego
Board Certified Specialty: No

HEALTH EXCEL IPA INC
 5069 EL CAJON BLVD
 SAN DIEGO, CA 92115-3348
Phone: (619) 583-8705
Fax: (619) 583-8701
After Hours Phone: (619) 583-8705
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 9/90
American Sign Language (ASL): No
 ☒ *Accessibility:* IB, E, R, W
Hours: M-SA 9AM-5PM

TRUONG, TU N, MD

Provider ID: 53396
Provider Gender: Male
License number: A50756
NPI: 1194794263
Provider English Spoken: Yes
Provider Language(s) Spoken: Cambodian, Spanish, Vietnamese
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Ucsd La Jolla John Sally Thornton, Alvarado Hospital Llc, Kindred Hospital San Diego
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 5069 EL CAJON BLVD
 SAN DIEGO, CA 92115-3348
Phone: (619) 583-8705
Fax: (619) 583-8701
After Hours Phone: (619) 583-8705
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
 ☒ *Accessibility:* IB, E, R, W

Hours: M-SA 9AM-5PM

VIDAURAZAGA, MONICA M

Provider ID: 417937
Provider Gender: Female
License number: A169207
NPI: 1346628310
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☒ *Accessibility:*
Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM

VO, SONY T, MD

Provider ID: 44927
Provider Gender: Male
License number: A49788
NPI: 1427003938
Provider English Spoken: Yes
Provider Language(s) Spoken: Bulgarian, Chinese, Mandarin, Spanish, Vietnamese
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital
Board Certified Specialty: No
COMMUNITY CARE IPA LLC

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

4551 EL CAJON BLVD
SAN DIEGO, CA 92115-4316
Phone: (619) 280-7185
Fax: (619) 280-0994
After Hours Phone: (858)
805-1793
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E
Hours: M-SA 9AM-5PM

VO, SONY T

Provider ID: 44927
Provider Gender: Male
License number: A49788
NPI: 1427003938
Provider English Spoken: Yes
Provider Language(s) Spoken:
Bulgarian, Chinese, Mandarin,
Spanish, Vietnamese
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital
Board Certified Specialty: No
HEALTH EXCEL IPA INC
4551 EL CAJON BLVD
SAN DIEGO, CA 92115-4316
Phone: (619) 280-7185
Fax: (619) 280-0994
After Hours Phone: (858)
805-1793
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E
Hours: M-SA 9AM-5PM

WASTILA, LISA J

Provider ID: 403583
Provider Gender: Female
License number: A60801
NPI: 1043375231
Provider English Spoken: Yes
Provider Language(s) Spoken:
German
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Board Certified Specialty: No
IHP-ST VINCENT DE PAUL
VILLA

1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638
Phone: (619) 233-8500
Fax:
After Hours Phone: (619)
233-8500
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-F 8AM-5:30PM, SA
9AM-5PM

WONG, ARTHUR D

Provider ID: 417937
Provider Gender: Male
License number: A163178
NPI: 1023639176
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143

Phone: (619) 515-2545
Fax:
After Hours Phone: (619)
515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-TH 8AM-9PM, F
8AM-5PM, SA 9AM-5PM

YUNG, STEVEN A

Provider ID: 417937
Provider Gender: Male
License number: G80798
NPI: 1689636656
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619)
515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-TH 8AM-9PM, F
8AM-5PM, SA 9AM-5PM

INTERVENTIONAL

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

CARDIOLOGY		
<p>MOUSSAVIAN, MEHRAN <i>Provider ID:</i> 206363 <i>Provider Gender:</i> Male <i>License number:</i> 20A7241 <i>NPI:</i> 1689788234 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr, Tri City Medical Ctr, Sharp Memorial Hospital, Alvarado Hospital Llc, Grossmont Hospital <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST SAN DIEGO, CA 92102-4715 <i>Phone:</i> (619) 263-2499 <i>Fax:</i> <i>After Hours Phone:</i> (619) 263-2499 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM</p>	<p>Vista Med Ctr <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST SAN DIEGO, CA 92102-4715 <i>Phone:</i> (619) 515-2560 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2560 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM</p>	<p><i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM</p>
<p>SHETABI, KAMBIZ <i>Provider ID:</i> 206363 <i>Provider Gender:</i> Male <i>License number:</i> A126187 <i>NPI:</i> 1972827806 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Chula</p>	<p>UCSD MEDICAL GROUP, <i>Provider ID:</i> 179619 <i>Provider Gender:</i> <i>License number:</i> <i>NPI:</i> 1578672184 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> UCSD MEDICAL GROUP 330 LEWIS ST # 400 SAN DIEGO, CA 92103-2108 <i>Phone:</i> (619) 471-9260 <i>Fax:</i> (619) 471-9310 <i>After Hours Phone:</i> (619) 471-9260 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/25 <i>American Sign Language (ASL):</i> No</p>	<p>UCSD MEDICAL GROUP, <i>Provider ID:</i> 179639 <i>Provider Gender:</i> <i>License number:</i> <i>NPI:</i> 1508968751 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> UCSD MEDICAL GROUP 4168 FRONT ST SAN DIEGO, CA 92103-2030 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 25/120 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM</p>
	MULTI SPECIALTY MEDICAL CLINIC	
		NEPHROLOGY
		<p>REDDY, SAMATHHA R <i>Provider ID:</i> 418535 <i>Provider Gender:</i> Female <i>License number:</i> A120797 <i>NPI:</i> 1659620854 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Gujarati, Hindi, Punjabi, Spanish, Telugu <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital, Alvarado Hospital Llc, Grossmont Hospital,</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Sharp Chula Vista Med Ctr, St Agnes Medical Center
Board Certified Specialty: No
OPERATION SAMAHAN
9995 CARMEL MOUNTAIN RD
STE B10 AND B11
SAN DIEGO, CA 92129-2889
Phone: (844) 200-2426

Fax:

After Hours Phone: (844) 200-2426

Website:

www.operationsamahan.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

Accessibility:

Hours: M,TU,TH,F

8:30AM-5:30PM, W 10AM-7PM, SA 9AM-5PM

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

Accessibility:

Hours: M-F 8AM-5:30PM, SA 9AM-5PM

GRISOLIA, JAMES S

Provider ID: 417937

Provider Gender: Male

License number: G42884

NPI: 1336102359

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2545

Fax:

After Hours Phone: (619) 515-2545

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

Accessibility:

Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM

MARTIN, FREDERIC R

Provider ID: 417937

Provider Gender: Male

License number: G61965

NPI: 1265582605

Provider English Spoken: Yes

Provider Language(s) Spoken: French

Cultural Competency: No

Hospital Affiliation: Scripps Memorial Hospital, Vibra Hospital Of San Diego, Scripps Memorial Hospital Encinitas, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2545

Fax:

After Hours Phone: (619) 515-2545

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

Accessibility:

Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM

NEUROLOGY

DELGADO, GUSTAVO A

Provider ID: 403583

Provider Gender: Male

License number: A78699

NPI: 1386792372

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-ST VINCENT DE PAUL

VILLA

1501 IMPERIAL AVE

SAN DIEGO, CA 92101-7638

Phone: (619) 233-8500

Fax:

After Hours Phone: (619)

233-8500

Website:

Email:

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI A

Provider ID: 206353

Provider Gender: Female

License number: 20A14919

NPI: 1619397031

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

5454 EL CAJON BLVD

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619)
515-2400
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

ALIMONOS, LYSISTRATI A

Provider ID: 206360
Provider Gender: Female
License number: 20A14919
NPI: 1619397031
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

ALIMONOS, LYSISTRATI A

Provider ID: 206362
Provider Gender: Female

License number: 20A14919
NPI: 1619397031
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Scripps Mercy Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619)
515-2424
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

ALIMONOS, LYSISTRATI A

Provider ID: 206363
Provider Gender: Female
License number: 20A14919
NPI: 1619397031
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2560
Fax:
After Hours Phone: (619)
515-2560

Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

ALIMONOS, LYSISTRATI A

Provider ID: 402851
Provider Gender: Female
License number: 20A14919
NPI: 1619397031
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Scripps Mercy Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2444
Fax:

After Hours Phone: (619)
515-2444
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-W,F 8:30AM-5:30PM,
TH 9AM-6PM, SA 9AM-5PM

ALIMONOS, LYSISTRATI A

Provider ID: 416831
Provider Gender: Female
License number: 20A14919
NPI: 1619397031
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 3514 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☯ *Accessibility:* ME
Hours: M-TH 8AM-5PM, F,SA 9AM-5PM

BLAKE, GARY D

Provider ID: 206046
Provider Gender: Male
License number: G44807
NPI: 1497738439
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN DIEGO FAMILY CARE
 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111-6342
Phone: (858) 279-0925
Fax:
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None

American Sign Language (ASL): No
 ☯ *Accessibility:* P, EB, IB, E, R, T, W
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

BUECHNER, CHARLENE A

Provider ID: 206353
Provider Gender: Female
License number: A68463
NPI: 1376663831
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Sharp Mary Birch Hosp For Women And Newborns
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:

After Hours Phone: (619) 515-2400
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* ME
Hours: M-SA 9AM-5PM

BUECHNER, CHARLENE A

Provider ID: 206360
Provider Gender: Female
License number: A68463
NPI: 1376663831

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Sharp Mary Birch Hosp For Women And Newborns
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* ME
Hours: M-SA 9AM-5PM

BUECHNER, CHARLENE A

Provider ID: 206362
Provider Gender: Female
License number: A68463
NPI: 1376663831
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Sharp Mary Birch Hosp For Women And Newborns
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619)
515-2424
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

BUECHNER, CHARLENE A
Provider ID: 206363
Provider Gender: Female
License number: A68463
NPI: 1376663831
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Scripps
Mercy Hospital, Scripps Mercy
Hospital Chula Vista, Sharp Mary
Birch Hosp For Women And
Newborns
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2420
Fax:
After Hours Phone: (619)
515-2420
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):

No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM
BUECHNER, CHARLENE A
Provider ID: 402851
Provider Gender: Female
License number: A68463
NPI: 1376663831
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Scripps
Mercy Hospital, Scripps Mercy
Hospital Chula Vista, Sharp Mary
Birch Hosp For Women And
Newborns
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2444
Fax:

After Hours Phone: (619)
515-2444
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-W,F 8:30AM-5:30PM,
TH 9AM-6PM, SA 9AM-5PM

BUECHNER, CHARLENE A
Provider ID: 416831
Provider Gender: Female
License number: A68463
NPI: 1376663831
Provider English Spoken: Yes
Provider Language(s) Spoken:

Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Scripps
Mercy Hospital, Scripps Mercy
Hospital Chula Vista, Sharp Mary
Birch Hosp For Women And
Newborns
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
3514 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619)
515-2424
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-TH 8AM-5PM, F,SA
9AM-5PM

CAMPBELL, ELIZABETH C
Provider ID: 206353
Provider Gender: Female
License number: 20A6763
NPI: 1932147329
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Scripps Mercy Hospital,
Palomar Medical Center,
Palomar Health Downtown
Campus, Pomerado Hospital,
Rady Childrens Hospital San
Diego, Sharp Coronado Hosp
And Healthcare Ctr
Board Certified Specialty: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

FAMILY HEALTH CENTERS OF SAN DIEGO

5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621

Phone: (619) 515-2400

Fax:

After Hours Phone: (619)

515-2400

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

CAMPBELL, ELIZABETH C

Provider ID: 206360

Provider Gender: Female

License number: 20A6763

NPI: 1932147329

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital, Palomar Medical Center, Palomar Health Downtown Campus, Pomerado Hospital, Rady Childrens Hospital San Diego, Sharp Coronado Hosp And Healthcare Ctr

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

CAMPBELL, ELIZABETH C

Provider ID: 206363

Provider Gender: Female

License number: 20A6763

NPI: 1932147329

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital, Palomar Medical Center, Palomar Health Downtown Campus, Pomerado Hospital, Rady Childrens Hospital San Diego, Sharp Coronado Hosp And Healthcare Ctr

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF SAN DIEGO

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: (619) 515-2560

Fax:

After Hours Phone: (619)

515-2560

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

CAMPBELL, ELIZABETH C

Provider ID: 402851

Provider Gender: Female

License number: 20A6763

NPI: 1932147329

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital, Palomar Medical Center, Palomar Health Downtown Campus, Pomerado Hospital, Rady Childrens Hospital San Diego, Sharp Coronado Hosp And Healthcare Ctr

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2444

Fax:

After Hours Phone: (619)

515-2444

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

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

TH 9AM-6PM, SA 9AM-5PM

CAMPBELL, ELIZABETH C

Provider ID: 416831

Provider Gender: Female

License number: 20A6763

NPI: 1932147329

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital, Palomar Medical Center,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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C. Directorio de proveedores de atención primaria

Palomar Health Downtown
Campus, Pomerado Hospital,
Rady Childrens Hospital San
Diego, Sharp Coronado Hosp
And Healthcare Ctr
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

3514 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424

Fax:
After Hours Phone: (619)
515-2424

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ *Accessibility:* ME

Hours: M-TH 8AM-5PM, F,SA
9AM-5PM

CARTER, KHALIL J

Provider ID: 206353

Provider Gender: Male

License number: A113001

NPI: 1225231582

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Grossmont Hospital

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2400

Fax:

After Hours Phone: (619)

515-2400

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ *Accessibility:* ME

Hours: M-SA 9AM-5PM

CARTER, KHALIL J

Provider ID: 206360

Provider Gender: Male

License number: A113001

NPI: 1225231582

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Sutter Davis
Hospital, Sutter Medical Center
Sacramento, Grossmont
Hospital, Scripps Mercy Hospital

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ *Accessibility:* ME

Hours: M-SA 9AM-5PM

CARTER, KHALIL J

Provider ID: 206362

Provider Gender: Male

License number: A113001

NPI: 1225231582

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Grossmont Hospital

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax:

After Hours Phone: (619)
515-2424

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ *Accessibility:* ME

Hours: M-SA 9AM-5PM

CARTER, KHALIL J

Provider ID: 206363

Provider Gender: Male

License number: A113001

NPI: 1225231582

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Grossmont Hospital

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: (619) 515-2420

Fax:

After Hours Phone: (619)
515-2420

Website: www.fhcsd.org

Email:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ *Accessibility:* ME

Hours: M-SA 9AM-5PM

CARTER, KHALIL J

Provider ID: 402851

Provider Gender: Male

License number: A113001

NPI: 1225231582

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Sutter Davis
Hospital, Sutter Medical Center

Sacramento, Grossmont
Hospital, Scripps Mercy Hospital

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2444

Fax:

After Hours Phone: (619)

515-2444

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ *Accessibility:*

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

CARTER, KHALIL J

Provider ID: 416831

Provider Gender: Male

License number: A113001

NPI: 1225231582

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Grossmont Hospital

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

3514 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax:

After Hours Phone: (619)

515-2424

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ *Accessibility:* ME

Hours: M-TH 8AM-5PM, F,SA
9AM-5PM

CERVANTES, SANDRA M

Provider ID: 206353

Provider Gender: Female

License number: A118095

NPI: 1073701041

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Sharp Coronado Hosp

And Healthcare Ctr, Grossmont
Hospital

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2400

Fax:

After Hours Phone: (619)
515-2400

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ *Accessibility:* ME

Hours: M-SA 9AM-5PM

CERVANTES, SANDRA M

Provider ID: 206360

Provider Gender: Female

License number: A118095

NPI: 1073701041

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2561

Fax:

After Hours Phone: (619)

515-2561

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ *Accessibility:* ME

Hours: M-SA 9AM-5PM

CERVANTES, SANDRA M

Provider ID: 206362

Provider Gender: Female

License number: A118095

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

NPI: 1073701041
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital
 Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax:
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: ME
 Hours: M-SA 9AM-5PM

CERVANTES, SANDRA M
 Provider ID: 206363
 Provider Gender: Female
 License number: A118095
 NPI: 1073701041
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715

Phone: (619) 515-2560
 Fax:
 After Hours Phone: (619) 515-2560
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: ME
 Hours: M-SA 9AM-5PM

CERVANTES, SANDRA M
 Provider ID: 402851
 Provider Gender: Female
 License number: A118095
 NPI: 1073701041
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital
 Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2444
 Fax:
 After Hours Phone: (619) 515-2444
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-W,F 8:30AM-5:30PM, TH 9AM-6PM, SA 9AM-5PM

CERVANTES, SANDRA M
 Provider ID: 416831
 Provider Gender: Female
 License number: A118095
 NPI: 1073701041
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital
 Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 3514 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax:
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 ♿ Accessibility: ME
 Hours: M-TH 8AM-5PM, F,SA 9AM-5PM

DE MIK, TRAVIS J
 Provider ID: 206353
 Provider Gender: Male
 License number: A108228
 NPI: 1629277322
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

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C. Directorio de proveedores de atención primaria

5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400

Fax:
After Hours Phone: (619)
515-2400

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

DE MIK, TRAVIS J

Provider ID: 206360

Provider Gender: Male

License number: A108228

NPI: 1629277322

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

DE MIK, TRAVIS J

Provider ID: 206363

Provider Gender: Male

License number: A108228

NPI: 1629277322

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: (619) 515-2560

Fax:

After Hours Phone: (619)

515-2560

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

DE MIK, TRAVIS J

Provider ID: 402851

Provider Gender: Male

License number: A108228

NPI: 1629277322

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2444

Fax:

After Hours Phone: (619)

515-2444

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

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

DE MIK, TRAVIS J

Provider ID: 416831

Provider Gender: Male

License number: A108228

NPI: 1629277322

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

3514 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax:

After Hours Phone: (619)

515-2424

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-TH 8AM-5PM, F,SA
9AM-5PM

FAKSH, ARIJ

Provider ID: 185268

Provider Gender: Female

License number: 20A14222

NPI: 1912166737

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Tri City

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Medical Ctr, Scripps Mercy Hospital, Scripps Green Hospital, Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105-1608
Phone: (619) 280-7072
Fax:
After Hours Phone: (619) 280-7072
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* P, EB, IB, E, W
Hours: M-F 8AM-5PM, SA 9AM-5PM

FOLCH TORRES-AGUIAR, BEATRIZ M
Provider ID: 206353
Provider Gender: Female
License number: A148014
NPI: 1457794752
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Yue Chinese
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619) 515-2400

Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* ME
Hours: M-SA 9AM-5PM

FOLCH TORRES-AGUIAR, BEATRIZ M
Provider ID: 206360
Provider Gender: Female
License number: A148014
NPI: 1457794752
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Yue Chinese
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* ME
Hours: M-SA 9AM-5PM

FOLCH TORRES-AGUIAR, BEATRIZ M
Provider ID: 206362
Provider Gender: Female
License number: A148014
NPI: 1457794752

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Yue Chinese
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* ME
Hours: M-SA 9AM-5PM

FOLCH TORRES-AGUIAR, BEATRIZ M
Provider ID: 206363
Provider Gender: Female
License number: A148014
NPI: 1457794752
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Yue Chinese
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2560
Fax:
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

FOLCH TORRES-AGUIAR, BEATRIZ M

Provider ID: 402851
Provider Gender: Female
License number: A148014
NPI: 1457794752
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Yue Chinese
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2444
Fax:
After Hours Phone: (619)
515-2444
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-W,F 8:30AM-5:30PM,
TH 9AM-6PM, SA 9AM-5PM

FOLCH TORRES-AGUIAR, BEATRIZ M

Provider ID: 416831
Provider Gender: Female
License number: A148014
NPI: 1457794752
Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish, Yue Chinese
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Scripps Mercy Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
3514 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619)
515-2424
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-TH 8AM-5PM, F,SA
9AM-5PM

KELLY, THOMAS F

Provider ID: 233597
Provider Gender: Male
License number: G60630
NPI: 1336203496
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Palomar
Health Downtown Campus, Ucsd
Medical Ctr, Scripps Memorial
Hospital, Scripps Mercy Hospital,
Scripps Mercy Hospital Chula
Vista, Scripps Memorial Hospital
Encinitas, Palomar Medical
Center
Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE
4290 POLK AVE
SAN DIEGO, CA 92105-1524

Phone: (619) 563-0507
Fax:
After Hours Phone: (619)
563-0507
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
8AM-2PM

LIPSCHITZ, LISA S

Provider ID: 206353
Provider Gender: Female
License number: A72005
NPI: 1649208711
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
Coronado Hosp And Healthcare
Ctr, Scripps Mercy Hospital,
Grossmont Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619)
515-2400
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

<p>LIPSCHITZ, LISA S <i>Provider ID:</i> 206360 <i>Provider Gender:</i> Female <i>License number:</i> A72005 <i>NPI:</i> 1649208711 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO</p>	<p>3544 30TH ST SAN DIEGO, CA 92104-4120 <i>Phone:</i> (619) 515-2424 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2424 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM</p>	<p>LIPSCHITZ, LISA S <i>Provider ID:</i> 402851 <i>Provider Gender:</i> Female <i>License number:</i> A72005 <i>NPI:</i> 1649208711 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO</p>
<p>1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM</p>	<p>LIPSCHITZ, LISA S <i>Provider ID:</i> 206363 <i>Provider Gender:</i> Female <i>License number:</i> A72005 <i>NPI:</i> 1649208711 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital, Grossmont Hospital <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO</p>	<p>3705 MISSION BLVD SAN DIEGO, CA 92109-7104 <i>Phone:</i> (619) 515-2444 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2444 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-W,F 8:30AM-5:30PM, TH 9AM-6PM, SA 9AM-5PM</p>
<p>LIPSCHITZ, LISA S <i>Provider ID:</i> 206362 <i>Provider Gender:</i> Female <i>License number:</i> A72005 <i>NPI:</i> 1649208711 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital, Grossmont Hospital <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO</p>	<p>4725 MARKET ST SAN DIEGO, CA 92102-4715 <i>Phone:</i> (619) 515-2560 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2560 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM</p>	<p>LIPSCHITZ, LISA S <i>Provider ID:</i> 416831 <i>Provider Gender:</i> Female <i>License number:</i> A72005 <i>NPI:</i> 1649208711 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital, Grossmont Hospital <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

SAN DIEGO
3514 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619)
515-2424
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-TH 8AM-5PM, F,SA
9AM-5PM

LOEFFLER, ALLISON M
Provider ID: 206353
Provider Gender: Female
License number: A116680
NPI: 1700073962
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Scripps Mercy Hospital,
Scripps Mercy Hospital Chula
Vista
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619)
515-2400
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No

♿ Accessibility: ME
Hours: M-SA 9AM-5PM
LOEFFLER, ALLISON M
Provider ID: 206360
Provider Gender: Female
License number: A116680
NPI: 1700073962
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Scripps Mercy Hospital,
Scripps Mercy Hospital Chula
Vista
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

LOEFFLER, ALLISON M
Provider ID: 206362
Provider Gender: Female
License number: A116680
NPI: 1700073962
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Scripps Mercy Hospital,

Scripps Mercy Hospital Chula
Vista
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619)
515-2424
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

LOEFFLER, ALLISON M
Provider ID: 206363
Provider Gender: Female
License number: A116680
NPI: 1700073962
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Scripps Mercy Hospital,
Scripps Mercy Hospital Chula
Vista
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2560
Fax:
After Hours Phone: (619)
515-2560
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Min/Max Age: None
 American Sign Language (ASL):
 No
 ☯ Accessibility: ME
 Hours: M-SA 9AM-5PM

LOEFFLER, ALLISON M

Provider ID: 402851
 Provider Gender: Female
 License number: A116680
 NPI: 1700073962
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Grossmont
 Hospital, Scripps Mercy Hospital,
 Scripps Mercy Hospital Chula
 Vista
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2444

Fax:
 After Hours Phone: (619)
 515-2444
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ☯ Accessibility:
 Hours: M-W,F 8:30AM-5:30PM,
 TH 9AM-6PM, SA 9AM-5PM

LOEFFLER, ALLISON M

Provider ID: 416831
 Provider Gender: Female
 License number: A116680
 NPI: 1700073962
 Provider English Spoken: Yes
 Provider Language(s) Spoken:

Spanish
 Cultural Competency: No
 Hospital Affiliation: Grossmont
 Hospital, Scripps Mercy Hospital,
 Scripps Mercy Hospital Chula
 Vista
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3514 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424

Fax:
 After Hours Phone: (619)
 515-2424
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 ☯ Accessibility: ME
 Hours: M-TH 8AM-5PM, F,SA
 9AM-5PM

MELLENDEZ BERRIOS, IARA DEL M

Provider ID: 206353
 Provider Gender: Female
 License number: A114181
 NPI: 1740514249
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy
 Hospital, Grossmont Hospital
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621

Phone: (619) 515-2400
 Fax:
 After Hours Phone: (619)
 515-2400
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ☯ Accessibility: ME
 Hours: M-SA 9AM-5PM

MELLENDEZ BERRIOS, IARA DEL M

Provider ID: 206360
 Provider Gender: Female
 License number: A114181
 NPI: 1740514249
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy
 Hospital, Grossmont Hospital
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2300

Fax:
 After Hours Phone: (619)
 515-2300
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ☯ Accessibility: ME
 Hours: M-SA 9AM-5PM

MELLENDEZ BERRIOS, IARA DEL M

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Provider ID: 206362
Provider Gender: Female
License number: A114181
NPI: 1740514249
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Grossmont Hospital
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* ME
Hours: M-SA 9AM-5PM

MELENDEZ BERRIOS, IARA DEL M

Provider ID: 206363
Provider Gender: Female
License number: A114181
NPI: 1740514249
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715

Phone: (619) 515-2560
Fax:
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* ME
Hours: M-SA 9AM-5PM

MELENDEZ BERRIOS, IARA DEL M

Provider ID: 402851
Provider Gender: Female
License number: A114181
NPI: 1740514249
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2444
Fax:
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:*

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

MELENDEZ BERRIOS, IARA DEL M

Provider ID: 416831
Provider Gender: Female
License number: A114181
NPI: 1740514249
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Grossmont Hospital
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3514 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☯ *Accessibility:* ME
Hours: M-TH 8AM-5PM, F,SA 9AM-5PM

PHAN, TIFFANI T

Provider ID: 417101
Provider Gender: Female
License number: A161105
NPI: 1134515695
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Sharp Chula Vista Med Ctr
Board Certified Specialty: No
 OPERATION SAMAHAN
 10737 CAMINO RUIZ STE 235
 SAN DIEGO, CA 92126-2375

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Phone: (844) 200-2426

Fax:

After Hours Phone: (844)
200-2426

Website:

www.operationsamahan.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-F 8AM-4:30PM, SA
9AM-5PM

RODRIGUEZ JEREZ, ROBERTO D

Provider ID: 206353

Provider Gender: Male

License number: A154298

NPI: 1710316450

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Sharp Coronado Hosp
And Healthcare Ctr, Grossmont
Hospital

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621

Phone: (619) 515-2400

Fax:

After Hours Phone: (619)
515-2400

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

RODRIGUEZ JEREZ, ROBERTO D

Provider ID: 206360

Provider Gender: Male

License number: A154298

NPI: 1710316450

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

RODRIGUEZ JEREZ, ROBERTO D

Provider ID: 206362

Provider Gender: Male

License number: A154298

NPI: 1710316450

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Sharp Coronado Hosp
And Healthcare Ctr, Grossmont
Hospital

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

3544 30TH ST
SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax:

After Hours Phone: (619)
515-2424

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

RODRIGUEZ JEREZ, ROBERTO D

Provider ID: 206363

Provider Gender: Male

License number: A154298

NPI: 1710316450

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Sharp Coronado Hosp
And Healthcare Ctr, Grossmont
Hospital

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: (619) 515-2420

Fax:

After Hours Phone: (619)
515-2420

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

American Sign Language (ASL): No
Accessibility: ME
Hours: M-SA 9AM-5PM

RODRIGUEZ JEREZ, ROBERTO D

Provider ID: 402851
Provider Gender: Male
License number: A154298
NPI: 1710316450
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: FAMILY HEALTH CENTERS OF SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (616) 515-2444
Fax:
After Hours Phone: (616) 515-2444
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-W,F 8:30AM-5:30PM, TH 9AM-6PM, SA 9AM-5PM

RODRIGUEZ JEREZ, ROBERTO D

Provider ID: 416831
Provider Gender: Male
License number: A154298
NPI: 1710316450
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No

Hospital Affiliation: Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3514 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility: ME
Hours: M-TH 8AM-5PM, F,SA 9AM-5PM

SAPRA, SONIA V

Provider ID: 206353
Provider Gender: Female
License number: A164859
NPI: 1952751711
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619) 515-2400
Website: www.fhcsd.org
Email:

Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: ME
Hours: M-SA 9AM-5PM

SAPRA, SONIA V

Provider ID: 206360
Provider Gender: Female
License number: A164859
NPI: 1952751711
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: ME
Hours: M-SA 9AM-5PM

SAPRA, SONIA V

Provider ID: 206363
Provider Gender: Female
License number: A164859
NPI: 1952751711
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi
Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Hospital Affiliation: Scripps Mercy No
Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2560

Fax:
After Hours Phone: (619)
515-2560
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: ME
Hours: M-SA 9AM-5PM

SAPRA, SONIA V

Provider ID: 402851
Provider Gender: Female
License number: A164859
NPI: 1952751711
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2444
Fax:
After Hours Phone: (619)
515-2444
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):

No
Accessibility:
Hours: M-W,F 8:30AM-5:30PM,
TH 9AM-6PM, SA 9AM-5PM

SAPRA, SONIA V

Provider ID: 416831
Provider Gender: Female
License number: A164859
NPI: 1952751711
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
3514 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424

Fax:
After Hours Phone: (619)
515-2424
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility: ME
Hours: M-TH 8AM-5PM, F,SA
9AM-5PM

SHUCKETT, ARIEL

Provider ID: 206046
Provider Gender: Female
License number: A144372
NPI: 1245590124
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Sharp Mary

Birch Hosp For Women And
Newborns
Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE
6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342
Phone: (858) 279-0925
Fax:
After Hours Phone: (858)
279-0925
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: P, EB, IB, E, R,
T, W
Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

SINGH, RASHMI

Provider ID: 206353
Provider Gender: Female
License number: A168236
NPI: 1679937619
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619)
515-2400
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

<p><i>American Sign Language (ASL):</i> No <i>Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM</p>	<p><i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST SAN DIEGO, CA 92102-4715 <i>Phone:</i> (619) 515-2560 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2560 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM</p>	<p><i>Hours:</i> M-W,F 8:30AM-5:30PM, TH 9AM-6PM, SA 9AM-5PM</p>
<p>SINGH, RASHMI <i>Provider ID:</i> 206360 <i>Provider Gender:</i> Female <i>License number:</i> A168236 <i>NPI:</i> 1679937619 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 <i>Phone:</i> (619) 515-2424 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2424 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM</p>	<p>SINGH, RASHMI <i>Provider ID:</i> 402851 <i>Provider Gender:</i> Female <i>License number:</i> A168236 <i>NPI:</i> 1679937619 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104 <i>Phone:</i> (619) 515-2444 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2444 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i></p>	<p>SINGH, RASHMI <i>Provider ID:</i> 416831 <i>Provider Gender:</i> Female <i>License number:</i> A168236 <i>NPI:</i> 1679937619 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 3514 30TH ST SAN DIEGO, CA 92104-4120 <i>Phone:</i> (619) 515-2424 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2424 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> ME <i>Hours:</i> M-TH 8AM-5PM, F,SA 9AM-5PM</p>
<p>SINGH, RASHMI <i>Provider ID:</i> 206363 <i>Provider Gender:</i> Female <i>License number:</i> A168236 <i>NPI:</i> 1679937619 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital</p>	<p>SINGH, RASHMI <i>Provider ID:</i> 402851 <i>Provider Gender:</i> Female <i>License number:</i> A168236 <i>NPI:</i> 1679937619 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104 <i>Phone:</i> (619) 515-2444 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2444 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i></p>	<p>TRUJILLO, JENNIFER C <i>Provider ID:</i> 451167 <i>Provider Gender:</i> Female <i>License number:</i> 20A8204 <i>NPI:</i> 1053407593 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No IHP-SAN YSIDRO HEALTH</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

CENTER
950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
T, W
Hours: M-F 8AM-5PM, SA
8AM-4PM

WINESBURG, JENNIFER J

Provider ID: 206353
Provider Gender: Female
License number: 20A11535
NPI: 1811162456
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Sharp Coronado Hosp
And Healthcare Ctr, Grossmont
Hospital, Desert Regional Med
Ctr
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619)
515-2400
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None

American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

WINESBURG, JENNIFER J

Provider ID: 206360
Provider Gender: Female
License number: 20A11535
NPI: 1811162456
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Desert
Regional Med Ctr
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

WINESBURG, JENNIFER J

Provider ID: 206362
Provider Gender: Female
License number: 20A11535
NPI: 1811162456
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Sharp Coronado Hosp

And Healthcare Ctr, Grossmont
Hospital, Desert Regional Med
Ctr
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2400
Fax:
After Hours Phone: (619)
515-2400
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

WINESBURG, JENNIFER J

Provider ID: 206363
Provider Gender: Female
License number: 20A11535
NPI: 1811162456
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Desert
Regional Med Ctr
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2420
Fax:
After Hours Phone: (619)
515-2420
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None

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C. Directorio de proveedores de atención primaria

American Sign Language (ASL): No
Accessibility: ME
Hours: M-SA 9AM-5PM

WINESBURG, JENNIFER J

Provider ID: 402851
Provider Gender: Female
License number: 20A11535
NPI: 1811162456
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Desert Regional Med Ctr
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2444
Fax:
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-W,F 8:30AM-5:30PM, TH 9AM-6PM, SA 9AM-5PM

WINESBURG, JENNIFER J

Provider ID: 416831
Provider Gender: Female
License number: 20A11535
NPI: 1811162456
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy

Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital, Desert Regional Med Ctr
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3514 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility: ME
Hours: M-TH 8AM-5PM, F,SA 9AM-5PM

ZIEG, ALAN J

Provider ID: 206353
Provider Gender: Male
License number: G78814
NPI: 1699790634
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619) 515-2400

Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: ME
Hours: M-SA 9AM-5PM

ZIEG, ALAN J

Provider ID: 206360
Provider Gender: Male
License number: G78814
NPI: 1699790634
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: ME
Hours: M-SA 9AM-5PM

ZIEG, ALAN J

Provider ID: 206362
Provider Gender: Male
License number: G78814
NPI: 1699790634

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424

Fax:
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ *Accessibility:* ME
Hours: M-SA 9AM-5PM

ZIEG, ALAN J

Provider ID: 206363
Provider Gender: Male
License number: G78814
NPI: 1699790634
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: (619) 515-2560
Fax:
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ *Accessibility:* ME
Hours: M-SA 9AM-5PM

ZIEG, ALAN J

Provider ID: 402851
Provider Gender: Male
License number: G78814
NPI: 1699790634
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2444

Fax:
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ *Accessibility:*
Hours: M-W,F 8:30AM-5:30PM, TH 9AM-6PM, SA 9AM-5PM

ZIEG, ALAN J

Provider ID: 416831
Provider Gender: Male
License number: G78814
NPI: 1699790634
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3514 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ *Accessibility:* ME
Hours: M-TH 8AM-5PM, F,SA 9AM-5PM

OPHTHALMOLOGY

NAJAFI, DAVID J

Provider ID: 206360
Provider Gender: Male
License number: A68124
NPI: 1396715991
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Persian, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps

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C. Directorio de proveedores de atención primaria

Memorial Hospital, Sharp
 Memorial Hospital, Grossmont
 Hospital, Scripps Mercy Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.fhcscd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 No
 ☯ *Accessibility:* ME
Hours: M-SA 9AM-5PM

SHAW, BLAKE R

Provider ID: 206360
Provider Gender: Male
License number: G61394
NPI: 1649206541
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.fhcscd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):

No
 ☯ *Accessibility:* ME
Hours: M-SA 9AM-5PM
SHAW, BLAKE R
Provider ID: 206363
Provider Gender: Male
License number: G61394
NPI: 1649206541
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2560
Fax:
After Hours Phone: (619) 515-2560
Website: www.fhcscd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 No
 ☯ *Accessibility:* ME
Hours: M-SA 9AM-5PM

ZABLIT, KARIM V

Provider ID: 403583
Provider Gender: Male
License number: A42127
NPI: 1083700538
Provider English Spoken: Yes
Provider Language(s) Spoken: French
Cultural Competency: No
Hospital Affiliation: Scripps Green Hospital
Board Certified Specialty: No
 IHP-ST VINCENT DE PAUL

VILLA
 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101-7638
Phone: (619) 233-8500
Fax:
After Hours Phone: (619) 233-8500
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 No
 ☯ *Accessibility:*
Hours: M-F 8AM-5:30PM, SA 9AM-5PM

OTOLARYNGOLOGY

CRAWFORD, KAYVA L

Provider ID: 206360
Provider Gender: Female
License number: A165819
NPI: 1396241824
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.fhcscd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 No
 ☯ *Accessibility:* ME

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C. Directorio de proveedores de atención primaria

Hours: M-SA 9AM-5PM

PEDIATRICS

ABELL, GEOFFREY A

Provider ID: 27341

Provider Gender: Male

License number: A98712

NPI: 1245256130

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Paradise Valley Hospital, Scripps

Mercy Hospital Chula Vista,

Sharp Mary Birch Hosp For

Women And Newborns, Scripps

Mercy Hospital

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

292 EUCLID AVE STE 220

SAN DIEGO, CA 92114-3629

Phone: (619) 262-8624

Fax: (619) 262-6639

After Hours Phone: (619)

262-8624

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, R, T

Hours: M-SA 9AM-5PM

ABRAMSON, RACHEL A

Provider ID: 500605

Provider Gender: Female

License number: A104918

NPI: 1588707178

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Board Certified Specialty: No

HEALTH EXCEL IPA INC

4060 FAIRMOUNT AVE

SAN DIEGO, CA 92105-1608

Phone: (619) 255-9155

Fax: (619) 640-3584

After Hours Phone: (619)

255-9155

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

ABRAMSON, RACHEL A

Provider ID: 556682

Provider Gender: Female

License number: A104918

NPI: 1588707178

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Board Certified Specialty: No

HEALTH EXCEL IPA INC

4171 FAIRMOUNT AVE

SAN DIEGO, CA 92105-1609

Phone: (619) 269-1269

Fax: (619) 269-1271

After Hours Phone: (619)

269-1269

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

ADJAN, ROULA S

Provider ID: 148902

Provider Gender: Female

License number: A81682

NPI: 1992847263

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

HEALTH EXCEL IPA INC

4060 FAIRMOUNT AVE

SAN DIEGO, CA 92105-1608

Phone: (619) 255-9154

Fax: (619) 795-9847

After Hours Phone: (619)

255-9154

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E

Hours: M-SA 9AM-5PM

ADJAN, ROULA S

Provider ID: 185268

Provider Gender: Female

License number: A81682

NPI: 1992847263

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

LA MAESTRA FAMILY CLINIC

4060 FAIRMOUNT AVE

SAN DIEGO, CA 92105-1608

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Phone: (619) 255-9155

Fax: (619) 749-5480

After Hours Phone: (619)
255-9155

Website: www.lamaestra.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, W

Hours: M-F 8AM-5PM, SA
9AM-5PM

ADLOUNI, LOUBABA A

Provider ID: 230441

Provider Gender: Female

License number: A63201

NPI: 1669443685

Provider English Spoken: Yes

Provider Language(s) Spoken:
Arabic

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego,
Pomerado Hospital, Palomar
Health Downtown Campus,
Palomar Medical Center

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

16918 DOVE CANYON RD STE
200

SAN DIEGO, CA 92127-3457

Phone: (858) 924-1960

Fax: (858) 924-1964

After Hours Phone: (858)
924-1960

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

AMANI, RAMIN

Provider ID: 537708

Provider Gender: Male

License number: A53984

NPI: 1659366292

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Tri City

Medical Ctr, Rady Childrens
Hospital San Diego

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

5222 BALBOA AVE STE 42
SAN DIEGO, CA 92117-6991

Phone: (858) 268-0702

Fax: (858) 268-0374

After Hours Phone: (858)
268-0702

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

AMATYA, SUDHA

Provider ID: 206353

Provider Gender: Female

License number: A51563

NPI: 1790830511

Provider English Spoken: Yes

Provider Language(s) Spoken:

Hindi

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2400

Fax:

After Hours Phone: (619)
515-2400

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

ANDREE, GREGOR

Provider ID: 233532

Provider Gender: Male

License number: A72833

NPI: 1467436063

Provider English Spoken: Yes

Provider Language(s) Spoken:
German, Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: Yes
IHP-SAN DIEGO FAMILY CARE
4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105-1690

Phone: (619) 280-2058

Fax:

After Hours Phone: (619)
280-2058

Website: www.sdfamilycare.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/22

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, W

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

ANDREE, GREGOR

Provider ID: 482070

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Provider Gender: Male
License number: A72833
NPI: 1467436063
Provider English Spoken: Yes
Provider Language(s) Spoken: German, Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN DIEGO FAMILY CARE
 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111-6307
Phone: (858) 810-8700
Fax:
After Hours Phone: (858) 810-8700
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, W
Hours: M,W-F 8:30AM-5:30PM, TU 8:30AM-8:30PM, SA 9AM-4PM

ARCHAMBAULT, CHRISTIAN F

Provider ID: 5589
Provider Gender: Male
License number: A74776
NPI: 1992776918
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Rady Childrens Hospital San Diego, Scripps Mercy Hospital, Pomerado Hospital, Sharp Mary Birch Hosp For Women And Newborns, Paradise Valley Hospital, Childrens Hospital Of

Orange County
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 16918 DOVE CANYON RD STE 200
 SAN DIEGO, CA 92127-3457
Phone: (858) 924-1960
Fax: (858) 924-1964
After Hours Phone: (858) 924-1960
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM

AYSON, NICOLE M

Provider ID: 417429
Provider Gender: Female
License number: A128091
NPI: 1013278704
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1550 BROADWAY # 2
 SAN DIEGO, CA 92101-5713
Phone: (619) 515-2525
Fax:
After Hours Phone: (619) 515-2525
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No

Accessibility:
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

AZIMI, AYSUN

Provider ID: 317194
Provider Gender: Female
License number: 20A13331
NPI: 1710246160
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista, Sharp Mary Birch Hosp For Women And Newborns, Rady Childrens Hospital San Diego, Sharp Chula Vista Med Ctr, Fresno Community Hospital, Clovis Community Hospital
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 292 EUCLID AVE STE 220
 SAN DIEGO, CA 92114-3629
Phone: (619) 262-8624
Fax: (619) 262-6639
After Hours Phone: (619) 262-8624
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM

BONSU, BEMA K

Provider ID: 227409
Provider Gender: Male
License number: C55180
NPI: 1932106986
Provider English Spoken: Yes

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C. Directorio de proveedores de atención primaria

Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM

BOWERS, JESSIE S

Provider ID: 394841
Provider Gender: Female
License number: A138429
NPI: 1730594235
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
12036 SCRIPPS HIGHLANDS DR # 102
SAN DIEGO, CA 92131-5155
Phone: (858) 566-4444
Fax: (858) 566-3321
After Hours Phone: (858) 566-4444
Website:

Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM

CARSON, STEPHEN H

Provider ID: 6735
Provider Gender: Male
License number: G39308
NPI: 1780719872
Provider English Spoken: Yes
Provider Language(s) Spoken: French
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Sharp Memorial Hospital, Scripps Mercy Hospital, Rady Childrens Hospital San Diego
Board Certified Specialty: Yes
RADY CHILDRENS HEALTH NETWORK

550 WASHINGTON ST STE 300
SAN DIEGO, CA 92103-2227
Phone: (619) 297-5437
Fax: (619) 297-4567
After Hours Phone: (619) 297-5437
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM

CASTELNOVI, CLAUDIA

Provider ID: 148915
Provider Gender: Female
License number: A111170
NPI: 1417279324

Provider English Spoken: Yes
Provider Language(s) Spoken: French, Italian, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
HEALTH EXCEL IPA INC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608
Phone: (619) 255-9155
Fax: (619) 795-9852
After Hours Phone: (619) 255-9155
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility: P, EB, IB, E
Hours: M-SA 9AM-5PM

CASTELNOVI, CLAUDIA

Provider ID: 185268
Provider Gender: Female
License number: A111170
NPI: 1417279324
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Italian, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608
Phone: (619) 255-9155
Fax:
After Hours Phone: (619) 255-9155
Website: www.lamaestra.org

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C. Directorio de proveedores de atención primaria

Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, W
Hours: M-F 8AM-5PM, SA
9AM-5PM

CHANG, IRENE S

Provider ID: 373725
Provider Gender: Female
License number: A73533
NPI: 1790756799
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr, Rady Childrens
Hospital San Diego, Scripps
Mercy Hospital Chula Vista,
Scripps Mercy Hospital,
Pomerado Hospital
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
16918 DOVE CANYON RD STE
200
SAN DIEGO, CA 92127-3457
Phone: (858) 924-1960
Fax: (858) 924-1964
After Hours Phone: (858)
924-1960
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

CHEN, JENNIFER K

Provider ID: 206363
Provider Gender: Female

License number: A141057
NPI: 1255785150
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2560
Fax:
After Hours Phone: (619)
515-2560
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

CHU, TINA L

Provider ID: 206360
Provider Gender: Female
License number: A144236
NPI: 1386030831
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax: (619) 515-2510
After Hours Phone: (619)
515-2300
Website: www.fhcsd.org
Email:

Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

COHEN, STUART A

Provider ID: 59888
Provider Gender: Male
License number: A43097
NPI: 1972574994
Provider English Spoken: Yes
Provider Language(s) Spoken:
French, Hebrew
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Sharp Memorial
Hospital, Rady Childrens
Hospital San Diego, Sharp Mary
Birch Hosp For Women And
Newborns
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
6699 ALVARADO RD STE 2200
SAN DIEGO, CA 92120-5253
Phone: (619) 265-3400
Fax: (619) 265-3407
After Hours Phone: (619)
265-3400
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

CONE, STEPHANIE E

Provider ID: 185268
Provider Gender: Female
License number: A123929
NPI: 1437444858

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C. Directorio de proveedores de atención primaria

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Rady Childrens Hospital San Diego
Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105-1608
Phone: (619) 255-9154

Fax:
After Hours Phone: (619) 255-9154
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, W
Hours: M-F 8AM-5PM, SA 9AM-5PM

CORDES, WILLIAM D

Provider ID: 206360
Provider Gender: Male
License number: 20A15743
NPI: 1174942544
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* ME
Hours: M-SA 9AM-5PM

DE LA MORA, OSCAR M

Provider ID: 414228
Provider Gender: Male
License number: A50769
NPI: 1982703898
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Sharp Memorial Hospital, Rady Childrens Hospital San Diego
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 995 GATEWAY CENTER WAY STE 202
 SAN DIEGO, CA 92102-4545
Phone: (619) 264-3107
Fax: (619) 264-6927
After Hours Phone: (619) 264-3107
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM

DE LA MORA, OSCAR M

Provider ID: 414228
Provider Gender: Male
License number: A50769
NPI: 1982703898
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Sharp Memorial Hospital, Rady Childrens Hospital San Diego
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 995 GATEWAY CENTER WAY STE 202
 SAN DIEGO, CA 92102-4545
Phone: (619) 264-3107
Fax: (619) 264-6927
After Hours Phone: (619) 264-3107
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM

DE LA MORA, OSCAR M
Provider ID: 73767
Provider Gender: Male
License number: A50769
NPI: 1982703898
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Sharp Memorial Hospital, Rady Childrens Hospital San Diego
Board Certified Specialty: No

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C. Directorio de proveedores de atención primaria

<p>IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 995 GATEWAY CENTER WAY SAN DIEGO, CA 92102-4500 Phone: (619) 264-3107 Fax: (619) 264-6927 After Hours Phone: (619) 264-3107 Website: Email: Medi-Cal Open Panel: Yes Min/Max Age: 0/18 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM</p>	<p>Hours: M-SA 9AM-5PM DIXON, SARAH K Provider ID: 482070 Provider Gender: Female License number: A137415 NPI: 1467751131 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No IHP-SAN DIEGO FAMILY CARE 7011 LINDA VISTA RD SAN DIEGO, CA 92111-6307 Phone: (858) 279-0925 Fax: After Hours Phone: (858) 279-0925 Website: www.sdfamilycare.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: P, EB, IB, E, R, W Hours: M,W-F 8:30AM-5:30PM, TU 8:30AM-8:30PM, SA 9AM-4PM</p>	<p>Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 11943 EL CAMINO REAL STE 210 SAN DIEGO, CA 92130-2597 Phone: (858) 793-1011 Fax: (858) 793-1035 After Hours Phone: (858) 793-1011 Website: Email: Medi-Cal Open Panel: Yes Min/Max Age: 0/18 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM</p>
<p>DE LA MORA, OSCAR M , MD Provider ID: 73767 Provider Gender: Male License number: A50769 NPI: 1982703898 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Sharp Chula Vista Med Ctr, Sharp Memorial Hospital, Rady Childrens Hospital San Diego Board Certified Specialty: No COMMUNITY CARE IPA LLC 995 GATEWAY CENTER WAY SAN DIEGO, CA 92102-4500 Phone: (619) 264-3107 Fax: (619) 264-6927 After Hours Phone: (619) 264-3107 Website: Email: Medi-Cal Open Panel: Yes Min/Max Age: 0/21 American Sign Language (ASL): No ♿ Accessibility:</p>	<p>FISHMAN, ELENA Provider ID: 524340 Provider Gender: Female License number: A78221 NPI: 1740249432 Provider English Spoken: Yes Provider Language(s) Spoken: Russian Cultural Competency: No Hospital Affiliation: Sharp Memorial Hospital, Scripps Memorial Hospital Encinitas, Rady Childrens Hospital San Diego, Scripps Memorial Hospital</p>	<p>FORTUNE, ERIN L Provider ID: 206360 Provider Gender: Male License number: A95577 NPI: 1801088422 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Grossmont Hospital Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 Phone: (619) 515-2300 Fax: After Hours Phone: (619) 515-2300 Website: www.fhcsd.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

♿ *Accessibility:* ME
Hours: M-SA 9AM-5PM

FORTUNE, ERIN L

Provider ID: 416831
Provider Gender: Male
License number: A95577
NPI: 1801088422
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Grossmont Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3514 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ *Accessibility:* ME
Hours: M-TH 8AM-5PM, F,SA 9AM-5PM

FRIEDMAN, JAIME B

Provider ID: 230500
Provider Gender: Female
License number: A79195
NPI: 1144297961
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Pomerado Hospital
Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK
16918 DOVE CANYON RD STE 200
SAN DIEGO, CA 92127-3457
Phone: (858) 924-1960
Fax: (858) 924-1964
After Hours Phone: (858) 924-1960
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM

GOVENDER, SHAMINI M

Provider ID: 469539
Provider Gender: Female
License number: C52845
NPI: 1962504423
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
2790 TRUXTUN RD STE 120A
SAN DIEGO, CA 92106-6135
Phone: (619) 222-1253
Fax: (619) 222-1276
After Hours Phone: (619) 222-1253
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM

GUPTA, VARSHA

Provider ID: 416831
Provider Gender: Female
License number: A164889
NPI: 1891283214
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3514 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ *Accessibility:* ME
Hours: M-TH 8AM-5PM, F,SA 9AM-5PM

HANSEN, JOHN C

Provider ID: 318919
Provider Gender: Male
License number: G68382
NPI: 1780655621
Provider English Spoken: Yes
Provider Language(s) Spoken: Danish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Scripps Mercy Hospital Chula Vista, Sharp Mary Birch Hosp For Women And Newborns

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 7910 FROST ST STE 400
 SAN DIEGO, CA 92123-2753
Phone: (858) 495-0500
Fax: (858) 560-4279
After Hours Phone: (858) 495-0500
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM

HENDERSON, TREVOR H

Provider ID: 58111
Provider Gender: Male
License number: A65341
NPI: 1356449425
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Sharp Mary Birch Hosp For Women And Newborns, Rady Childrens Hospital San Diego, Alvarado Hospital Llc
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 6699 ALVARADO RD STE 2200
 SAN DIEGO, CA 92120-5253
Phone: (619) 265-3400
Fax: (619) 265-3407
After Hours Phone: (619) 265-3400
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):

No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM

HIBBS, NICOLE M

Provider ID: 143979
Provider Gender: Female
License number: A106600
NPI: 1164627832
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista

Board Certified Specialty: Yes
RADY CHILDRENS HEALTH NETWORK
 550 WASHINGTON ST STE 300
 SAN DIEGO, CA 92103-2227
Phone: (619) 297-5437
Fax: (619) 297-4567
After Hours Phone: (619) 297-5437
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☯ *Accessibility:* P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM

HIGUERA, GRISELDA

Provider ID: 206353
Provider Gender: Female
License number: C169681
NPI: 1447589809
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No

Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619) 515-2400
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* ME
Hours: M-SA 9AM-5PM

HOANG, VY U

Provider ID: 161902
Provider Gender: Female
License number: A125768
NPI: 1649575135
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Sharp Mary Birch Hosp For Women And Newborns, Rady Childrens Hospital San Diego
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 6699 ALVARADO RD
 SAN DIEGO, CA 92120-5244
Phone: (619) 265-3400
Fax: (619) 265-3407
After Hours Phone: (619) 265-3400
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18

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C. Directorio de proveedores de atención primaria

American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM

JACOBSON, EUGENIA

Provider ID: 104033
Provider Gender: Female
License number: A56064
NPI: 1356416408
Provider English Spoken: Yes
Provider Language(s) Spoken: Russian, Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Sharp Mary Birch Hosp For Women And Newborns
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

7910 FROST ST STE 335
SAN DIEGO, CA 92123-2753
Phone: (858) 576-8010
Fax: (858) 576-7391
After Hours Phone: (858) 576-8010

Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No

Accessibility:
Hours: M-SA 9AM-5PM

JORDAN, JAMIE M

Provider ID: 237831
Provider Gender: Female
License number: A119363
NPI: 1275762833
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Sharp Mary Birch Hosp For Women And Newborns, Rady Childrens Hospital San Diego

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
12036 SCRIPPS HIGHLANDS DR # 102
SAN DIEGO, CA 92131-5155

Phone: (858) 566-4444
Fax: (858) 566-3321
After Hours Phone: (858) 566-4444

Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM

JUAREZ, PATRICIA P

Provider ID: 317641
Provider Gender: Female
License number: G55860
NPI: 1205807229
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Mary Birch Hosp For Women And Newborns, Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Childrens Hosp And Resrch Ctr At Oakland
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
7910 FROST ST STE 400
SAN DIEGO, CA 92123-2753

Phone: (858) 495-0500
Fax: (858) 560-4279
After Hours Phone: (858) 495-0500
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM

KARMAKAR, KANKA

Provider ID: 417101
Provider Gender: Female
License number: C54941
NPI: 1972536654
Provider English Spoken: Yes
Provider Language(s) Spoken: Bengali, Hindi, Polish, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126-2375
Phone: (844) 200-2426

Fax:
After Hours Phone: (844) 200-2426
Website:
www.operationsamahan.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-4:30PM, SA 9AM-5PM

LE, NGUYEN L

Provider ID: 44952

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Provider Gender: Male
License number: A83309
NPI: 1548308109
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Sharp Mary Birch Hosp For Women And Newborns, Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland, Sharp Memorial Hospital
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 5507 EL CAJON BLVD # B
 SAN DIEGO, CA 92115-3624
Phone: (619) 582-8814
Fax: (619) 582-8813
After Hours Phone: (619) 582-8814
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM

LOPER, KAREN S

Provider ID: 490610
Provider Gender: Female
License number: G76438
NPI: 1619908936
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

550 WASHINGTON ST STE 300
 SAN DIEGO, CA 92103-2227
Phone: (619) 297-5437
Fax: (619) 297-4567
After Hours Phone: (619) 297-5437
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM

LUJAN, ARLEEN G

Provider ID: 206360
Provider Gender: Female
License number: A61687
NPI: 1760412431
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:

After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: ME
Hours: M-SA 9AM-5PM

MACQUARRIE, ANN S

Provider ID: 416831
Provider Gender: Female
License number: A165236
NPI: 1134625460
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 3514 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility: ME
Hours: M-TH 8AM-5PM, F,SA 9AM-5PM

MADANY, GEORGE H

Provider ID: 318924
Provider Gender: Male
License number: G79990
NPI: 1811968837
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, French, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Rady Childrens Hospital San Diego, Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

7910 FROST ST STE 400
 SAN DIEGO, CA 92123-2753
 Phone: (858) 495-0500
 Fax: (858) 560-4279
 After Hours Phone: (858) 495-0500
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 ☯ Accessibility:
 Hours: M-SA 9AM-5PM

MANRIQUEZ-CASTILLO, ERENDIRA
 Provider ID: 185268
 Provider Gender: Female
 License number: A75533
 NPI: 1356397418
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Valley Childrens Hospital, Rady Childrens Hospital San Diego
 Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105-1608
 Phone: (619) 255-9155
 Fax:
 After Hours Phone: (619) 255-9155
 Website: www.lamaestra.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ☯ Accessibility: P, EB, IB, E, W
 Hours: M-F 8AM-5PM, SA 9AM-5PM

MARTINEZ ANDREE, INGRID L
 Provider ID: 319049
 Provider Gender: Female
 License number: A63054
 NPI: 1205807203
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

7910 FROST ST STE 400
 SAN DIEGO, CA 92123-2753
 Phone: (858) 495-0500
 Fax: (858) 560-4279
 After Hours Phone: (858) 495-0500
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 ☯ Accessibility:
 Hours: M-SA 9AM-5PM

MCGOWAN, KAREN A
 Provider ID: 386001
 Provider Gender: Female
 License number: A60624
 NPI: 1851380729
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital, Rady Childrens Hospital San Diego
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 6475 ALVARADO RD STE 120

SAN DIEGO, CA 92120-5007
 Phone: (619) 583-6133
 Fax: (619) 583-0321
 After Hours Phone: (619) 583-6133
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 ☯ Accessibility:
 Hours: M-SA 9AM-5PM

NAKAHARA, TAMI M
 Provider ID: 67944
 Provider Gender: Female
 License number: G80496
 NPI: 1790810802
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp Memorial Hospital, Scripps Mercy Hospital, Rady Childrens Hospital San Diego, Scripps Mercy Hospital Chula Vista, Sharp Mary Birch Hosp For Women And Newborns
 Board Certified Specialty: Yes
 RADY CHILDRENS HEALTH NETWORK
 550 WASHINGTON ST STE 300
 SAN DIEGO, CA 92103-2227
 Phone: (619) 297-5437
 Fax: (619) 297-4567
 After Hours Phone: (619) 297-5437
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No

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C. Directorio de proveedores de atención primaria

♿ *Accessibility:* P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM

NGUYEN, JANICE

Provider ID: 416831
Provider Gender: Female
License number: A157335
NPI: 1760916589
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese
Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3514 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424

Fax:
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ♿ *Accessibility:* ME
Hours: M-TH 8AM-5PM, F,SA 9AM-5PM

PARKER, SHERINE B

Provider ID: 206360
Provider Gender: Female
License number: G81658
NPI: 1477626513
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Glendale Adventist Med Ctr, Glendale Memorial Hosp And Health Ctr, Tri City Medical Ctr, Rady Childrens Hospital San Diego,

Valley Childrens Hospital
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:* ME
Hours: M-SA 9AM-5PM

PARK, TARI Y

Provider ID: 237711
Provider Gender: Female
License number: A74537
NPI: 1285669085
Provider English Spoken: Yes
Provider Language(s) Spoken: Korean
Cultural Competency: No
Hospital Affiliation: Sharp Mary Birch Hosp For Women And Newborns, Rady Childrens Hospital San Diego
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 12036 SCRIPPS HIGHLANDS DR # 102
 SAN DIEGO, CA 92131-5155
Phone: (858) 566-4444
Fax: (858) 566-3321
After Hours Phone: (858) 566-4444
Website:
Email:
Medi-Cal Open Panel: Yes

Min/Max Age: 0/18
American Sign Language (ASL): No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM

PAVLOVICH, WENDY D

Provider ID: 416831
Provider Gender: Female
License number: A126181
NPI: 1740467299
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3514 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ♿ *Accessibility:* ME
Hours: M-TH 8AM-5PM, F,SA 9AM-5PM

POWELL, STEPHANIE J

Provider ID: 319033
Provider Gender: Female
License number: A76747
NPI: 1720059744
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Mary Birch Hosp For Women And

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C. Directorio de proveedores de atención primaria

Newborns, Rady Childrens
Hospital San Diego
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
7910 FROST ST STE 400
SAN DIEGO, CA 92123-2753
Phone: (858) 495-0500
Fax: (858) 560-4279
After Hours Phone: (858)
495-0500
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM

PRESKILL, CATALINA P
Provider ID: 403583
Provider Gender: Female
License number: G29879
NPI: 1598088759
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-ST VINCENT DE PAUL
VILLA
1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638
Phone: (619) 233-8500
Fax:
After Hours Phone: (619)
233-8500
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

Accessibility:
Hours: M-F 8AM-5:30PM, SA
9AM-5PM

REDDY, JYOTHI J
Provider ID: 537598
Provider Gender: Female
License number: C144069
NPI: 1306869300
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
HEALTH EXCEL IPA INC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608
Phone: (619) 255-9155
Fax: (619) 795-9849
After Hours Phone: (619)
255-9155
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility: P, EB, IB, E
Hours: M-SA 9AM-5PM

RHODUS, CECILIA M
Provider ID: 206363
Provider Gender: Female
License number: A137260
NPI: 1699161059
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Northern Inyo
Hosp, Rady Childrens Hospital
San Diego
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST

SAN DIEGO, CA 92102-4715
Phone: (619) 515-2560
Fax:
After Hours Phone: (619)
515-2560
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: ME
Hours: M-SA 9AM-5PM

RISSMAN, RAQUEL L
Provider ID: 103726
Provider Gender: Female
License number: A82394
NPI: 1700998846
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Scripps Mercy Hospital, Scripps
Mercy Hospital Chula Vista
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
550 WASHINGTON ST STE 300
SAN DIEGO, CA 92103-2227
Phone: (619) 297-5437
Fax: (619) 297-4567
After Hours Phone: (619)
297-5437
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility: P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM

RODRIGUEZ, ALDO E

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Provider ID: 451167
Provider Gender: Male
License number: A134995
NPI: 1508209651
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER
950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* P, EB, IB, E, R,
T, W
Hours: M-F 8AM-5PM, SA
8AM-4PM

RODRIGUEZ, JAVIER

Provider ID: 157400
Provider Gender: Male
License number: A82639
NPI: 1013059385
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
HEALTH EXCEL IPA INC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

Phone: (619) 280-4213
Fax: (619) 975-9847
After Hours Phone: (619)
280-4213
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:* P, EB, IB, E
Hours: M-SA 9AM-5PM

RODRIGUEZ, JAVIER

Provider ID: 185268
Provider Gender: Male
License number: A82639
NPI: 1013059385
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608
Phone: (619) 255-9155
Fax:
After Hours Phone: (619)
255-9155
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* P, EB, IB, E, W
Hours: M-F 8AM-5PM, SA
9AM-5PM

RUBENSTEIN, STUART I

Provider ID: 521305
Provider Gender: Male
License number: G60587

NPI: 1689633844
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas,
Rady Childrens Hospital San
Diego, Scripps Memorial
Hospital, Sharp Memorial
Hospital
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
11943 EL CAMINO REAL STE
210
SAN DIEGO, CA 92130-2597
Phone: (858) 793-1011
Fax: (858) 793-1035
After Hours Phone: (858)
793-1011
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM

SADRIEH, JAY J , MD

Provider ID: 43890
Provider Gender: Male
License number: A46462
NPI: 1548230998
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Hindi, Spanish, Urdu
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Rady
Childrens Hospital San Diego,
Sharp Mary Birch Hosp For
Women And Newborns
Board Certified Specialty: No
COMMUNITY CARE IPA LLC

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

5222 BALBOA AVE STE 42
SAN DIEGO, CA 92117-6991

Phone: (858) 268-0702

Fax: (858) 268-0374

After Hours Phone: (858)
268-0702

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

SADRIEH, JAY J

Provider ID: 43890

Provider Gender: Male

License number: A46462

NPI: 1548230998

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi, Hindi, Spanish, Urdu

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Rady

Childrens Hospital San Diego,

Sharp Mary Birch Hosp For

Women And Newborns

Board Certified Specialty: No

HEALTH EXCEL IPA INC

5222 BALBOA AVE STE 42

SAN DIEGO, CA 92117-6991

Phone: (858) 268-0702

Fax: (858) 268-0374

After Hours Phone: (858)

268-0702

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/21

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

SADRIEH, JAY J

Provider ID: 43890

Provider Gender: Male

License number: A46462

NPI: 1548230998

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi, Hindi, Spanish, Urdu

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Rady

Childrens Hospital San Diego,

Sharp Mary Birch Hosp For

Women And Newborns

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

5222 BALBOA AVE STE 42

SAN DIEGO, CA 92117-6991

Phone: (858) 268-0702

Fax: (858) 268-0374

After Hours Phone: (858)

268-0702

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

SAMADI SOLTANI, MARYAM S

Provider ID: 403583

Provider Gender: Female

License number: A92838

NPI: 1932139615

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi, Persian

Cultural Competency: No

Hospital Affiliation: Corona

Regional Med Ctr

Board Certified Specialty: No

IHP-ST VINCENT DE PAUL
VILLA

1501 IMPERIAL AVE

SAN DIEGO, CA 92101-7638

Phone: (619) 233-8500

Fax:

After Hours Phone: (619)

233-8500

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

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

9AM-5PM

SAMPATH, SRIVIDYA N

Provider ID: 416831

Provider Gender: Female

License number: A132576

NPI: 1275892754

Provider English Spoken: Yes

Provider Language(s) Spoken:

French

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

3514 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax:

After Hours Phone: (619)

515-2424

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility: ME

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Hours: M-TH 8AM-5PM, F,SA
9AM-5PM

SCHMITT, STEPHANIE G

Provider ID: 416831
Provider Gender: Female
License number: A164979
NPI: 1992202170
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
3514 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619)
515-2424
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-TH 8AM-5PM, F,SA
9AM-5PM

SCHNEIDER, SARAH M

Provider ID: 206360
Provider Gender: Female
License number: A151631
NPI: 1508210311
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

SEBSO, JODI

Provider ID: 206360
Provider Gender: Female
License number: A103099
NPI: 1538484316
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

SEBSO, JODI

Provider ID: 416831
Provider Gender: Female
License number: A103099

NPI: 1538484316
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
3514 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619)
515-2424
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-TH 8AM-5PM, F,SA
9AM-5PM

SHENOY, ASHVIN B

Provider ID: 232392
Provider Gender: Male
License number: A123017
NPI: 1619262664
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Paradise
Valley Hospital, Sharp Memorial
Hospital, Scripps Mercy Hospital
Chula Vista, Sharp Mary Birch
Hosp For Women And
Newborns, Scripps Mercy
Hospital
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
292 EUCLID AVE STE 220

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

SAN DIEGO, CA 92114-3629

Phone: (619) 262-8624

Fax: (619) 262-6639

After Hours Phone: (619)

262-8624

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, R, T

Hours: M-SA 9AM-5PM

SHETH, HASMUKH L

Provider ID: 451167

Provider Gender: Male

License number: A45942

NPI: 1396812236

Provider English Spoken: Yes

Provider Language(s) Spoken:

Gujarati, Hindi, Urdu

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital Chula Vista, Scripps

Mercy Hospital

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH
CENTER

950 S EUCLID AVE

SAN DIEGO, CA 92114-6201

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, R,

T, W

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

8AM-4PM

SHIAU, NANCY H

Provider ID: 40852

Provider Gender: Female

License number: A71292

NPI: 1750352779

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Grossmont

Hospital, Rady Childrens

Hospital San Diego, Sharp Mary

Birch Hosp For Women And

Newborns, Alvarado Hosp Med

Ctr

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

6699 ALVARADO RD STE 2200

SAN DIEGO, CA 92120-5253

Phone: (619) 265-3400

Fax: (619) 265-3407

After Hours Phone: (619)

265-3400

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

SNYDER, JOEL M

Provider ID: 24734

Provider Gender: Male

License number: G39469

NPI: 1487748018

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital, Rady Childrens

Hospital San Diego, Sharp Mary

Birch Hosp For Women And

Newborns

Board Certified Specialty: Yes

RADY CHILDRENS HEALTH

NETWORK

6475 ALVARADO RD STE 120

SAN DIEGO, CA 92120-5007

Phone: (619) 583-6133

Fax: (619) 583-0321

After Hours Phone: (619)

583-6133

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, R,

W

Hours: M-SA 9AM-5PM

SPITZER, MARSHA D

Provider ID: 206360

Provider Gender: Female

License number: A76785

NPI: 1851323315

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

<p><i>American Sign Language (ASL):</i> No <i>Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM</p>	<p>Hospital, Grossmont Hospital <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY # 2 SAN DIEGO, CA 92101-5713 <i>Phone:</i> (619) 515-2525 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2525 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-F 8:30AM-5:30PM, SA 9AM-5PM</p>	<p><i>Hours:</i> M-SA 9AM-5PM SULEIMAN QAFITI, KHAWLA H <i>Provider ID:</i> 416831 <i>Provider Gender:</i> Female <i>License number:</i> A51318 <i>NPI:</i> 1659303121 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 3514 30TH ST SAN DIEGO, CA 92104-4120 <i>Phone:</i> (619) 515-2424 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2424 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> ME <i>Hours:</i> M-TH 8AM-5PM, F,SA 9AM-5PM</p>
<p>SPITZER, MARSHA D <i>Provider ID:</i> 402851 <i>Provider Gender:</i> Female <i>License number:</i> A76785 <i>NPI:</i> 1851323315 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Grossmont Hospital <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104 <i>Phone:</i> (619) 515-2444 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2444 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-W,F 8:30AM-5:30PM, TH 9AM-6PM, SA 9AM-5PM</p>	<p>STAFFORD, DIANA G <i>Provider ID:</i> 435414 <i>Provider Gender:</i> Female <i>License number:</i> A150668 <i>NPI:</i> 1225322183 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 6475 ALVARADO RD STE 120 SAN DIEGO, CA 92120-5007 <i>Phone:</i> (619) 583-6133 <i>Fax:</i> (619) 583-0321 <i>After Hours Phone:</i> (619) 583-6133 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i></p>	<p>TAMAYO, MAITHE F <i>Provider ID:</i> 206360 <i>Provider Gender:</i> Female <i>License number:</i> A80504 <i>NPI:</i> 1487748430 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista <i>Board Certified Specialty:</i> Yes</p>
<p>SPITZER, MARSHA D <i>Provider ID:</i> 417429 <i>Provider Gender:</i> Female <i>License number:</i> A76785 <i>NPI:</i> 1851323315 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy</p>	<p><i>Accessibility:</i></p>	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

TAMAYO, MAITHE F

Provider ID: 356145
Provider Gender: Female
License number: A80504
NPI: 1487748430
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
2391 ISLAND AVE
SAN DIEGO, CA 92102-2941
Phone: (619) 515-2435
Fax:
After Hours Phone: (619)
515-2435
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,

T, ME

Hours: M-SA 9AM-5PM

TSANG, RUEY-SHIUAN T

Provider ID: 319055
Provider Gender: Female
License number: A127164
NPI: 1518228188
Provider English Spoken: Yes
Provider Language(s) Spoken:
Chinese
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Mary Birch Hosp For
Women And Newborns, Scripps
Memorial Hospital, Scripps
Memorial Hospital Encinitas
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
7910 FROST ST STE 400
SAN DIEGO, CA 92123-2753
Phone: (858) 495-0500
Fax: (858) 560-4279
After Hours Phone: (858)
495-0500
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

VU, MYLOAN T

Provider ID: 101443
Provider Gender: Female
License number: A45749
NPI: 1457453177
Provider English Spoken: Yes
Provider Language(s) Spoken:
Vietnamese
Cultural Competency: No

Hospital Affiliation: Sharp Mary
Birch Hosp For Women And
Newborns, Rady Childrens
Hospital San Diego, Grossmont
Hospital
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
6699 ALVARADO RD STE 2200
SAN DIEGO, CA 92120-5253
Phone: (619) 265-3400
Fax: (619) 265-3407
After Hours Phone: (619)
265-3400
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM

WASSON, MINA K

Provider ID: 524333
Provider Gender: Female
License number: C167860
NPI: 1366753022
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
11943 EL CAMINO REAL STE
210
SAN DIEGO, CA 92130-2597
Phone: (858) 793-1011
Fax: (858) 793-1035
After Hours Phone: (858)
793-1011
Website:
Email:
Medi-Cal Open Panel: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Min/Max Age: 0/18

American Sign Language (ASL): No

♿ Accessibility:

Hours: M-SA 9AM-5PM

WATERS, ELIZABETH J

Provider ID: 153090

Provider Gender: Female

License number: A113933

NPI: 1730477621

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Scripps Mercy Hospital Chula Vista, Paradise Valley Hospital, Sharp Mary Birch Hosp For Women And Newborns, Scripps Mercy Hospital, Rady Childrens Hospital San Diego

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

292 EUCLID AVE STE 220
SAN DIEGO, CA 92114-3629

Phone: (619) 262-8624

Fax: (619) 262-6639

After Hours Phone: (619) 262-8624

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

♿ Accessibility: P, EB, IB, E, R, T

Hours: M-SA 9AM-5PM

WONG, YOLANDA Y

Provider ID: 233532

Provider Gender: Female

License number: A94449

NPI: 1851599872

Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE
4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105-1690

Phone: (619) 280-2058

Fax:

After Hours Phone: (619)

280-2058

Website: www.sdfamilycare.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/22

American Sign Language (ASL): No

♿ Accessibility: P, EB, IB, E, W

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

WONG, YOLANDA Y

Provider ID: 482070

Provider Gender: Female

License number: A94449

NPI: 1851599872

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE
7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307

Phone: (858) 810-8700

Fax:

After Hours Phone: (858)

810-8700

Website: www.sdfamilycare.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, R, W

Hours: M,W-F 8:30AM-5:30PM,
TU 8:30AM-8:30PM, SA
9AM-4PM

ZAGULI, MARVIN J

Provider ID: 237793

Provider Gender: Male

License number: G38188

NPI: 1508837501

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital, Sharp
Mary Birch Hosp For Women
And Newborns

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

12036 SCRIPPS HIGHLANDS
DR # 102

SAN DIEGO, CA 92131-5155

Phone: (858) 566-4444

Fax: (858) 566-3321

After Hours Phone: (858)

566-4444

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

♿ Accessibility:

Hours: M-SA 9AM-5PM

ZAGULI, MARVIN J

Provider ID: 319041

Provider Gender: Male

License number: G38188

NPI: 1508837501

Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital, Sharp
Mary Birch Hosp For Women
And Newborns
Board Certified Specialty: Yes
RADY CHILDRENS HEALTH
NETWORK
7910 FROST ST STE 400
SAN DIEGO, CA 92123-2753
Phone: (858) 495-0500
Fax: (858) 560-4279
After Hours Phone: (858)
495-0500
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM

ZAHEER, AARON A

Provider ID: 233532
Provider Gender: Male
License number: A61238
NPI: 1902882301
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE
4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105-1690
Phone: (619) 280-2058
Fax:
After Hours Phone: (619)
280-2058
Website: www.sdfamilycare.org

Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/22
American Sign Language (ASL):
No
Accessibility: P, EB, IB, E, W
Hours: M-F 8AM-5PM, SA
8AM-2PM

ZAHEER, AARON A

Provider ID: 482070
Provider Gender: Male
License number: A61238
NPI: 1902882301
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE
7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307
Phone: (858) 810-8700
Fax:
After Hours Phone: (858)
810-8700
Website: www.sdfamilycare.org

Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: P, EB, IB, E, R,
W
Hours: M,W-F 8:30AM-5:30PM,
TU 8:30AM-8:30PM, SA
9AM-4PM

ZANDKARIMI, FARIBA

Provider ID: 206360
Provider Gender: Female
License number: A46161
NPI: 1356373674
Provider English Spoken: Yes

Provider Language(s) Spoken:
Farsi, Persian, Spanish
Cultural Competency: No
Hospital Affiliation: Mercy
General Hospital, Rady Childrens
Hospital San Diego, Scripps
Mercy Hospital, Scripps Mercy
Hospital Chula Vista, Ucsd
Medical Ctr
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: ME
Hours: M-SA 9AM-5PM

PHYSICIANS ASSISTANT

ACOSTA, ANGELICA N

Provider ID: 206360
Provider Gender: Female
License number: PA16245
NPI: 1952513517
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

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C. Directorio de proveedores de atención primaria

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

ACOSTA, ANGELICA N

Provider ID: 356145

Provider Gender: Female

License number: PA16245

NPI: 1952513517

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

2391 ISLAND AVE

SAN DIEGO, CA 92102-2941

Phone: (619) 515-2435

Fax:

After Hours Phone: (619)

515-2435

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, R,
T, ME

Hours: M-SA 9AM-5PM

AGUILAR-URREA, RUTH N

Provider ID: 206360

Provider Gender: Female

License number: PA54661

NPI: 1699298190

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

ALVARADO, EDMUND R

Provider ID: 206360

Provider Gender: Male

License number: PA20888

NPI: 1720303340

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

ARMENTA, JORGE

Provider ID: 185268

Provider Gender: Male

License number: PA13694

NPI: 1346382611

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE

SAN DIEGO, CA 92105-1608

Phone: (619) 255-9155

Fax:

After Hours Phone: (619)

255-9155

Website: www.lamaestra.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, W

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

9AM-5PM

BATISTA, OSVALDO

Provider ID: 206360

Provider Gender: Male

License number: PA17864

NPI: 1245349224

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

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C. Directorio de proveedores de atención primaria

SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

CASTILLO, PATRICIA

Provider ID: 206362
Provider Gender: Female
License number: PA17220
NPI: 1376550657
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619)
515-2424
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

CHAN, TIFFANY C

Provider ID: 206360

Provider Gender: Female
License number: PA23258
NPI: 1790111607
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

CHUCKA, RITA M

Provider ID: 206353
Provider Gender: Female
License number: PA58098
NPI: 1659745362
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619)
515-2400
Website: www.fhcsd.org
Email:

Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

CONTRERAS, LORETTA L

Provider ID: 403583
Provider Gender: Female
License number: PA54617
NPI: 1679096341
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-ST VINCENT DE PAUL
VILLA
1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638
Phone: (619) 233-8500
Fax:
After Hours Phone: (619)
233-8500
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-F 8AM-5:30PM, SA
9AM-5PM

DAVID, MARVIC T

Provider ID: 206360
Provider Gender: Male
License number: PA53748
NPI: 1750832317
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No

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C. Directorio de proveedores de atención primaria

FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

DOLMETSCH, JEANETTE

Provider ID: 206353

Provider Gender: Female

License number: PA58905

NPI: 1164941456

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF SAN DIEGO

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2400

Fax:

After Hours Phone: (619)
515-2400

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

DOLMETSCH, JEANETTE

Provider ID: 417987

Provider Gender: Female

License number: PA58905

NPI: 1164941456

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF SAN DIEGO

4874 POLK AVE

SAN DIEGO, CA 92105-2026

Phone: (619) 515-2426

Fax:

After Hours Phone: (619)
515-2426

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

DRAME, SALWA S

Provider ID: 206353

Provider Gender: Female

License number: PA59481

NPI: 1093136426

Provider English Spoken: Yes

Provider Language(s) Spoken:

French, Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF SAN DIEGO

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2400

Fax:

After Hours Phone: (619)
515-2400

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

DRAME, SALWA S

Provider ID: 417987

Provider Gender: Female

License number: PA59481

NPI: 1093136426

Provider English Spoken: Yes

Provider Language(s) Spoken:

French, Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF SAN DIEGO

4874 POLK AVE

SAN DIEGO, CA 92105-2026

Phone: (619) 515-2426

Fax:

After Hours Phone: (619)
515-2426

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

FINK, PATRICK M

Provider ID: 402851

Provider Gender: Male

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C. Directorio de proveedores de atención primaria

License number: PA52704
NPI: 1922380328
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2444
Fax:
After Hours Phone: (619)
515-2444
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-W,F 8:30AM-5:30PM,
TH 9AM-6PM, SA 9AM-5PM

GARCIA, DEANA J

Provider ID: 416831
Provider Gender: Female
License number: PA21042
NPI: 1447567995
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
3514 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619)
515-2424
Website: www.fhcsd.org
Email:

Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-TH 8AM-5PM, F,SA
9AM-5PM

HILL, MICHELLE

Provider ID: 206360
Provider Gender: Female
License number: PA58626
NPI: 1750820239
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email:

Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

HOLM, STEVEN K

Provider ID: 206360
Provider Gender: Male
License number: PA13752
NPI: 1932257573
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email:

Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

HOXMEIER, KRYSTA M

Provider ID: 206363
Provider Gender: Female
License number: PA28505
NPI: 1104203454
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2560
Fax:
After Hours Phone: (619)
515-2560

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org
Email:

Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

HOXMEIER, KRISTA M

Provider ID: 418142
Provider Gender: Female
License number: PA28505
NPI: 1104203454
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
5160 FEDERAL BLVD
SAN DIEGO, CA 92105-5429
Phone: (619) 515-2454
Fax:
After Hours Phone: (619) 515-2454
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

LAPINA, LORI L

Provider ID: 206362
Provider Gender: Female
License number: PA23231
NPI: 1245670413
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424
Fax:
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: ME
Hours: M-SA 9AM-5PM

LAPINA, LORI L

Provider ID: 417937
Provider Gender: Female
License number: PA23231
NPI: 1245670413
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM

LEON, FLOR M

Provider ID: 206360
Provider Gender: Female
License number: PA53788

NPI: 1902358237
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: ME
Hours: M-SA 9AM-5PM

LEON, FLOR M

Provider ID: 356145
Provider Gender: Female
License number: PA53788
NPI: 1902358237
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
2391 ISLAND AVE
SAN DIEGO, CA 92102-2941
Phone: (619) 515-2435
Fax:
After Hours Phone: (619) 515-2435
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None

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C. Directorio de proveedores de atención primaria

American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM

LEON, FLOR M

Provider ID: 419529
Provider Gender: Female
License number: PA53788
NPI: 1902358237
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
2325 COMMERCIAL ST STE 1400
SAN DIEGO, CA 92113-1195
Phone: (619) 515-2422
Fax:
After Hours Phone: (619) 515-2422
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-F 8AM-5PM, SA 9AM-5PM

LE, ALEX T

Provider ID: 417429
Provider Gender: Male
License number: PA22762
NPI: 1669713889
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese
Cultural Competency: No
Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1550 BROADWAY # 2
SAN DIEGO, CA 92101-5713
Phone: (619) 515-2525
Fax:
After Hours Phone: (619) 515-2525
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

LOPEZ, MARIO A

Provider ID: 206353
Provider Gender: Male
License number: PA21385
NPI: 1932335080
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619) 515-2400
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

LOPEZ, MARIO A

Provider ID: 417937
Provider Gender: Male
License number: PA21385
NPI: 1932335080
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM

LOPEZ, MARIO A

Provider ID: 417987
Provider Gender: Male
License number: PA21385
NPI: 1932335080
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105-2026

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Phone: (619) 515-2426

Fax:

After Hours Phone: (619)
515-2426

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

MARTINEZ MURGUIA, IRENE

Provider ID: 185268

Provider Gender: Female

License number: PA20296

NPI: 1447492889

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

LA MAESTRA FAMILY CLINIC

4060 FAIRMOUNT AVE

SAN DIEGO, CA 92105-1608

Phone: (619) 255-9155

Fax:

After Hours Phone: (619)

255-9155

Website: www.lamaestra.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, W

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

9AM-5PM

MERCER, KELLY C

Provider ID: 185268

Provider Gender: Female

License number: PA21625

NPI: 1154609790

Provider English Spoken: Yes

Provider Language(s) Spoken:
Arabic

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

LA MAESTRA FAMILY CLINIC

4060 FAIRMOUNT AVE

SAN DIEGO, CA 92105-1608

Phone: (619) 255-9155

Fax:

After Hours Phone: (619)

255-9155

Website: www.lamaestra.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, W

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

9AM-5PM

MILLER, LAUREL K

Provider ID: 206363

Provider Gender: Female

License number: PA20378

NPI: 1598992133

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: (619) 515-2560

Fax:

After Hours Phone: (619)

515-2560

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

O'MARA, ROBERT J

Provider ID: 206362

Provider Gender: Male

License number: PA14526

NPI: 1336174382

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax:

After Hours Phone: (619)

515-2424

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

PHUNG, AIVI L

Provider ID: 206046

Provider Gender: Female

License number: PA53902

NPI: 1639528110

Provider English Spoken: Yes

Provider Language(s) Spoken:
Vietnamese

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

IHP-SAN DIEGO FAMILY CARE
6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342
Phone: (858) 279-0925
Fax:
After Hours Phone: (858)
279-0925
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
T, W
Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

SCHELLIE, SCOTT A

Provider ID: 417429
Provider Gender: Male
License number: PA53288
NPI: 1699053843
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
1550 BROADWAY # 2
SAN DIEGO, CA 92101-5713
Phone: (619) 515-2525
Fax:
After Hours Phone: (619)
515-2525
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

TAHRIRI, BAHAREH

Provider ID: 417987
Provider Gender: Female
License number: PA51867
NPI: 1295147387
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105-2026
Phone: (619) 515-2426
Fax:
After Hours Phone: (619)
515-2426
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

TOMASZEWSKI, DEBRA J

Provider ID: 206363
Provider Gender: Female
License number: PA58081
NPI: 1215264452
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: (619) 515-2560
Fax:
After Hours Phone: (619)
515-2560
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

TOMASZEWSKI, DEBRA J

Provider ID: 206363
Provider Gender: Female
License number: PA20481
NPI: 1215264452
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2560
Fax:
After Hours Phone: (619)
515-2560
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

TOMASZEWSKI, DEBRA J

Provider ID: 206363
Provider Gender: Female
License number: MT2061555
NPI: 1215264452

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

<p><i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST SAN DIEGO, CA 92102-4715 <i>Phone:</i> (619) 515-2560 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2560 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM</p> <p>TREUNER, JULIE A <i>Provider ID:</i> 206360 <i>Provider Gender:</i> Female <i>License number:</i> PA17478 <i>NPI:</i> 1922013614 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None</p>	<p><i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM</p> <p>VARGAS, ROBERT M <i>Provider ID:</i> 206360 <i>Provider Gender:</i> Male <i>License number:</i> PA11194 <i>NPI:</i> 1972528081 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM</p> <p>YIP, JACKIE <i>Provider ID:</i> 206353 <i>Provider Gender:</i> Female <i>License number:</i> PA20996 <i>NPI:</i> 1558676171 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF</p>	<p>SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 <i>Phone:</i> (619) 515-2400 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2400 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM</p> <p>YOUNG-PEN, TONI E <i>Provider ID:</i> 206362 <i>Provider Gender:</i> Female <i>License number:</i> PA18746 <i>NPI:</i> 1932297595 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Vietnamese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120 <i>Phone:</i> (619) 515-2424 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2424 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM</p> <p>YOUNG-PEN, TONI E</p>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Provider ID: 233597
Provider Gender: Female
License number: PA18746
NPI: 1932297595
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN DIEGO FAMILY CARE
 4290 POLK AVE
 SAN DIEGO, CA 92105-1524
Phone: (619) 563-0507
Fax:
After Hours Phone: (619)
 563-0507
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
 8AM-2PM

PODIATRIST

AHMED, AISHA
Provider ID: 417101
Provider Gender: Female
License number: DPM5369
NPI: 1316326382
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Spanish, Urdu
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
 OPERATION SAMAHAN
 10737 CAMINO RUIZ STE 235
 SAN DIEGO, CA 92126-2375

Phone: (844) 200-2426
Fax:
After Hours Phone: (844)
 200-2426
Website:
 www.operationsamahan.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-F 8AM-4:30PM, SA
 9AM-5PM

BROWN, JAMES F
Provider ID: 206046
Provider Gender: Male
License number: DPM4434
NPI: 1073513610
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN DIEGO FAMILY CARE
 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111-6342
Phone: (858) 279-0925

Fax:
After Hours Phone: (858)
 279-0925
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* P, EB, IB, E, R, T, W
Hours: M-F 8:30AM-5:30PM, SA
 9AM-5PM

BROWN, JAMES F
Provider ID: 214492

Provider Gender: Male
License number: DPM4434
NPI: 1073513610
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-IMPERIAL BEACH HEALTH CENTER
 1016 OUTER RD
 SAN DIEGO, CA 92154-1351
Phone: (619) 429-3733
Fax:
After Hours Phone: (619)
 429-3733
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* P, IB, E, R, T, W
Hours: M,F 8AM-5PM, TU-TH
 8AM-8PM, SA 9AM-5PM

BROWN, JAMES F
Provider ID: 233597
Provider Gender: Male
License number: DPM4434
NPI: 1073513610
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN DIEGO FAMILY CARE
 4290 POLK AVE
 SAN DIEGO, CA 92105-1524
Phone: (619) 536-0250
Fax:
After Hours Phone: (619)
 536-0250
Website: www.sdfamilycare.org
Email:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
8AM-2PM

JUAREZ, LETICIA J

Provider ID: 206360
Provider Gender: Female
License number: DPM5661
NPI: 1508393778
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website: www.fhcsd.org
Email:

Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

MILLER, GLENN A

Provider ID: 206360
Provider Gender: Male
License number: DPM3584
NPI: 1164457966
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax: (619) 269-0053
After Hours Phone: (619)
515-2300
Website: www.fhcsd.org
Email:

Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

MILLER, GLENN A

Provider ID: 206362
Provider Gender: Male
License number: DPM3584
NPI: 1164457966
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2300
Fax: (619) 685-8317
After Hours Phone: (619)
515-2300
Website: www.fhcsd.org
Email:

Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

SCHNEIDER, SARAH A

Provider ID: 206353
Provider Gender: Female
License number: DPM4819
NPI: 1326282237
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619)
515-2400
Website: www.fhcsd.org
Email:

Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

SCHNEIDER, SARAH A

Provider ID: 206360
Provider Gender: Female
License number: DPM4819
NPI: 1326282237
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

SCHNEIDER, SARAH A

Provider ID: 402851

Provider Gender: Female

License number: DPM4819

NPI: 1326282237

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2444

Fax:

After Hours Phone: (619)

515-2444

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

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

SCHNEIDER, SARAH A

Provider ID: 417429

Provider Gender: Female

License number: DPM4819

NPI: 1326282237

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

1550 BROADWAY # 2

SAN DIEGO, CA 92101-5713

Phone: (619) 515-2525

Fax:

After Hours Phone: (619)

515-2525

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

SHIN, HENRY J

Provider ID: 206353

Provider Gender: Male

License number: DPM4180

NPI: 1780775379

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Paradise
Valley Hospital, Sharp Chula
Vista Med Ctr

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2400

Fax:

After Hours Phone: (619)

515-2400

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

PREVENTATIVE MEDICINE GENERAL

HILL, LINDA L

Provider ID: 206046

Provider Gender: Female

License number: G41532

NPI: 1467434811

Provider English Spoken: Yes

Provider Language(s) Spoken:

French, Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr

Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE
6973 LINDA VISTA RD

SAN DIEGO, CA 92111-6342

Phone: (858) 279-0925

Fax:

After Hours Phone: (858)

279-0925

Website: www.sdfamilycare.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,
T, W

Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

HILL, LINDA L

Provider ID: 482070

Provider Gender: Female

License number: G41532

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

NPI: 1467434811
 Provider English Spoken: Yes
 Provider Language(s) Spoken: French, Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Board Certified Specialty: No
 IHP-SAN DIEGO FAMILY CARE
 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111-6307
 Phone: (858) 810-8700
 Fax:
 After Hours Phone: (858) 810-8700
 Website: www.sdfamilycare.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, R, W
 Hours: M,W-F 8:30AM-5:30PM, TU 8:30AM-8:30PM, SA 9AM-4PM

RISSER, JOSEPH A

Provider ID: 206046
 Provider Gender: Male
 License number: G70886
 NPI: 1952386765
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Board Certified Specialty: Yes
 IHP-SAN DIEGO FAMILY CARE
 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111-6342
 Phone: (858) 279-0925
 Fax: (858) 279-0377
 After Hours Phone: (858) 279-0925
 Website: www.sdfamilycare.org

Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, R, T, W
 Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

RISSER, JOSEPH A

Provider ID: 482070
 Provider Gender: Male
 License number: G70886
 NPI: 1952386765
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Board Certified Specialty: No
 IHP-SAN DIEGO FAMILY CARE
 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111-6307
 Phone: (858) 810-8700
 Fax:
 After Hours Phone: (858) 810-8700
 Website: www.sdfamilycare.org

Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, R, W
 Hours: M,W-F 8:30AM-5:30PM, TU 8:30AM-8:30PM, SA 9AM-4PM

ROMERO, CAMILA X

Provider ID: 206046
 Provider Gender: Female
 License number: A93812
 NPI: 1508912130
 Provider English Spoken: Yes

Provider Language(s) Spoken: French, Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp Mary Birch Hosp For Women And Newborns
 Board Certified Specialty: No
 IHP-SAN DIEGO FAMILY CARE
 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111-6342
 Phone: (858) 279-0925
 Fax: (858) 279-0377
 After Hours Phone: (858) 279-0925
 Website: www.sdfamilycare.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, R, T, W
 Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

RADIOLOGY DIAGNOSTIC X-RAY

CLINE, DAVID W

Provider ID: 185268
 Provider Gender: Male
 License number: G87837
 NPI: 1922162015
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105-1608
 Phone: (619) 255-9155
 Fax:
 After Hours Phone: (619) 255-9155

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Website: www.lamaestra.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, W

Hours: M-F 8AM-5PM, SA
9AM-5PM

REGISTERED PHYSICAL THERAPIST

AGASHE, NEELAM

Provider ID: 206353

Provider Gender: Female

License number: PT291539

NPI: 1689027955

Provider English Spoken: Yes

Provider Language(s) Spoken:

Hindi

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2400

Fax:

After Hours Phone: (619)

515-2400

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

BLOCKER, NIRIT S

Provider ID: 206353

Provider Gender: Female

License number: PT30272

NPI: 1457689309

Provider English Spoken: Yes

Provider Language(s) Spoken:

Hebrew

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2400

Fax:

After Hours Phone: (619)

515-2400

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

BLOCKER, NIRIT S

Provider ID: 206360

Provider Gender: Female

License number: PT30272

NPI: 1457689309

Provider English Spoken: Yes

Provider Language(s) Spoken:

Hebrew

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

CONCORS, ANDREW L

Provider ID: 417937

Provider Gender: Male

License number: PT12930

NPI: 1578706743

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2545

Fax:

After Hours Phone: (619)

515-2545

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-TH 8AM-9PM, F

8AM-5PM, SA 9AM-5PM

CUMMINGS, GEORGE P

Provider ID: 206353

Provider Gender: Male

License number: PT295173

NPI: 1497236384

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619) 515-2400
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☒ *Accessibility:* ME
Hours: M-SA 9AM-5PM

CUMMINGS, GEORGE P

Provider ID: 417937
Provider Gender: Male
License number: PT295173
NPI: 1497236384
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☒ *Accessibility:*
Hours: M-TH 8AM-9PM, F

8AM-5PM, SA 9AM-5PM
DAHMS, MADELYNN
Provider ID: 206360
Provider Gender: Female
License number: PT295463
NPI: 1245712702
Provider English Spoken: Yes
Provider Language(s) Spoken: Sign Language
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:

After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☒ *Accessibility:* ME
Hours: M-SA 9AM-5PM

FIELDING, JOSEPH S

Provider ID: 417937
Provider Gender: Male
License number: PT40975
NPI: 1235577560
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143

Phone: (619) 515-2545
Fax:
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☒ *Accessibility:*
Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM

FOREYT, JANE K

Provider ID: 206353
Provider Gender: Female
License number: PT295063
NPI: 1487066346
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619) 515-2400
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☒ *Accessibility:* ME
Hours: M-SA 9AM-5PM

HAPKE, ELENA

Provider ID: 417937
Provider Gender: Female
License number: PT292613

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C. Directorio de proveedores de atención primaria

<p>NPI: 1003354895 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 Phone: (619) 515-2545 Fax: After Hours Phone: (619) 515-2545 Website: www.fhcsd.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No Accessability: No Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM</p>	<p>Min/Max Age: None American Sign Language (ASL): No Accessability: ME Hours: M-SA 9AM-5PM</p> <p>LEAVITT, IAN R Provider ID: 206353 Provider Gender: Male License number: PT291088 NPI: 1275993560 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 Phone: (619) 515-2400 Fax: After Hours Phone: (619) 515-2400 Website: www.fhcsd.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No Accessability: ME Hours: M-SA 9AM-5PM</p>	<p>4094 4TH AVE SAN DIEGO, CA 92103-2143 Phone: (619) 515-2545 Fax: After Hours Phone: (619) 515-2545 Website: www.fhcsd.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No Accessability: No Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM</p>
<p>IRIZARRY, NICOLE M Provider ID: 206360 Provider Gender: Female License number: PT33914 NPI: 1003088063 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 Phone: (619) 515-2300 Fax: After Hours Phone: (619) 515-2300 Website: www.fhcsd.org Email: Medi-Cal Open Panel: Yes</p>	<p>MAHONEY, KAITLYN Provider ID: 417937 Provider Gender: Female License number: PT296559 NPI: 1114583176 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO</p>	<p>MIGNEA, DAVID S Provider ID: 206353 Provider Gender: Male License number: PT293536 NPI: 1043736879 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 Phone: (619) 515-2400 Fax: After Hours Phone: (619) 515-2400 Website: www.fhcsd.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No Accessability: ME Hours: M-SA 9AM-5PM</p> <p>MIGNEA, DAVID S Provider ID: 417937</p>

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C. Directorio de proveedores de atención primaria

Provider Gender: Male
License number: PT293536
NPI: 1043736879
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619)
515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-TH 8AM-9PM, F
8AM-5PM, SA 9AM-5PM

REBELLO, MELANIE

Provider ID: 417937
Provider Gender: Female
License number: PT297682
NPI: 1578922795
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619)
515-2545
Website: www.fhcsd.org

Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-TH 8AM-9PM, F
8AM-5PM, SA 9AM-5PM

REYES, CARMEN R

Provider ID: 206353
Provider Gender: Female
License number: PT40285
NPI: 1639503725
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619)
515-2400
Website: www.fhcsd.org

Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

SCHMIDT, BRYAN J

Provider ID: 417937
Provider Gender: Male
License number: PT28061
NPI: 1780685032
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No

Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619)
515-2545
Website: www.fhcsd.org

Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-TH 8AM-9PM, F
8AM-5PM, SA 9AM-5PM

VAN DYKE, JASON P

Provider ID: 206353
Provider Gender: Male
License number: PT25155
NPI: 1487658720
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619)
515-2400
Website: www.fhcsd.org

Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No

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C. Directorio de proveedores de atención primaria

♻️ *Accessibility:* ME
Hours: M-SA 9AM-5PM

RHEUMATOLOGY

HUYNH, DOQUYEN H

Provider ID: 417937
Provider Gender: Female
License number: A110198
NPI: 1619135241
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ♻️ *Accessibility:*
Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM

OGANDO, SHEENA M

Provider ID: 206363
Provider Gender: Female
License number: A142743
NPI: 1649564295
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No

Hospital Affiliation: John Muir Medical Center Walnut Creek Campus
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2560
Fax:
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ♻️ *Accessibility:* ME
Hours: M-SA 9AM-5PM

REDDY, DANA A

Provider ID: 206363
Provider Gender: Female
License number: A115598
NPI: 1144538778
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital, Sharp Memorial Hospital, Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2560
Fax:
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org

Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ♻️ *Accessibility:* ME
Hours: M-SA 9AM-5PM

REDDY, DANA A

Provider ID: 403583
Provider Gender: Female
License number: A115598
NPI: 1144538778
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital, Sharp Memorial Hospital, Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas
Board Certified Specialty: No
 IHP-ST VINCENT DE PAUL VILLA
 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101-7638
Phone: (619) 233-8500
Fax:
After Hours Phone: (619) 233-8500
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ♻️ *Accessibility:*
Hours: M-F 8AM-5:30PM, SA 9AM-5PM

SPEECH PATHOLOGIST

MANCILLAS, ANYA K

Provider ID: 206360

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C. Directorio de proveedores de atención primaria

Provider Gender: Female
License number: SP31261
NPI: 1528698057
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: ME
Hours: M-SA 9AM-5PM

WILLIAMS, JESSICA D

Provider ID: 206360
Provider Gender: Female
License number: SP27677
NPI: 1932680006
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org

Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: ME
Hours: M-SA 9AM-5PM

SAN MARCOS

CHIROPRACTOR

LOVERN, JENNIFER K

Provider ID: 206426
Provider Gender: Female
License number: DC29074
NPI: 1235469396
Provider English Spoken: Yes
Provider Language(s) Spoken: Italian
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-NORTH COUNTY HEALTH SERVICES
150 VALPRED A RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767
Fax:
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T, W
Hours: M-SA 8AM-5PM

FAMILY PRACTICE

MATIAS, JULIE M

Provider ID: 206426

Provider Gender: Female
License number: 20A15159
NPI: 1083094510
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-NORTH COUNTY HEALTH SERVICES
150 VALPRED A RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767
Fax:
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T, W
Hours: M-SA 8AM-5PM

NATH, DEVARSHI

Provider ID: 206426
Provider Gender: Male
License number: C54157
NPI: 1275630618
Provider English Spoken: Yes
Provider Language(s) Spoken: Bengali
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-NORTH COUNTY HEALTH SERVICES
150 VALPRED A RD
SAN MARCOS, CA 92069-2973

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Phone: (760) 736-6767
 Fax:
 After Hours Phone: (760)
 736-6767
 Website: www.ihpsocal.org

Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: P, EB, IB, E, R,
 T, W
 Hours: M-SA 8AM-5PM

SAFI, ROOZCHEHR

Provider ID: 206426
 Provider Gender: Female
 License number: A116562
 NPI: 1659563641
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Farsi
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-NORTH COUNTY HEALTH
 SERVICES

150 VALPRED RD
 SAN MARCOS, CA 92069-2973
 Phone: (760) 736-6767
 Fax:

After Hours Phone: (760)
 736-6767
 Website: www.ihpsocal.org
 Email:

Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: P, EB, IB, E, R,
 T, W
 Hours: M-SA 8AM-5PM

WALKER, SHAYNA T

Provider ID: 206426

Provider Gender: Female
 License number: A107393
 NPI: 1760688295
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps
 Memorial Hospital Encinitas
 Board Certified Specialty: No
 IHP-NORTH COUNTY HEALTH
 SERVICES
 150 VALPRED RD
 SAN MARCOS, CA 92069-2973
 Phone: (760) 736-6767

Fax:
 After Hours Phone: (760)
 736-6767
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: P, EB, IB, E, R,
 T, W
 Hours: M-SA 8AM-5PM

WILLIE, KADEN G

Provider ID: 206426
 Provider Gender: Male
 License number: 20A17306
 NPI: 1790133767
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Portuguese
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-NORTH COUNTY HEALTH
 SERVICES
 150 VALPRED RD
 SAN MARCOS, CA 92069-2973

Phone: (760) 736-6767
 Fax:
 After Hours Phone: (760)
 736-6767
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: P, EB, IB, E, R,
 T, W
 Hours: M-SA 8AM-5PM

FQHC

NORTH COUNTY HEALTH SERVICES SAN MARCOS,

Provider ID: 206426
 Provider Gender:
 License number:
 NPI: 1245246917
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty:
 IHP-NORTH COUNTY HEALTH
 SERVICES
 150 VALPRED RD
 SAN MARCOS, CA 92069-2973
 Phone: (760) 736-6767
 Fax: (760) 736-8740
 After Hours Phone: (760)
 736-6767
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: P, EB, IB, E, R,
 T, W
 Hours: M-SA 8AM-5PM

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C. Directorio de proveedores de atención primaria

GENERAL PRACTICE	SERVICES	<i>Hours: M-SA 8AM-5PM</i>
<p>MONTEMAYOR, MANUEL H <i>Provider ID: 206426</i> <i>Provider Gender: Male</i> <i>License number: A51037</i> <i>NPI: 1609918978</i> <i>Provider English Spoken: Yes</i> <i>Provider Language(s) Spoken: Polish</i> <i>Cultural Competency: No</i> <i>Hospital Affiliation: Scripps Memorial Hospital Encinitas</i> <i>Board Certified Specialty: No</i> IHP-NORTH COUNTY HEALTH SERVICES 150 VALPRED A RD SAN MARCOS, CA 92069-2973 <i>Phone: (760) 736-6767</i> <i>Fax: 736-6767</i> <i>After Hours Phone: (760) 736-6767</i> <i>Website: www.ihpsocal.org</i> <i>Email:</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: None</i> <i>American Sign Language (ASL): No</i> ♿ <i>Accessibility: P, EB, IB, E, R, T, W</i> <i>Hours: M-SA 8AM-5PM</i></p>	<p>PONIACHIK, SAMUEL I <i>Provider ID: 206426</i> <i>Provider Gender: Male</i> <i>License number: G74757</i> <i>NPI: 1467485078</i> <i>Provider English Spoken: Yes</i> <i>Provider Language(s) Spoken: Spanish</i> <i>Cultural Competency: No</i> <i>Hospital Affiliation: Palomar Health Downtown Campus</i> <i>Board Certified Specialty: No</i> IHP-NORTH COUNTY HEALTH SERVICES 150 VALPRED A RD SAN MARCOS, CA 92069-2973 <i>Phone: (760) 736-6767</i> <i>Fax: 736-6767</i> <i>After Hours Phone: (760) 736-6767</i> <i>Website: www.ihpsocal.org</i> <i>Email:</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: None</i> <i>American Sign Language (ASL): No</i> ♿ <i>Accessibility: P, EB, IB, E, R, T, W</i> <i>Hours: M-SA 8AM-5PM</i></p>	<p>WITCZAK, IZABELA <i>Provider ID: 206426</i> <i>Provider Gender: Female</i> <i>License number: A71311</i> <i>NPI: 1184735201</i> <i>Provider English Spoken: Yes</i> <i>Provider Language(s) Spoken: Polish</i> <i>Cultural Competency: No</i> <i>Hospital Affiliation: Scripps Memorial Hospital Encinitas</i> <i>Board Certified Specialty: No</i> IHP-NORTH COUNTY HEALTH SERVICES 150 VALPRED A RD SAN MARCOS, CA 92069-2973 <i>Phone: (760) 736-6767</i> <i>Fax: 736-6767</i> <i>After Hours Phone: (760) 736-6767</i> <i>Website: www.ihpsocal.org</i> <i>Email:</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: None</i> <i>American Sign Language (ASL): No</i> ♿ <i>Accessibility: P, EB, IB, E, R, T, W</i> <i>Hours: M-SA 8AM-5PM</i></p>
INTERNAL MEDICINE		OBSTETRICS / GYNECOLOGY
<p>JEFFERIS, LAUREN R <i>Provider ID: 206426</i> <i>Provider Gender: Female</i> <i>License number: A80674</i> <i>NPI: 1346354776</i> <i>Provider English Spoken: Yes</i> <i>Provider Language(s) Spoken:</i> <i>Cultural Competency: No</i> <i>Hospital Affiliation:</i> <i>Board Certified Specialty: No</i> IHP-NORTH COUNTY HEALTH</p>	<p><i>After Hours Phone: (760) 736-6767</i> <i>Website: www.ihpsocal.org</i> <i>Email:</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: None</i> <i>American Sign Language (ASL): No</i> ♿ <i>Accessibility: P, EB, IB, E, R, T, W</i></p>	<p>CAMPBELL, LETICIA J <i>Provider ID: 206426</i> <i>Provider Gender: Female</i> <i>License number: A131042</i> <i>NPI: 1508124868</i> <i>Provider English Spoken: Yes</i> <i>Provider Language(s) Spoken: Spanish, Tagalog</i> <i>Cultural Competency: No</i> <i>Hospital Affiliation: Tri City Medical Ctr, Palomar Medical</i></p>

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C. Directorio de proveedores de atención primaria

Center
Board Certified Specialty: No
 IHP-NORTH COUNTY HEALTH SERVICES
 150 VALPRED A RD
 SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767
Fax:
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:* P, EB, IB, E, R, T, W
Hours: M-SA 8AM-5PM

LABBAD, GABRIEL E

Provider ID: 206426
Provider Gender: Male
License number: A169121
NPI: 1952664401
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-NORTH COUNTY HEALTH SERVICES
 150 VALPRED A RD
 SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767
Fax:
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:* P, EB, IB, E, R,

T, W
Hours: M-SA 8AM-5PM
MAZAREI, RAHELE
Provider ID: 206426
Provider Gender: Female
License number: 20A7358
NPI: 1639170459
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Sharp Memorial Hospital
Board Certified Specialty: No
 IHP-NORTH COUNTY HEALTH SERVICES
 150 VALPRED A RD
 SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767
Fax: (760) 758-7057
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:* P, EB, IB, E, R, T, W
Hours: M-SA 8AM-5PM

MOSTOFIAN, EIMANEH

Provider ID: 206426
Provider Gender: Female
License number: A97181
NPI: 1154477628
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr

Board Certified Specialty: No
 IHP-NORTH COUNTY HEALTH SERVICES
 150 VALPRED A RD
 SAN MARCOS, CA 92069-2973
Phone: (760) 736-6700
Fax: (760) 753-7259
After Hours Phone: (760) 736-6700
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:* P, EB, IB, E, R, T, W
Hours: M-SA 8AM-5PM

POUNTNEY, MARLENE E

Provider ID: 206426
Provider Gender: Female
License number: A93248
NPI: 1174703680
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr
Board Certified Specialty: No
 IHP-NORTH COUNTY HEALTH SERVICES
 150 VALPRED A RD
 SAN MARCOS, CA 92069-2973
Phone: (760) 736-6700
Fax:
After Hours Phone: (760) 736-6700
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No

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C. Directorio de proveedores de atención primaria

♿ *Accessibility:* P, EB, IB, E, R, T, W
Hours: M-SA 8AM-5PM

SCHWEIKERT, SUZANNE M

Provider ID: 206426
Provider Gender: Female
License number: A60958
NPI: 1477560142
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Tri City Medical Ctr, Sharp Mary Birch Hosp For Women And Newborns
Board Certified Specialty: No
IHP-NORTH COUNTY HEALTH SERVICES

150 VALPRED A RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6700

Fax:
After Hours Phone: (760) 736-6700

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* P, EB, IB, E, R, T, W

Hours: M-SA 8AM-5PM

PEDIATRICS

AUSTIN, DAVID A

Provider ID: 206426
Provider Gender: Male
License number: A92271
NPI: 1265434096
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-NORTH COUNTY HEALTH SERVICES

150 VALPRED A RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767

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

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* P, EB, IB, E, R, T, W

Hours: M-SA 8AM-5PM

FISHER, ROSS

Provider ID: 491595
Provider Gender: Male
License number: G68525
NPI: 1992818728
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

150 VALPRED A RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767

Fax: (760) 736-6797
After Hours Phone: (760) 736-6767

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM

MALHOTRA, ARATI

Provider ID: 206426
Provider Gender: Female
License number: A63903
NPI: 1215135306
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Spanish
Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus, Tri City Medical Ctr, Palomar Medical Center
Board Certified Specialty: No
IHP-NORTH COUNTY HEALTH SERVICES

150 VALPRED A RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767

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

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ *Accessibility:* P, EB, IB, E, R, T, W

Hours: M-SA 8AM-5PM

MONAHAN, CAROLYN O

Provider ID: 50425
Provider Gender: Female
License number: G26892
NPI: 1619973666
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Palomar

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C. Directorio de proveedores de atención primaria

Health Downtown Campus,
Palomar Medical Center
Board Certified Specialty: Yes
RADY CHILDRENS HEALTH
NETWORK
1582 W SAN MARCOS BLVD
STE 203
SAN MARCOS, CA 92078-4081
Phone: (760) 744-6710
Fax: (760) 744-6156
After Hours Phone: (760)
744-6710
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM

POSADAS, EMERITO D

Provider ID: 206426
Provider Gender: Male
License number: A48980
NPI: 1720093198
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Palomar
Health Downtown Campus, Tri
City Medical Ctr, Palomar
Medical Center
Board Certified Specialty: No
IHP-NORTH COUNTY HEALTH
SERVICES
150 VALPRED A RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767
Fax:
After Hours Phone: (760)
736-6767
Website: www.ihpsocal.org
Email:

Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: P, EB, IB, E, R,
T, W
Hours: M-SA 8AM-5PM

QUINTERO, CAROLYN S

Provider ID: 206426
Provider Gender: Female
License number: G77053
NPI: 1023033156
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-NORTH COUNTY HEALTH
SERVICES
150 VALPRED A RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767

Fax:
After Hours Phone: (760)
736-6767
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: P, EB, IB, E, R,
T, W
Hours: M-SA 8AM-5PM

ROSENFELD, GINA

Provider ID: 36393
Provider Gender: Female
License number: G76842
NPI: 1235135286
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish

Cultural Competency: No
Hospital Affiliation: Palomar
Health Downtown Campus,
Palomar Medical Center, Rady
Childrens Hospital San Diego
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
1582 W SAN MARCOS BLVD
STE 203
SAN MARCOS, CA 92078-4081
Phone: (760) 744-6710
Fax: (760) 744-6156
After Hours Phone: (760)
744-6710
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM

SEBIANE, MARIA G

Provider ID: 206426
Provider Gender: Female
License number: G71182
NPI: 1740295229
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Palomar
Health Downtown Campus, Rady
Childrens Hospital San Diego,
Palomar Medical Center
Board Certified Specialty: No
IHP-NORTH COUNTY HEALTH
SERVICES
150 VALPRED A RD
SAN MARCOS, CA 92069-2973

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C. Directorio de proveedores de atención primaria

Phone: (760) 736-6767

Fax:

After Hours Phone: (760)
736-6767

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,
T, W

Hours: M-SA 8AM-5PM

SOCHA, TRACI E

Provider ID: 428861

Provider Gender: Female

License number: 20A7862

NPI: 1669478616

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Palomar

Health Downtown Campus,

Palomar Medical Center, Rady

Childrens Hospital San Diego

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

1582 W SAN MARCOS BLVD
STE 203

SAN MARCOS, CA 92078-4081

Phone: (760) 744-6710

Fax: (760) 744-6156

After Hours Phone: (760)

744-6710

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

ZACHRY, ALISON D

Provider ID: 206426

Provider Gender: Female

License number: A131678

NPI: 1922402858

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego, Tri

City Medical Ctr

Board Certified Specialty: No

IHP-NORTH COUNTY HEALTH
SERVICES

150 VALPRED A RD

SAN MARCOS, CA 92069-2973

Phone: (760) 736-6767

Fax:

After Hours Phone: (760)

736-6767

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, R,
T, W

Hours: M-SA 8AM-5PM

SAN YSIDRO

CARDIOVASCULAR DISEASE

PONCE, SONIA G

Provider ID: 206292

Provider Gender: Female

License number: A145008

NPI: 1164659033

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Sharp Chula

Vista Med Ctr, Scripps Mercy

Hospital Chula Vista, Scripps

Mercy Hospital

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH

CENTER

4004 BEYER BLVD

SAN YSIDRO, CA 92173-2007

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

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

8:30AM-2PM

CERTIFIED NURSE

PRACTITIONER

CELIZ, ADRIANA G

Provider ID: 227469

Provider Gender: Female

License number: NP95004315

NPI: 1972956514

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH

CENTER

3364 BEYER BLVD

SAN YSIDRO, CA 92173-1322

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM

CHING, LEYDA B

Provider ID: 227469
Provider Gender: Female
License number: NP20123
NPI: 1508098294
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER
3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
Phone: (619) 600-4867
Fax:
After Hours Phone: (619)
600-4867
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM

GARCIA, TEDAYSHIA P

Provider ID: 206292
Provider Gender: Female

License number: NP95003355
NPI: 1659730778
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER
4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-F 8AM-5:30PM, SA
8:30AM-2PM

GUADARRAMA, IGNACIO

Provider ID: 227469
Provider Gender: Male
License number: NP95003671
NPI: 1821331174
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER
3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
662-4100

Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM

IBARRA, MARTHA A

Provider ID: 206292
Provider Gender: Female
License number: NP12112
NPI: 1114957289
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER
4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-F 8AM-5:30PM, SA
8:30AM-2PM

IBARRA, MARTHA A

Provider ID: 227469
Provider Gender: Female
License number: NP12112
NPI: 1114957289
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 3364 BEYER BLVD
 SAN YSIDRO, CA 92173-1322
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM

RIVERA BELTRAN, HERIBERTO

Provider ID: 206292
Provider Gender: Male
License number: 95011671
NPI: 1558855734
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 428-4463
Fax:
After Hours Phone: (619) 428-4463
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):

No
 ☯ *Accessibility:*
Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM

SANCHEZ, MYRNA A

Provider ID: 227469
Provider Gender: Female
License number: NP95003721
NPI: 1548614506
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 3364 BEYER BLVD
 SAN YSIDRO, CA 92173-1322
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM

VAZQUEZ-ERLBECK, MARTHA

Provider ID: 227469
Provider Gender: Female
License number: NP95001960
NPI: 1669865960
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER

3364 BEYER BLVD
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Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM

CHIROPRACTOR

KELCHNER, MATTHEW O

Provider ID: 206292
Provider Gender: Male
License number: DC22733
NPI: 1174656755
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM

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C. Directorio de proveedores de atención primaria

OCHOA, RAUL O

Provider ID: 206292
Provider Gender: Male
License number: DC33693
NPI: 1518401827
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM

FAMILY PRACTICE

ALGHAMDI, ASMA M

Provider ID: 227469
Provider Gender: Female
License number: A167529
NPI: 1316310840
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 3364 BEYER BLVD

SAN YSIDRO, CA 92173-1322
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM

ALVAREZ-ESTRADA, MIGUEL

Provider ID: 206292
Provider Gender: Male
License number: A157505
NPI: 1588197826
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
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After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM

ALVAREZ-ESTRADA, MIGUEL

Provider ID: 227411

Provider Gender: Male
License number: A157505
NPI: 1588197826
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 205-1967
Fax:
After Hours Phone: (619) 205-1967
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8:30AM-5PM, SA 9AM-5PM

BAUM, PETER M

Provider ID: 206292
Provider Gender: Male
License number: 20A14949
NPI: 1174919971
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 428-4463
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After Hours Phone: (619) 428-4463

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C. Directorio de proveedores de atención primaria

Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-F 8AM-5:30PM, SA
 8:30AM-2PM

CARRIEDO CENICEROS, MARIA T

Provider ID: 206292
 Provider Gender: Female
 License number: A78373
 NPI: 1295746618
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER

4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
 Phone: (619) 662-4100
 Fax: (619) 205-6341
 After Hours Phone: (619)
 662-4100
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-F 8AM-5:30PM, SA
 8:30AM-2PM

CASTILLO, STEPHANIE

Provider ID: 206292
 Provider Gender: Female
 License number: A159673
 NPI: 1902330723

Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 4004 BEYER BLVD
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 Phone: (619) 662-4100
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 After Hours Phone: (619)
 662-4100
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-F 8AM-5:30PM, SA
 8:30AM-2PM

CEVALLOS, JAMES E

Provider ID: 206292
 Provider Gender: Male
 License number: A55469
 NPI: 1720181829
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy
 Hospital Chula Vista
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER

4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
 Phone: (619) 662-4100
 Fax: (619) 205-6341
 After Hours Phone: (619)
 662-4100
 Website: www.ihpsocal.org
 Email:

Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-F 8AM-5:30PM, SA
 8:30AM-2PM

CORONADO, MYRNA L

Provider ID: 206292
 Provider Gender: Female
 License number: A112627
 NPI: 1710147566
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER

4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
 Phone: (619) 428-4463
 Fax:
 After Hours Phone: (619)
 428-4463
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-F 8AM-5:30PM, SA
 8:30AM-2PM

CORONADO, MYRNA L

Provider ID: 227411
 Provider Gender: Female
 License number: A112627
 NPI: 1710147566
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish

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C. Directorio de proveedores de atención primaria

Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-F 8:30AM-5PM, SA 9AM-5PM

FELLMAN, ANNA T

Provider ID: 206292
Provider Gender: Female
License number: A138371
NPI: 1730590290
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Kaweah Delta District Hosp
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):

No
 ☯ *Accessibility:*
Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM
HEINRICI, ALEKA D
Provider ID: 206292
Provider Gender: Female
License number: A125329
NPI: 1780979120
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: John Muir Medical Center Walnut Creek Campus
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM

HENDRIX, JEFFERSON C

Provider ID: 227469
Provider Gender: Male
License number: A32571
NPI: 1235142738
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No

Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 3364 BEYER BLVD
 SAN YSIDRO, CA 92173-1322
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM

HERNANDEZ, RALPH C

Provider ID: 206292
Provider Gender: Male
License number: C42207
NPI: 1285782151
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No

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C. Directorio de proveedores de atención primaria

♿ *Accessibility:*

Hours: M-F 8AM-5:30PM, SA
8:30AM-2PM

HERNANDEZ, RALPH C

Provider ID: 227469

Provider Gender: Male

License number: C42207

NPI: 1285782151

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH
CENTER

3364 BEYER BLVD

SAN YSIDRO, CA 92173-1322

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

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

9AM-5PM

LARA, LESLEY

Provider ID: 206292

Provider Gender: Female

License number: A173435

NPI: 1184112682

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH
CENTER

4004 BEYER BLVD

SAN YSIDRO, CA 92173-2007

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:*

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

8:30AM-2PM

LEE, JOSEPH Y

Provider ID: 206292

Provider Gender: Male

License number: A164201

NPI: 1417480948

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: St Elizabeth

Hosp

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH

CENTER

4004 BEYER BLVD

SAN YSIDRO, CA 92173-2007

Phone: (619) 662-4100

Fax: (619) 205-6341

After Hours Phone: (619)

662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:*

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

8:30AM-2PM

LEE, JOSEPH Y

Provider ID: 227469

Provider Gender: Male

License number: A164201

NPI: 1417480948

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: St Elizabeth

Hosp

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH
CENTER

3364 BEYER BLVD

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Phone: (619) 662-4100

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After Hours Phone: (619)

662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

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

9AM-5PM

LEPEZ, DAVID

Provider ID: 206292

Provider Gender: Male

License number: A130348

NPI: 1205196029

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital Chula Vista

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH

CENTER

4004 BEYER BLVD

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C. Directorio de proveedores de atención primaria

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After Hours Phone: (619)

662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

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

8:30AM-2PM

NAVARRO, VANESSA M

Provider ID: 227469

Provider Gender: Female

License number: A113624

NPI: 1952563421

Provider English Spoken: Yes

Provider Language(s) Spoken:

Tagalog

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital Chula Vista

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH

CENTER

3364 BEYER BLVD

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662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

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

9AM-5PM

NIKZAD, JASON

Provider ID: 206292

Provider Gender: Male

License number: 20A12653

NPI: 1508121674

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi, Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH

CENTER

4004 BEYER BLVD

SAN YSIDRO, CA 92173-2007

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Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

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

8:30AM-2PM

RAJAIPOUR, NEGIN

Provider ID: 227469

Provider Gender: Female

License number: A145480

NPI: 1508286709

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH

CENTER

3364 BEYER BLVD

SAN YSIDRO, CA 92173-1322

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After Hours Phone: (619)

662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

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

9AM-5PM

SALEM, RAMSEY A

Provider ID: 206292

Provider Gender: Male

License number: A158364

NPI: 1245401298

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH

CENTER

4004 BEYER BLVD

SAN YSIDRO, CA 92173-2007

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

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

8:30AM-2PM

SNYDER, CHRISTOPHER L

Provider ID: 206292

Provider Gender: Male

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C. Directorio de proveedores de atención primaria

License number: 20A7502
 NPI: 1922041235
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Pih Hospital -
 Downey, John F Kennedy
 Memorial Hosp, Cedars Sinai
 Medical Center
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER

4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
 Phone: (619) 662-4100

Fax:
 After Hours Phone: (619)
 662-4100
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-F 8AM-5:30PM, SA
 8:30AM-2PM

TALAVERA, GREGORY A

Provider ID: 206292
 Provider Gender: Male
 License number: A40061
 NPI: 1740337161
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007

Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619)
 662-4100
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-F 8AM-5:30PM, SA
 8:30AM-2PM

TREJO, RAUL

Provider ID: 206292
 Provider Gender: Male
 License number: A77936
 NPI: 1174534184
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy
 Hospital Chula Vista
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007

Phone: (619) 662-4100
 Fax:

After Hours Phone: (619)
 662-4100
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-F 8AM-5:30PM, SA
 8:30AM-2PM

VELASQUEZ, SHARON F

Provider ID: 206292
 Provider Gender: Female
 License number: A71304
 NPI: 1972732584
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy
 Hospital Chula Vista
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
 Phone: (619) 662-4100

Fax:
 After Hours Phone: (619)
 662-4100
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-F 8AM-5:30PM, SA
 8:30AM-2PM

FQHC

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR,

Provider ID: 227411
 Provider Gender:
 License number:
 NPI: 1952364747
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty:
 IHP-SAN YSIDRO HEALTH
 CENTER

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

4050 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619)
662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8:30AM-5PM, SA
9AM-5PM

**SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER,**
Provider ID: 206292
Provider Gender:
License number:
NPI: 1952364747
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
IHP-SAN YSIDRO HEALTH
CENTER
4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619)
662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-F 8AM-5:30PM, SA
8:30AM-2PM

**SAN YSIDRO HLTH SAN
DIEGO PACE SENIOR HLTH
SVS,**
Provider ID: 227469
Provider Gender:
License number:
NPI:
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
IHP-SAN YSIDRO HEALTH
CENTER
3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
Phone: (619) 662-4100
Fax: (619) 600-4870
After Hours Phone: (619)
662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM

GENERAL PRACTICE

TEJEDA, FRANCISCO J
Provider ID: 206292
Provider Gender: Male
License number: A66885
NPI: 1407940075
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER

4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-F 8AM-5:30PM, SA
8:30AM-2PM

GYNECOLOGY

CALDERON, JORGE A
Provider ID: 206292
Provider Gender: Male
License number: A40480
NPI: 1407800881
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista, Paradise Valley
Hospital, Lompoc Valley Medical
Center
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER
4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None

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C. Directorio de proveedores de atención primaria

American Sign Language (ASL): No
Accessibility:
Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM

INFECTIOUS DISEASE

PARK, DANIEL

Provider ID: 206292
Provider Gender: Male
License number: A99433
NPI: 1538371844
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM

INTERNAL MEDICINE GERIATRIC MEDICINE

CHAU, DIANE L

Provider ID: 206292
Provider Gender: Female
License number: A65089
NPI: 1780609834

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: (619) 428-4463
Fax:
After Hours Phone: (619) 428-4463
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM

CHAU, DIANE L

Provider ID: 227469
Provider Gender: Female
License number: A65089
NPI: 1780609834
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None

American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM

INTERNAL MEDICINE

ALDOUS, JEANNETTE L

Provider ID: 206292
Provider Gender: Female
License number: A101017
NPI: 1073650339
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus, Ucsd Medical Ctr, Pomerado Hospital, Palomar Medical Center
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM

CARPENTER, ROBERT J

Provider ID: 206292
Provider Gender: Male
License number: 20A10964
NPI: 1356343040

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C. Directorio de proveedores de atención primaria

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM

CHEN, TSUH YIN

Provider ID: 206292
Provider Gender: Female
License number: C55563
NPI: 1093803520
Provider English Spoken: Yes
Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax: (619) 205-6341
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org

Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM

CHOW, MAN HUNG J

Provider ID: 227469
Provider Gender: Female
License number: G66745
NPI: 1225149115
Provider English Spoken: Yes
Provider Language(s) Spoken: Chinese, Mandarin
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Scripps Mercy Hospital
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM

DE LA ROSA, JOSE B

Provider ID: 206292

Provider Gender: Male
License number: A49267
NPI: 1689646572
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM

DIAZ-GONZALEZ, VICENTE

Provider ID: 206292
Provider Gender: Male
License number: A84160
NPI: 1790745776
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100

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C. Directorio de proveedores de atención primaria

Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-F 8AM-5:30PM, SA
 8:30AM-2PM

DILLON, BENEDICT S

Provider ID: 227411
 Provider Gender: Male
 License number: A111118
 NPI: 1710142708
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps
 Memorial Hospital, Scripps
 Mercy Hospital, Scripps Mercy
 Hospital Chula Vista
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER

4050 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619)
 662-4100
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: W
 Hours: M-F 8:30AM-5PM, SA
 9AM-5PM

POAST, JENNIFER L

Provider ID: 206292
 Provider Gender: Female

License number: 20A8245
 NPI: 1164435681
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
 Phone: (619) 428-4463
 Fax:
 After Hours Phone: (619)
 428-4463
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-F 8AM-5:30PM, SA
 8:30AM-2PM

SALERNO, MARIANA V

Provider ID: 206292
 Provider Gender: Female
 License number: A131021
 NPI: 1598921645
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Providence
 St. Joseph Hospital Eureka
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619)
 662-4100
 Website: www.ihpsocal.org

Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-F 8AM-5:30PM, SA
 8:30AM-2PM

SCHNEIDER-MUNOZ, MARGARITA P

Provider ID: 206292
 Provider Gender: Female
 License number: G81461
 NPI: 1821299520
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER

4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619)
 662-4100
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-F 8AM-5:30PM, SA
 8:30AM-2PM

SHEIKH MOHAMED, AMIRA A

Provider ID: 227469
 Provider Gender: Female
 License number: A153975
 NPI: 1831583079
 Provider English Spoken: Yes

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C. Directorio de proveedores de atención primaria

Provider Language(s) Spoken: Arabic, Hindi, Urdu
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Ⓜ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM

SY, RAMON S

Provider ID: 227469
Provider Gender: Male
License number: A51843
NPI: 1982617403
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Paradise Valley Hospital
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Ⓜ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM

VELAZQUEZ CAMARENA, MARIA D

Provider ID: 206292
Provider Gender: Female
License number: A56153
NPI: 1518965714
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Ⓜ *Accessibility:*
Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM

WEN, AKI YEN CHANG

Provider ID: 227411
Provider Gender: Male
License number: 20A12555
NPI: 1205126505
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
4050 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Ⓜ *Accessibility:* W
Hours: M-F 8:30AM-5PM, SA 9AM-5PM

INTERVENTIONAL **CARDIOLOGY**

MOUSSAVIAN, MEHRAN

Provider ID: 206292
Provider Gender: Male
License number: 20A7241
NPI: 1689788234
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Tri City Medical Ctr, Sharp Memorial Hospital, Alvarado Hospital Llc, Grossmont

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C. Directorio de proveedores de atención primaria

Hospital
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax: (619) 205-6341
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM

OBSTETRICS / GYNECOLOGY

BERGGREN, ERICA K
Provider ID: 227411
Provider Gender: Female
License number: C158543
NPI: 1912159674
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Sharp Mary Birch Hosp For Women And Newborns, Scripps Memorial Hospital, Scripps Green Hospital, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
4050 BEYER BLVD
SAN YSIDRO, CA 92173-2007

Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8:30AM-5PM, SA 9AM-5PM

CARR, MIANDA C
Provider ID: 206292
Provider Gender: Female
License number: A104660
NPI: 1083815823
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: St Josephs Med Center Of Stockton, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM

CARSON, LATISA S
Provider ID: 206292
Provider Gender: Female
License number: A72235
NPI: 1245229129
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM

DANESHMAND, SHAHRAM S
Provider ID: 227411
Provider Gender: Male
License number: A63844
NPI: 1891867412
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Grossmont Hospital, Sharp Memorial Hospital, Scripps Memorial Hospital Encinitas,

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Scripps Memorial Hospital, Tri City Medical Ctr, Sharp Mary Birch Hosp For Women And Newborns, Scripps Green Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
4050 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax: (619) 205-1948
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8:30AM-5PM, SA 9AM-5PM

DINH, MY T

Provider ID: 206292
Provider Gender: Female
License number: 20A9907
NPI: 1316146996
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org

Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM

DOLINSKY, BRAD M

Provider ID: 227411
Provider Gender: Male
License number: C149818
NPI: 1942480199
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Green Hospital, Scripps Mercy Hospital, Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas, Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER

4050 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8:30AM-5PM, SA 9AM-5PM

FAKSH, ARIJ

Provider ID: 227411
Provider Gender: Female

License number: 20A14222
NPI: 1912166737
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Tri City Medical Ctr, Scripps Mercy Hospital, Scripps Green Hospital, Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
4050 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8:30AM-5PM, SA 9AM-5PM

GOLDSTEIN, EDWARD M

Provider ID: 227411
Provider Gender: Male
License number: G20087
NPI: 1982617494
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Memorial Hospital, Scripps
 Mercy Hospital
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax: (619) 205-1948
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-F 8:30AM-5PM, SA 9AM-5PM

JENKINS, ENCHANTA L
Provider ID: 227411
Provider Gender: Female
License number: C143625
NPI: 1285604702
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):

No
 ☯ *Accessibility:* W
Hours: M-F 8:30AM-5PM, SA 9AM-5PM

JIBRIL, DEANAH A
Provider ID: 206292
Provider Gender: Female
License number: 20A17489
NPI: 1134183114
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Spanish
Cultural Competency: No
Hospital Affiliation: University Of California Irvine Med Ctr, Riverside Community Hosp
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM

LAI, JASMINE
Provider ID: 206292
Provider Gender: Female
License number: A113482
NPI: 1265661177
Provider English Spoken: Yes
Provider Language(s) Spoken: Mandarin
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Scripps Mercy Hospital, Scripps Memorial Hospital Encinitas, Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER

LAI, JASMINE
Provider ID: 227411
Provider Gender: Female
License number: A113482
NPI: 1265661177
Provider English Spoken: Yes
Provider Language(s) Spoken: Mandarin
Cultural Competency: No

Hospital Affiliation: Sharp Memorial Hospital, Scripps Mercy Hospital, Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas, Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM

LAI, JASMINE
Provider ID: 227411
Provider Gender: Female
License number: A113482
NPI: 1265661177
Provider English Spoken: Yes
Provider Language(s) Spoken: Mandarin
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas, Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER

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C. Directorio de proveedores de atención primaria

4050 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100

Fax:

After Hours Phone: (619)
662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-F 8:30AM-5PM, SA
9AM-5PM

MAJERSKI GONZALEZ, MANDY M

Provider ID: 206292

Provider Gender: Female

License number: A113914

NPI: 1982812392

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista

Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER

4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)
662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

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

8:30AM-2PM

MAJERSKI GONZALEZ, MANDY M

Provider ID: 227411

Provider Gender: Female

License number: A113914

NPI: 1982812392

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista

Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER

4050 BEYER BLVD
SAN YSIDRO, CA 92173-2007

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)
662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-F 8:30AM-5PM, SA
9AM-5PM

MENDEZ, DIEGO

Provider ID: 227411

Provider Gender: Male

License number: A47906

NPI: 1437181922

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Mercy
General Hospital, Scripps Mercy
Hospital Chula Vista, Bakersfield

Memorial Hosp, Sharp Memorial
Hospital, San Joaquin Comm
Hosp, Scripps Mercy Hospital
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER

4050 BEYER BLVD
SAN YSIDRO, CA 92173-2007

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)
662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-F 8:30AM-5PM, SA
9AM-5PM

SEFA-BOAKYE, KOFI D

Provider ID: 206292

Provider Gender: Male

License number: G59670

NPI: 1902993660

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Chula
Vista Med Ctr, Sharp Coronado
Hosp And Healthcare Ctr,
Scripps Mercy Hospital Chula
Vista

Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER

4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)
662-4100

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-F 8AM-5:30PM, SA
 8:30AM-2PM

SHORT, ABIADÉ C

Provider ID: 206292
 Provider Gender: Male
 License number: A114893
 NPI: 1750559589
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Paradise
 Valley Hospital, Sharp Chula
 Vista Med Ctr, Scripps Mercy
 Hospital Chula Vista, Scripps
 Mercy Hospital
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619)
 662-4100

Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-F 8AM-5:30PM, SA
 8:30AM-2PM

STARIKOV, ROMAN S

Provider ID: 227411

Provider Gender: Male
 License number: C160626
 NPI: 1396966537
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy
 Hospital, Scripps Memorial
 Hospital, Scripps Memorial
 Hospital Encinitas, Scripps Mercy
 Hospital Chula Vista
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619)
 662-4100
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: W
 Hours: M-F 8:30AM-5PM, SA
 9AM-5PM

OPHTHALMOLOGY

JARDON, JAVIER A

Provider ID: 227469
 Provider Gender: Male
 License number: A131365
 NPI: 1609171982
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Farsi, Spanish
 Cultural Competency: No
 Hospital Affiliation: California
 Hosp Med Ctr Los Angeles
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH

CENTER
 3364 BEYER BLVD
 SAN YSIDRO, CA 92173-1322
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619)
 662-4100
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: W
 Hours: M-F 8AM-5PM, SA
 9AM-5PM

MANI, NASRIN

Provider ID: 227469
 Provider Gender: Female
 License number: A40473
 NPI: 1023061314
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Arabic, Faroese, Farsi, Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps
 Memorial Hospital, Sharp
 Memorial Hospital, Ucsd Medical
 Ctr
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 3364 BEYER BLVD
 SAN YSIDRO, CA 92173-1322
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619)
 662-4100
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
 9AM-5PM

SKAF, AYHAM R

Provider ID: 227469
Provider Gender: Male
License number: A120584
NPI: 1285888628
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Arabic, Spanish
Cultural Competency: No
Hospital Affiliation: El Centro
 Regional Medical Center, Sharp
 Memorial Hospital, Scripps
 Memorial Hospital
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER

3364 BEYER BLVD
 SAN YSIDRO, CA 92173-1322
Phone: (619) 662-4100

Fax:
After Hours Phone: (619)
 662-4100

Website: www.ihpsocal.org

Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No

♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
 9AM-5PM

PEDIATRICS

ACEVEDO, SUSANA

Provider ID: 227411
Provider Gender: Female
License number: A74960
NPI: 1801971569
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100

Fax:
After Hours Phone: (619)
 662-4100

Website: www.ihpsocal.org

Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No

♿ *Accessibility:* W
Hours: M-F 8:30AM-5PM, SA
 9AM-5PM

ACEVEDO, SUSANA

Provider ID: 512852
Provider Gender: Female
License number: A74960
NPI: 1801971569
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: Yes
 HEALTH EXCEL IPA INC
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100

Fax: (619) 205-1967
After Hours Phone: (619)
 662-4100

Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

ARGOUD, GEORGES E

Provider ID: 206292
Provider Gender: Male
License number: A21814
NPI: 1215904461
Provider English Spoken: Yes
Provider Language(s) Spoken:
 French, Spanish

Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital, Scripps
 Mercy Hospital Chula Vista,
 Sharp Chula Vista Med Ctr,
 Scripps Mercy Hospital
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER

4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100

Fax:
After Hours Phone: (619)
 662-4100

Website: www.ihpsocal.org

Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No

♿ *Accessibility:*
Hours: M-F 8AM-5:30PM, SA
 8:30AM-2PM

BARBADILLO, FERDINAND F

Provider ID: 206292
Provider Gender: Male
License number: A49307
NPI: 1982662193
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Paradise

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Valley Hospital, Sharp Chula Vista Med Ctr
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM

BARBADILLO, FERDINAND F

Provider ID: 227411
Provider Gender: Male
License number: A49307
NPI: 1982662193
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital, Sharp Chula Vista Med Ctr
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax: (619) 205-1948
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes

Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-F 8:30AM-5PM, SA 9AM-5PM

CABARLO, JEHRIB M

Provider ID: 227411
Provider Gender: Male
License number: 20A8516
NPI: 1770661340
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER

4050 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-F 8:30AM-5PM, SA 9AM-5PM

CHAIT LLAMAS, LWBBA G

Provider ID: 227411
Provider Gender: Female
License number: A138938
NPI: 1134567530
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Pioneers Memorial Hospital
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-F 8:30AM-5PM, SA 9AM-5PM

FUJII, CINDY M

Provider ID: 227411
Provider Gender: Female
License number: G52183
NPI: 1871664821
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):

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C. Directorio de proveedores de atención primaria

No
 ☒ *Accessibility: W*
Hours: M-F 8:30AM-5PM, SA 9AM-5PM

GAHAGAN, SHEILA

Provider ID: 227411
Provider Gender: Female
License number: C53666
NPI: 1053327221
Provider English Spoken: Yes
Provider Language(s) Spoken: French
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax: (619) 205-1948
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☒ *Accessibility: W*
Hours: M-F 8:30AM-5PM, SA 9AM-5PM

GHAHREMANI, SIMIN M

Provider ID: 206292
Provider Gender: Female
License number: C51110
NPI: 1508904657
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy

Hospital Chula Vista, Sharp
 Chula Vista Med Ctr, Scripps
 Mercy Hospital
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☒ *Accessibility:*
Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM

HERMAN, ANDREA M

Provider ID: 227411
Provider Gender: Female
License number: A72721
NPI: 1518970037
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Sharp Chula Vista Med Ctr, Scripps Memorial Hospital
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax: (619) 205-1948
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org

Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☒ *Accessibility: W*
Hours: M-F 8:30AM-5PM, SA 9AM-5PM

NELSON, THEODORA J

Provider ID: 227411
Provider Gender: Female
License number: G75021
NPI: 1326130584
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☒ *Accessibility: W*
Hours: M-F 8:30AM-5PM, SA 9AM-5PM

PIANSAY, MARIA CORAZON M

Provider ID: 206292
Provider Gender: Female
License number: A93785
NPI: 1669680351

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C. Directorio de proveedores de atención primaria

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM

SAHMS, TIMOTHY D

Provider ID: 206292
Provider Gender: Male
License number: G51462
NPI: 1780697276
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007

Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM

SAHMS, TIMOTHY D

Provider ID: 227411
Provider Gender: Male
License number: G51462
NPI: 1780697276
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax: (619) 205-1948
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8:30AM-5PM, SA 9AM-5PM

SHAHIDYAZDANI, TINA

Provider ID: 227411
Provider Gender: Female
License number: A94813
NPI: 1891924858
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8:30AM-5PM, SA 9AM-5PM

SULLIVAN, ELISSA K

Provider ID: 227411
Provider Gender: Female
License number: A169577
NPI: 1790216422
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100

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C. Directorio de proveedores de atención primaria

Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: W
 Hours: M-F 8:30AM-5PM, SA
 9AM-5PM

TAYLOR, TASHA K

Provider ID: 227411
 Provider Gender: Female
 License number: A82187
 NPI: 1528144433
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Tri City
 Medical Ctr
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
 Phone: (619) 662-4100
 Fax: (619) 205-1948
 After Hours Phone: (619)
 662-4100
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: W
 Hours: M-F 8:30AM-5PM, SA
 9AM-5PM

PHYSICIANS ASSISTANT

HARMIS, NATASHA N

Provider ID: 227469
 Provider Gender: Female

License number: PA58672
 NPI: 1013516996
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 3364 BEYER BLVD
 SAN YSIDRO, CA 92173-1322
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619)
 662-4100
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: W
 Hours: M-F 8AM-5PM, SA
 9AM-5PM

KAMOTO, LYNN T

Provider ID: 206292
 Provider Gender: Female
 License number: PA17162
 NPI: 1447326459
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619)
 662-4100
 Website: www.ihpsocal.org

Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-F 8AM-5:30PM, SA
 8:30AM-2PM

SHARPE, NORMA A

Provider ID: 206292
 Provider Gender: Female
 License number: PA20490
 NPI: 1619100237
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619)
 662-4100
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-F 8AM-5:30PM, SA
 8:30AM-2PM

SUNA SITTO, MOHEEN

Provider ID: 227469
 Provider Gender: Female
 License number: PA22855
 NPI: 1497196729
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No

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C. Directorio de proveedores de atención primaria

Hospital Affiliation: No
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 3364 BEYER BLVD
 SAN YSIDRO, CA 92173-1322
Phone: (619) 600-4867
Fax:
After Hours Phone: (619) 600-4867
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 No
 ♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM

PODIATRIST

MANCHEL, BRUCE A
Provider ID: 206292
Provider Gender: Male
License number: DPM2930
NPI: 1790890788
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax: (619) 205-6341
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):

No
 ♿ *Accessibility:*
Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM
MANCHEL, BRUCE A
Provider ID: 227469
Provider Gender: Male
License number: DPM2930
NPI: 1790890788
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 3364 BEYER BLVD
 SAN YSIDRO, CA 92173-1322
Phone: (619) 662-4100
Fax:

After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 No
 ♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM

SURGERY GENERAL

OKWUOSA, CHRIS U
Provider ID: 206292
Provider Gender: Male
License number: A170738
NPI: 1114336260
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Providence St Mary Medical Center

Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 No
 ♿ *Accessibility:*
Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM

SANTEE

FQHC

SAN YSIDRO HEALTH SANTEE FAMILY MEDICINE,
Provider ID: 520609
Provider Gender:
License number: 550003575
NPI: 1376184911
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
 IHP-SAN YSIDRO HEALTH CENTER
 120 TOWN CENTER PKWY
 SANTEE, CA 92071-5801
Phone: (619) 445-6200
Fax: (619) 873-3476
After Hours Phone: (619) 445-6200
Website:
Email:
Medi-Cal Open Panel: Yes

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C. Directorio de proveedores de atención primaria

Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E
Hours: M-SA 9AM-5PM

PEDIATRICS

FINK, REBECCA

Provider ID: 502786
Provider Gender: Female
License number: A159345
NPI: 1659725562
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
9600 CUYAMACA ST STE 101
SANTEE, CA 92071-2692
Phone: (619) 749-2150
Fax: (619) 456-9744
After Hours Phone: (619)
749-2150
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

MANGINE, REGINA M

Provider ID: 366456
Provider Gender: Female
License number: A101261
NPI: 1417177577
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady

Childrens Hospital San Diego,
Grossmont Hospital, Sharp Mary
Birch Hosp For Women And
Newborns
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
9600 CUYAMACA ST STE 101
SANTEE, CA 92071-2692
Phone: (619) 749-2150
Fax: (619) 456-9744
After Hours Phone: (619)
749-2150
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

SPRING VALLEY

CERTIFIED NURSE PRACTITIONER

LEONARD, BEVERLY S

Provider ID: 206361
Provider Gender: Female
License number: NP10943
NPI: 1285772392
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035

Phone: (619) 515-2555
Fax:
After Hours Phone: (619)
515-2555
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

FAMILY PRACTICE

BACHARACH, REBECCA E

Provider ID: 206361
Provider Gender: Female
License number: 20A15459
NPI: 1225442643
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035
Phone: (619) 515-2555
Fax:
After Hours Phone: (619)
515-2555
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

CARDONES, ARTHUR J

Provider ID: 206361

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C. Directorio de proveedores de atención primaria

Provider Gender: Male
License number: A55932
NPI: 1962436451
Provider English Spoken: Yes
Provider Language(s) Spoken: Tagalog
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
Phone: (619) 515-2555
Fax:
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* ME
Hours: M-SA 9AM-5PM

CONSTANTINO, STEPHANIE L
Provider ID: 206361
Provider Gender: Female
License number: A149063
NPI: 1366824971
Provider English Spoken: Yes
Provider Language(s) Spoken: Mandarin
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035

Phone: (619) 515-2555
Fax:
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* ME
Hours: M-SA 9AM-5PM

LEE, SANDRINE J
Provider ID: 206361
Provider Gender: Female
License number: 20A15068
NPI: 1073909651
Provider English Spoken: Yes
Provider Language(s) Spoken: French
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035

Phone: (619) 515-2555
Fax:
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* ME
Hours: M-SA 9AM-5PM

ROSE, PATRICIA A
Provider ID: 206361
Provider Gender: Female

License number: A76059
NPI: 1588677314
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
Phone: (619) 515-2555
Fax:
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* ME
Hours: M-SA 9AM-5PM

SHAH, SAGAR K
Provider ID: 206361
Provider Gender: Male
License number: A171687
NPI: 1164780052
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
Phone: (619) 515-2555
Fax:
After Hours Phone: (619) 515-2555

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C. Directorio de proveedores de atención primaria

Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: ME
 Hours: M-SA 9AM-5PM

FQHC

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC,

Provider ID: 206361
 Provider Gender:
 License number:
 NPI: 1508801069
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
 Phone: (619) 515-2555
 Fax: (619) 462-5584
 After Hours Phone: (619) 515-2555
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: ME
 Hours: M-SA 9AM-5PM

INTERNAL MEDICINE

SHAHZAD, AHMAD

Provider ID: 206361

Provider Gender: Male
 License number: C169910
 NPI: 1982983557
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
 Phone: (619) 515-2555
 Fax:
 After Hours Phone: (619) 515-2555
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: ME
 Hours: M-SA 9AM-5PM

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI A

Provider ID: 206361
 Provider Gender: Female
 License number: 20A14919
 NPI: 1619397031
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035

Phone: (619) 515-2555
 Fax:
 After Hours Phone: (619) 515-2555
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: ME
 Hours: M-SA 9AM-5PM

BUECHNER, CHARLENE A

Provider ID: 206361
 Provider Gender: Female
 License number: A68463
 NPI: 1376663831
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Sharp Mary Birch Hosp For Women And Newborns
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
 Phone: (619) 515-2555
 Fax:
 After Hours Phone: (619) 515-2555
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: ME

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Hours: M-SA 9AM-5PM

CAMPBELL, ELIZABETH C

Provider ID: 206361

Provider Gender: Female

License number: 20A6763

NPI: 1932147329

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont
Hospital, Scripps Mercy Hospital,
Palomar Medical Center,
Palomar Health Downtown
Campus, Pomerado Hospital,
Rady Childrens Hospital San
Diego, Sharp Coronado Hosp
And Healthcare Ctr

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035

Phone: (619) 515-2555

Fax:

After Hours Phone: (619)
515-2555

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

CARTER, KHALIL J

Provider ID: 206361

Provider Gender: Male

License number: A113001

NPI: 1225231582

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Grossmont Hospital

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035

Phone: (619) 515-2555

Fax:

After Hours Phone: (619)
515-2555

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

CERVANTES, SANDRA M

Provider ID: 206361

Provider Gender: Female

License number: A118095

NPI: 1073701041

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Sharp Coronado Hosp
And Healthcare Ctr, Grossmont
Hospital

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035

Phone: (619) 515-2555

Fax:

After Hours Phone: (619)
515-2555

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

DE MIK, TRAVIS J

Provider ID: 206361

Provider Gender: Male

License number: A108228

NPI: 1629277322

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035

Phone: (619) 515-2555

Fax:

After Hours Phone: (619)
515-2555

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

FOLCH TORRES-AGUIAR, BEATRIZ M

Provider ID: 206361

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

License number: A148014
 NPI: 1457794752
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish, Yue Chinese
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
 Phone: (619) 515-2555
 Fax:
 After Hours Phone: (619) 515-2555
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: ME
 Hours: M-SA 9AM-5PM

LIPSCHITZ, LISA S

Provider ID: 206361
 Provider Gender: Female
 License number: A72005
 NPI: 1649208711
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital, Grossmont Hospital
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 8788 JAMACHA RD

SPRING VALLEY, CA
 91977-4035
 Phone: (619) 515-2555
 Fax:
 After Hours Phone: (619) 515-2555
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: ME
 Hours: M-SA 9AM-5PM

LOEFFLER, ALLISON M

Provider ID: 206361
 Provider Gender: Female
 License number: A116680
 NPI: 1700073962
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
 Phone: (619) 515-2555
 Fax:
 After Hours Phone: (619) 515-2555
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: ME

Hours: M-SA 9AM-5PM

MELLENDEZ BERRIOS, IARA DEL M

Provider ID: 206361
 Provider Gender: Female
 License number: A114181
 NPI: 1740514249
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital, Grossmont Hospital
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
 Phone: (619) 515-2555
 Fax:
 After Hours Phone: (619) 515-2555
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: ME
 Hours: M-SA 9AM-5PM

RODRIGUEZ JEREZ, ROBERTO D

Provider ID: 206361
 Provider Gender: Male
 License number: A154298
 NPI: 1710316450
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital, Sharp Coronado Hosp

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C. Directorio de proveedores de atención primaria

And Healthcare Ctr, Grossmont Hospital
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
 Phone: (619) 515-2555
 Fax:
 After Hours Phone: (619) 515-2555
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: ME
 Hours: M-SA 9AM-5PM

SAPRA, SONIA V

Provider ID: 206361
 Provider Gender: Female
 License number: A164859
 NPI: 1952751711
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Hindi
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
 Phone: (619) 515-2555
 Fax:
 After Hours Phone: (619) 515-2555
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes

Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: ME
 Hours: M-SA 9AM-5PM

SINGH, RASHMI

Provider ID: 206361
 Provider Gender: Female
 License number: A168236
 NPI: 1679937619
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
 Phone: (619) 515-2555
 Fax:
 After Hours Phone: (619) 515-2555
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: ME
 Hours: M-SA 9AM-5PM

WINESBURG, JENNIFER J

Provider ID: 206361
 Provider Gender: Female
 License number: 20A11535
 NPI: 1811162456
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No

Hospital Affiliation: Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital, Desert Regional Med Ctr
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
 Phone: (619) 515-2555
 Fax:
 After Hours Phone: (619) 515-2555
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: ME
 Hours: M-SA 9AM-5PM

ZIEG, ALAN J

Provider ID: 206361
 Provider Gender: Male
 License number: G78814
 NPI: 1699790634
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital Chula Vista
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
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C. Directorio de proveedores de atención primaria

Phone: (619) 515-2555

Fax:

After Hours Phone: (619)
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Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

PEDIATRICS

GONZALEZ, AMANDA R

Provider ID: 206361

Provider Gender: Female

License number: A169342

NPI: 1750745493

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035

Phone: (619) 515-2555

Fax:

After Hours Phone: (619)
515-2555

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

PHYSICIANS ASSISTANT

LOPEZ, MARIO A

Provider ID: 206361

Provider Gender: Male

License number: PA21385

NPI: 1932335080

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035

Phone: (619) 515-2555

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After Hours Phone: (619)
515-2555

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

TRAN, TU-UYEN T

Provider ID: 206361

Provider Gender: Female

License number: PA54588

NPI: 1598293748

Provider English Spoken: Yes

Provider Language(s) Spoken:

Vietnamese

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035

Phone: (619) 515-2555

Fax:

After Hours Phone: (619)
515-2555

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

TURNER, ERIC M

Provider ID: 206361

Provider Gender: Male

License number: PA55067

NPI: 1669756128

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

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91977-4035

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Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

PODIATRIST

MILLER, GLENN A

Provider ID: 206361

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Provider Gender: Male
License number: DPM3584
NPI: 1164457966
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
Phone: (619) 515-2555
Fax:
After Hours Phone: (619)
 515-2555
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* ME
Hours: M-SA 9AM-5PM

VALLEY CENTER

PEDIATRICS

CRAYCHEE, LEO C

Provider ID: 71887
Provider Gender: Male
License number: G59127
NPI: 1265432710
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK

28714 VALLEY CENTER RD
 STE L
 VALLEY CENTER, CA
 92082-6554
Phone: (760) 749-7770
Fax: (760) 751-9988
After Hours Phone: (760)
 749-7770
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM

VISTA

CERTIFIED NURSE PRACTITIONER

BROMAN, GRETCHEN L

Provider ID: 206338
Provider Gender: Female
License number: NP95007885
NPI: 1922421288
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
 IHP-VISTA COMMUNITY
 CLINIC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax:
After Hours Phone: (760)
 631-5000
Website:
 www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-TH 8AM-8PM, F
 8AM-5PM, SA 9AM-4PM

GARZA, PALOMA A

Provider ID: 206338
Provider Gender: Female
License number: NP123758
NPI: 1750316238
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
 IHP-VISTA COMMUNITY
 CLINIC

1000 VALE TERRACE DR
 VISTA, CA 92084-5218
Phone: (760) 631-5000

Fax:
After Hours Phone: (760)
 631-5000
Website:
 www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-TH 8AM-8PM, F
 8AM-5PM, SA 9AM-4PM

HALGEDAHL, YI T

Provider ID: 206338
Provider Gender: Female
License number: NP95006826
NPI: 1619246907
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Chinese
Cultural Competency: No

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Hospital Affiliation: No
Board Certified Specialty: No
 IHP-VISTA COMMUNITY CLINIC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Website:
 www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-TH 8AM-8PM, F 8AM-5PM, SA 9AM-4PM

HALGEDAHL, YI T

Provider ID: 400339
Provider Gender: Female
License number: NP95006826
NPI: 1619246907
Provider English Spoken: Yes
Provider Language(s) Spoken: Chinese
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-VISTA COMMUNITY CLINIC
 134 GRAPEVINE RD
 VISTA, CA 92083-4004
Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):

No
 ☯ *Accessibility:* W
Hours: M,W-F 8AM-5PM, TU 10:30AM-7:30PM, SA 9AM-5PM

KAYE, ALYSON R

Provider ID: 206338
Provider Gender: Female
License number: NP23217
NPI: 1457668840
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-VISTA COMMUNITY CLINIC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218
Phone: (760) 414-3892
Fax:

After Hours Phone: (760) 414-3892
Website:
 www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-TH 8AM-8PM, F 8AM-5PM, SA 9AM-4PM

KELLEHER, BRIDGET M

Provider ID: 206338
Provider Gender: Female
License number: NP95003447
NPI: 1245695006
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr

Board Certified Specialty: No
 IHP-VISTA COMMUNITY CLINIC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Website:
 www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-TH 8AM-8PM, F 8AM-5PM, SA 9AM-4PM

KELLEHER, BRIDGET M

Provider ID: 400339
Provider Gender: Female
License number: NP95003447
NPI: 1245695006
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr
Board Certified Specialty: No
 IHP-VISTA COMMUNITY CLINIC
 134 GRAPEVINE RD
 VISTA, CA 92083-4004
Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):

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C. Directorio de proveedores de atención primaria

No
 ☯ *Accessibility:* W
Hours: M,W-F 8AM-5PM, TU
 10:30AM-7:30PM, SA 9AM-5PM

KOUSARI, JHALEH

Provider ID: 206338
Provider Gender: Female
License number: NP20893
NPI: 1811262405
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
 Green Hospital, Scripps
 Memorial Hospital
Board Certified Specialty: No
 IHP-VISTA COMMUNITY
 CLINIC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218
Phone: (844) 308-5003
Fax:
After Hours Phone: (844)
 308-5003
Website:
 www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-TH 8AM-8PM, F
 8AM-5PM, SA 9AM-4PM

MAOKHAMPHIOU, DEBBIE W

Provider ID: 206338
Provider Gender: Female
License number: NP95009149
NPI: 1275025827
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Tri City
 Medical Ctr
Board Certified Specialty: No
 IHP-VISTA COMMUNITY
 CLINIC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax:
After Hours Phone: (760)
 631-5000
Website:
 www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-TH 8AM-8PM, F
 8AM-5PM, SA 9AM-4PM

NICHOLAS, ESTELA M

Provider ID: 206338
Provider Gender: Female
License number: NP11448
NPI: 1558384792
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-VISTA COMMUNITY
 CLINIC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218
Phone: (844) 308-5003
Fax:
After Hours Phone: (844)
 308-5003
Website:
 www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-TH 8AM-8PM, F
 8AM-5PM, SA 9AM-4PM

PATEMAN, CAROLYN U

Provider ID: 206338
Provider Gender: Female
License number: NP10896
NPI: 1205859444
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-VISTA COMMUNITY
 CLINIC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218
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After Hours Phone: (760)
 631-5000
Website:
 www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-TH 8AM-8PM, F
 8AM-5PM, SA 9AM-4PM

SAHELIJO, NIENKE A

Provider ID: 206338
Provider Gender: Female
License number: NP95015096
NPI: 1528686318
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

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C. Directorio de proveedores de atención primaria

Hospital Affiliation:
Board Certified Specialty: No
 IHP-VISTA COMMUNITY CLINIC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218
Phone: (760) 631-5000
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Website:
 www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-TH 8AM-8PM, F 8AM-5PM, SA 9AM-4PM

SCHAEPE, RHODORA A
Provider ID: 400339
Provider Gender: Female
License number: NP7791
NPI: 1700974789
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-VISTA COMMUNITY CLINIC
 134 GRAPEVINE RD
 VISTA, CA 92083-4004
Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No

☯ *Accessibility:* W
Hours: M,W-F 8AM-5PM, TU 10:30AM-7:30PM, SA 9AM-5PM

SCHAEPE, RHODORA A
Provider ID: 400339
Provider Gender: Female
License number: RN410247
NPI: 1700974789
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-VISTA COMMUNITY CLINIC
 134 GRAPEVINE RD
 VISTA, CA 92083-4004
Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M,W-F 8AM-5PM, TU 10:30AM-7:30PM, SA 9AM-5PM

YOUNG, JENNIFER A
Provider ID: 206338
Provider Gender: Female
License number: NP95003087
NPI: 1558701094
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-VISTA COMMUNITY CLINIC
 1000 VALE TERRACE DR

VISTA, CA 92084-5218
Phone: (760) 414-3892
Fax:
After Hours Phone: (760) 414-3892
Website:
 www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-TH 8AM-8PM, F 8AM-5PM, SA 9AM-4PM

CERTIFIED REGISTERED NURSE MIDWIFE

ZAMORA-FLYR, MARIA M
Provider ID: 206338
Provider Gender: Female
License number: NM1634
NPI: 1194938647
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-VISTA COMMUNITY CLINIC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Website:
 www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

♿ *Accessibility:* W
Hours: M-TH 8AM-8PM, F
 8AM-5PM, SA 9AM-4PM

CHIROPRACTOR

CORTEZ, JAIME

Provider ID: 206338
Provider Gender: Male
License number: DC31392
NPI: 1508195348
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
 IHP-VISTA COMMUNITY
 CLINIC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218
Phone: (760) 414-3892
Fax:
After Hours Phone: (760)
 414-3892
Website:
 www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ♿ *Accessibility:* W
Hours: M-TH 8AM-8PM, F
 8AM-5PM, SA 9AM-4PM

JU, NATHANIEL

Provider ID: 206338
Provider Gender: Male
License number: DC32054
NPI: 1972883882
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Chinese
Cultural Competency: No

Hospital Affiliation:
 Board Certified Specialty: No
 IHP-VISTA COMMUNITY
 CLINIC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax:
After Hours Phone: (760)
 631-5000
Website:
 www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ♿ *Accessibility:* W
Hours: M-TH 8AM-8PM, F
 8AM-5PM, SA 9AM-4PM

JU, NATHANIEL

Provider ID: 400339
Provider Gender: Male
License number: DC32054
NPI: 1972883882
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Chinese
Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
 IHP-VISTA COMMUNITY
 CLINIC
 134 GRAPEVINE RD
 VISTA, CA 92083-4004
Phone: (760) 631-5000
Fax:
After Hours Phone: (760)
 631-5000
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):

No
 ♿ *Accessibility:* W
Hours: M,W-F 8AM-5PM, TU
 10:30AM-7:30PM, SA 9AM-5PM

FAMILY PRACTICE

CARRIO, KELSEY N

Provider ID: 470671
Provider Gender: Female
License number: A158602
NPI: 1952795072
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 134 GRAPEVINE RD
 VISTA, CA 92083-4004
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
 631-5000
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM

DONNELL, MARTI M

Provider ID: 206338
Provider Gender: Female
License number: C50708
NPI: 1235151366
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital Encinitas, Tri

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C. Directorio de proveedores de atención primaria

City Medical Ctr
Board Certified Specialty: Yes
IHP-VISTA COMMUNITY
CLINIC

1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (844) 308-5003

Fax:

After Hours Phone: (844)
308-5003

Website:

www.vistacommunityclinic.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility: W

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

DONNELL, MARTI M

Provider ID: 400339

Provider Gender: Female

License number: C50708

NPI: 1235151366

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital Encinitas, Tri

City Medical Ctr

Board Certified Specialty: No

IHP-VISTA COMMUNITY

CLINIC

134 GRAPEVINE RD

VISTA, CA 92083-4004

Phone: (760) 631-5000

Fax:

After Hours Phone: (760)

631-5000

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M,W-F 8AM-5PM, TU
10:30AM-7:30PM, SA 9AM-5PM

ESPINOSA-SILVA, YAMINAH

Provider ID: 206338

Provider Gender: Female

License number: 20A12958

NPI: 1003172016

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital Encinitas, Tri

City Medical Ctr

Board Certified Specialty: No

IHP-VISTA COMMUNITY

CLINIC

1000 VALE TERRACE DR

VISTA, CA 92084-5218

Phone: (760) 631-5000

Fax:

After Hours Phone: (760)

631-5000

Website:

www.vistacommunityclinic.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-TH 8AM-8PM, F

8AM-5PM, SA 9AM-4PM

ESPINOSA-SILVA, YAMINAH

Provider ID: 400339

Provider Gender: Female

License number: 20A12958

NPI: 1003172016

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital Encinitas, Tri

City Medical Ctr

Board Certified Specialty: No

IHP-VISTA COMMUNITY

CLINIC

134 GRAPEVINE RD

VISTA, CA 92083-4004

Phone: (760) 631-5000

Fax:

After Hours Phone: (760)

631-5000

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M,W-F 8AM-5PM, TU

10:30AM-7:30PM, SA 9AM-5PM

FATLAND, SARAH E

Provider ID: 206338

Provider Gender: Female

License number: 20A18374

NPI: 1831354026

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-VISTA COMMUNITY

CLINIC

1000 VALE TERRACE DR

VISTA, CA 92084-5218

Phone: (760) 631-5000

Fax:

After Hours Phone: (760)

631-5000

Website:

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-TH 8AM-8PM, F
8AM-5PM, SA 9AM-4PM

KETCHEL, CLINT

Provider ID: 206338
Provider Gender: Male
License number: A135564
NPI: 1699038125
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Southwest
Healthcare System Murrieta,
Southwest Healthcare System
Wildomar, Scripps Memorial
Hospital Encinitas, Tri City
Medical Ctr, Whittier Hospital
Medical Center
Board Certified Specialty: No
IHP-VISTA COMMUNITY
CLINIC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax:
After Hours Phone: (760)
631-5000

Website:
www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-TH 8AM-8PM, F
8AM-5PM, SA 9AM-4PM

KETCHEL, CLINT

Provider ID: 400339
Provider Gender: Male
License number: A135564
NPI: 1699038125
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Southwest
Healthcare System Murrieta,
Southwest Healthcare System
Wildomar, Scripps Memorial
Hospital Encinitas, Tri City
Medical Ctr, Whittier Hospital
Medical Center
Board Certified Specialty: No
IHP-VISTA COMMUNITY
CLINIC
134 GRAPEVINE RD
VISTA, CA 92083-4004
Phone: (760) 631-5000
Fax:
After Hours Phone: (760)
631-5000
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M,W-F 8AM-5PM, TU
10:30AM-7:30PM, SA 9AM-5PM

LAROCQUE, MICHAEL A

Provider ID: 206338
Provider Gender: Male
License number: C34614
NPI: 1306879549
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas, Tri
City Medical Ctr
Board Certified Specialty: No

IHP-VISTA COMMUNITY
CLINIC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax:
After Hours Phone: (760)
631-5000
Website:
www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-TH 8AM-8PM, F
8AM-5PM, SA 9AM-4PM

LEONARD, LISA A

Provider ID: 206338
Provider Gender: Female
License number: G79676
NPI: 1477588598
Provider English Spoken: Yes
Provider Language(s) Spoken:
French, Spanish
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr
Board Certified Specialty: No
IHP-VISTA COMMUNITY
CLINIC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Website:
www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):

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C. Directorio de proveedores de atención primaria

No ♿ <i>Accessibility: W</i> <i>Hours: M-TH 8AM-8PM, F 8AM-5PM, SA 9AM-4PM</i>	<i>Board Certified Specialty: No</i> IHP-VISTA COMMUNITY CLINIC 1000 VALE TERRACE DR VISTA, CA 92084-5218 <i>Phone: (760) 631-5000</i> <i>Fax:</i> <i>After Hours Phone: (760) 631-5000</i> <i>Website:</i> www.vistacommunityclinic.org <i>Email:</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0/999</i> <i>American Sign Language (ASL): No</i> ♿ <i>Accessibility: W</i> <i>Hours: M-TH 8AM-8PM, F 8AM-5PM, SA 9AM-4PM</i>	<i>Min/Max Age: 0/999</i> <i>American Sign Language (ASL): No</i> ♿ <i>Accessibility: W</i> <i>Hours: M-TH 8AM-8PM, F 8AM-5PM, SA 9AM-4PM</i>
NGUYEN, KERRIE K <i>Provider ID: 206338</i> <i>Provider Gender: Female</i> <i>License number: A158244</i> <i>NPI: 1407380710</i> <i>Provider English Spoken: Yes</i> <i>Provider Language(s) Spoken: Vietnamese</i> <i>Cultural Competency: No</i> <i>Hospital Affiliation:</i> <i>Board Certified Specialty: No</i> IHP-VISTA COMMUNITY CLINIC 1000 VALE TERRACE DR VISTA, CA 92084-5218 <i>Phone: (818) 123-4567</i> <i>Fax:</i> <i>After Hours Phone: (818) 123-4567</i> <i>Website:</i> www.vistacommunityclinic.org <i>Email:</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0/999</i> <i>American Sign Language (ASL): No</i> ♿ <i>Accessibility: W</i> <i>Hours: M-TH 8AM-8PM, F 8AM-5PM, SA 9AM-4PM</i>	PUDOL, CHRISTOPHER B <i>Provider ID: 206338</i> <i>Provider Gender: Male</i> <i>License number: 20A14907</i> <i>NPI: 1851386080</i> <i>Provider English Spoken: Yes</i> <i>Provider Language(s) Spoken: Spanish</i> <i>Cultural Competency: No</i> <i>Hospital Affiliation: Scripps Memorial Hospital Encinitas, Tri City Medical Ctr</i> <i>Board Certified Specialty: No</i> IHP-VISTA COMMUNITY CLINIC 1000 VALE TERRACE DR VISTA, CA 92084-5218 <i>Phone: (760) 631-5000</i> <i>Fax:</i> <i>After Hours Phone: (760) 631-5000</i> <i>Website:</i> www.vistacommunityclinic.org <i>Email:</i> <i>Medi-Cal Open Panel: Yes</i>	SEFA-BOAKYE, MAMIE S <i>Provider ID: 400339</i> <i>Provider Gender: Female</i> <i>License number: A137549</i> <i>NPI: 1194067215</i> <i>Provider English Spoken: Yes</i> <i>Provider Language(s) Spoken: Spanish</i> <i>Cultural Competency: No</i> <i>Hospital Affiliation:</i> <i>Board Certified Specialty: No</i> IHP-VISTA COMMUNITY CLINIC 134 GRAPEVINE RD VISTA, CA 92083-4004 <i>Phone: (760) 631-5000</i> <i>Fax:</i> <i>After Hours Phone: (760) 631-5000</i> <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0/999</i> <i>American Sign Language (ASL): No</i> ♿ <i>Accessibility: W</i> <i>Hours: M,W-F 8AM-5PM, TU 10:30AM-7:30PM, SA 9AM-5PM</i>
PANICKER, CIBU <i>Provider ID: 206338</i> <i>Provider Gender: Male</i> <i>License number: A149340</i> <i>NPI: 1235492760</i> <i>Provider English Spoken: Yes</i> <i>Provider Language(s) Spoken: Vietnamese</i> <i>Cultural Competency: No</i> <i>Hospital Affiliation: Tri City Medical Ctr</i>	<i>After Hours Phone: (760) 631-5000</i> <i>Website:</i> www.vistacommunityclinic.org <i>Email:</i> <i>Medi-Cal Open Panel: Yes</i>	SIMATI, BETH L <i>Provider ID: 206338</i> <i>Provider Gender: Female</i> <i>License number: C156596</i> <i>NPI: 1417187618</i> <i>Provider English Spoken: Yes</i> <i>Provider Language(s) Spoken: Vietnamese</i> <i>Cultural Competency: No</i> <i>Hospital Affiliation: Whittier</i>

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C. Directorio de proveedores de atención primaria

Hospital Medical Center, Scripps
Memorial Hospital Encinitas, Tri
City Medical Ctr
Board Certified Specialty: No
IHP-VISTA COMMUNITY
CLINIC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000

Fax:
After Hours Phone: (760)
631-5000
Website:
www.vistacommunityclinic.org

Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility: W
Hours: M-TH 8AM-8PM, F
8AM-5PM, SA 9AM-4PM

SIMATI, BETH L

Provider ID: 400339
Provider Gender: Female
License number: C156596
NPI: 1417187618
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Whittier
Hospital Medical Center, Scripps
Memorial Hospital Encinitas, Tri
City Medical Ctr
Board Certified Specialty: No
IHP-VISTA COMMUNITY
CLINIC
134 GRAPEVINE RD
VISTA, CA 92083-4004
Phone: (760) 631-5000

Fax:
After Hours Phone: (760)
631-5000
Website:

Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility: W
Hours: M,W-F 8AM-5PM, TU
10:30AM-7:30PM, SA 9AM-5PM

THOMPSON, CHERYL E

Provider ID: 206338
Provider Gender: Female
License number: A102687
NPI: 1548429863
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Providence St
Jude Medical Center, Tri City
Medical Ctr
Board Certified Specialty: No
IHP-VISTA COMMUNITY
CLINIC

1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (844) 308-5003
Fax:

After Hours Phone: (844)
308-5003
Website:
www.vistacommunityclinic.org
Email:

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility: W
Hours: M-TH 8AM-8PM, F
8AM-5PM, SA 9AM-4PM

TRAN, DAO M

Provider ID: 206338
Provider Gender: Male
License number: 20A14485

NPI: 1659771368
Provider English Spoken: Yes
Provider Language(s) Spoken:
Vietnamese
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr
Board Certified Specialty: No
IHP-VISTA COMMUNITY
CLINIC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax:

After Hours Phone: (760)
631-5000
Website:
www.vistacommunityclinic.org
Email:

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility: W
Hours: M-TH 8AM-8PM, F
8AM-5PM, SA 9AM-4PM

TRAN, DAO M

Provider ID: 400339
Provider Gender: Male
License number: 20A14485
NPI: 1659771368
Provider English Spoken: Yes
Provider Language(s) Spoken:
Vietnamese
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr
Board Certified Specialty: No
IHP-VISTA COMMUNITY
CLINIC
134 GRAPEVINE RD
VISTA, CA 92083-4004

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Phone: (760) 631-5000
 Fax:
 After Hours Phone: (760) 631-5000
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M,W-F 8AM-5PM, TU 10:30AM-7:30PM, SA 9AM-5PM

FQHC

VCC DURIAN,

Provider ID: 411518
 Provider Gender:
 License number: 1851300123
 NPI: 1851300123
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: IHP-VISTA COMMUNITY CLINIC
 105 DURIAN ST STE A VISTA, CA 92083-6206
 Phone: (844) 308-5003
 Fax: (760) 414-3892
 After Hours Phone: (844) 308-5003
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-F 8:30AM-5PM, SA 9AM-5PM

VCC DURIAN,

Provider ID: 411518
 Provider Gender:
 License number: 080000328
 NPI: 1851300123
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: IHP-VISTA COMMUNITY CLINIC
 105 DURIAN ST STE A VISTA, CA 92083-6206
 Phone: (844) 308-5003
 Fax: (760) 414-3892

After Hours Phone: (844) 308-5003
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-F 8:30AM-5PM, SA 9AM-5PM

VISTA COMMUNITY CLINIC GRAPEVINE,

Provider ID: 400339
 Provider Gender:
 License number: 080000328
 NPI: 1851300123
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: IHP-VISTA COMMUNITY CLINIC
 134 GRAPEVINE RD VISTA, CA 92083-4004

Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M,W-F 8AM-5PM, TU 10:30AM-7:30PM, SA 9AM-5PM

VISTA COMMUNITY CLINIC,

Provider ID: 206338
 Provider Gender:
 License number: 080000002
 NPI: 1316501562
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: IHP-VISTA COMMUNITY CLINIC
 1000 VALE TERRACE DR VISTA, CA 92084-5218
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000
 Website:
www.vistacommunityclinic.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-TH 8AM-8PM, F 8AM-5PM, SA 9AM-4PM

VISTA COMMUNITY CLINIC,

Provider ID: 206338

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C. Directorio de proveedores de atención primaria

Provider Gender:
License number: 080000002
NPI: 1851300123
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
 IHP-VISTA COMMUNITY
 CLINIC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
 631-5000
Website:
 www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ♿ *Accessibility:* W
Hours: M-TH 8AM-8PM, F
 8AM-5PM, SA 9AM-4PM

GENERAL PRACTICE

OLIVA, CARLOS G
Provider ID: 378429
Provider Gender: Male
License number: A40155
NPI: 1891882239
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Tri City
 Medical Ctr, Pomerado Hospital
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 969 S SANTA FE AVE # A
 VISTA, CA 92083-6910

Phone: (760) 941-7050
Fax: (760) 941-7142
After Hours Phone: (760)
 941-7050
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM

RONAN, KEVIN J
Provider ID: 206338
Provider Gender: Male
License number: G77176
NPI: 1225017353
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Tri City
 Medical Ctr, Scripps Memorial
 Hospital Encinitas
Board Certified Specialty: No
 IHP-VISTA COMMUNITY
 CLINIC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax:
After Hours Phone: (760)
 631-5000
Website:
 www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ♿ *Accessibility:* W
Hours: M-TH 8AM-8PM, F
 8AM-5PM, SA 9AM-4PM

INTERNAL MEDICINE

BOQUIN, ENRIQUE M
Provider ID: 206338
Provider Gender: Male
License number: C52564
NPI: 1891759403
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital Encinitas, Tri
 City Medical Ctr
Board Certified Specialty: No
 IHP-VISTA COMMUNITY
 CLINIC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax:
After Hours Phone: (760)
 631-5000
Website:
 www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ♿ *Accessibility:* W
Hours: M-TH 8AM-8PM, F
 8AM-5PM, SA 9AM-4PM

CLANCY, JOHN H
Provider ID: 300496
Provider Gender: Male
License number: 20A9614
NPI: 1962506238
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Tri City
 Medical Ctr

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Board Certified Specialty: No
HEALTH EXCEL IPA INC
2375 S MELROSE DR
VISTA, CA 92081-8788
Phone: (760) 305-1900
Fax: (760) 305-1910
After Hours Phone: (760)
305-1900
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 6/100
American Sign Language (ASL):
No
♿ *Accessibility:* P, EB, IB, E
Hours: M-SA 9AM-5PM

DELGADILLO, ALEXANDER
Provider ID: 206338
Provider Gender: Male
License number: G89399
NPI: 1245298769
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Temecula
Valley Hospital Inc
Board Certified Specialty: No
IHP-VISTA COMMUNITY
CLINIC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax:
After Hours Phone: (760)
631-5000
Website:
www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:* W

Hours: M-TH 8AM-8PM, F
8AM-5PM, SA 9AM-4PM
DELGADILLO, ALEXANDER
Provider ID: 400339
Provider Gender: Male
License number: G89399
NPI: 1245298769
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Temecula
Valley Hospital Inc
Board Certified Specialty: No
IHP-VISTA COMMUNITY
CLINIC
134 GRAPEVINE RD
VISTA, CA 92083-4004
Phone: (760) 631-5000
Fax:
After Hours Phone: (760)
631-5000
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M,W-F 8AM-5PM, TU
10:30AM-7:30PM, SA 9AM-5PM

MACMURRAY, MICHAEL L
Provider ID: 206338
Provider Gender: Male
License number: A83313
NPI: 1386660280
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-VISTA COMMUNITY

CLINIC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax:
After Hours Phone: (760)
631-5000
Website:
www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-TH 8AM-8PM, F
8AM-5PM, SA 9AM-4PM

PARIKH, MILIND D
Provider ID: 206338
Provider Gender: Male
License number: 20A13745
NPI: 1194161406
Provider English Spoken: Yes
Provider Language(s) Spoken:
Gujarati, Hindi, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr
Board Certified Specialty: No
IHP-VISTA COMMUNITY
CLINIC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax:
After Hours Phone: (760)
631-5000
Website:
www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

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C. Directorio de proveedores de atención primaria

♿ *Accessibility:* W
Hours: M-TH 8AM-8PM, F
8AM-5PM, SA 9AM-4PM

RUTMAN, MICHAEL N

Provider ID: 23109
Provider Gender: Male
License number: 20A4641
NPI: 1245303122
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas
Board Certified Specialty: Yes
HEALTH EXCEL IPA INC
2355 S MELROSE DR
VISTA, CA 92081-8788
Phone: (760) 598-0088
Fax: (760) 598-0078
After Hours Phone: (760)
598-0088
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No

♿ *Accessibility:* W
Hours: M-SA 9AM-5PM

WEISSMAN, WILLIAM R

Provider ID: 400339
Provider Gender: Male
License number: G15046
NPI: 1730114992
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Palomar
Health Downtown Campus,
Scripps Memorial Hospital
Encinitas, Tri City Medical Ctr
Board Certified Specialty: No

IHP-VISTA COMMUNITY
CLINIC
134 GRAPEVINE RD
VISTA, CA 92083-4004
Phone: (760) 631-5000
Fax:
After Hours Phone: (760)
631-5000
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M,W-F 8AM-5PM, TU
10:30AM-7:30PM, SA 9AM-5PM

OBSTETRICS / GYNECOLOGY

ARRIETA, IRIS R

Provider ID: 206338
Provider Gender: Female
License number: A125026
NPI: 1659614303
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr, Rady Childrens
Hospital San Diego, Sharp
Memorial Hospital
Board Certified Specialty: No
IHP-VISTA COMMUNITY
CLINIC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax:
After Hours Phone: (760)
631-5000
Website:
www.vistacommunityclinic.org
Email:

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-TH 8AM-8PM, F
8AM-5PM, SA 9AM-4PM

HAWKINS, MELISSA A

Provider ID: 206338
Provider Gender: Female
License number: A62780
NPI: 1851620447
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr

Board Certified Specialty: No
IHP-VISTA COMMUNITY
CLINIC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax:
After Hours Phone: (760)
631-5000
Website:
www.vistacommunityclinic.org
Email:

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-TH 8AM-8PM, F
8AM-5PM, SA 9AM-4PM

KARANIKKIS, CHRISTOS A

Provider ID: 206338
Provider Gender: Male
License number: 20A9149
NPI: 1235192691
Provider English Spoken: Yes

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C. Directorio de proveedores de atención primaria

Provider Language(s) Spoken: Farsi, Greek, Modern Greek, Spanish

Cultural Competency: No

Hospital Affiliation: Tri City Medical Ctr, Palomar Medical Center

Board Certified Specialty: No
IHP-VISTA COMMUNITY CLINIC

1000 VALE TERRACE DR
VISTA, CA 92084-5218

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Website:

www.vistacommunityclinic.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

♿ *Accessibility:* W

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

LEON, JOSUE D

Provider ID: 206338

Provider Gender: Male

License number: A80635

NPI: 1497799092

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency: No

Hospital Affiliation: Palomar Medical Center, Tri City Medical Ctr

Board Certified Specialty: No
IHP-VISTA COMMUNITY CLINIC

1000 VALE TERRACE DR
VISTA, CA 92084-5218

Phone: (760) 631-5000

Fax:

After Hours Phone: (760)

631-5000

Website:

www.vistacommunityclinic.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

♿ *Accessibility:* W

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

LOPEZ, SANDRA

Provider ID: 206338

Provider Gender: Female

License number: A73316

NPI: 1962421651

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency: No

Hospital Affiliation: Tri City Medical Ctr, Palomar Medical Center, Sharp Chula Vista Med Ctr

Board Certified Specialty: No
IHP-VISTA COMMUNITY CLINIC

1000 VALE TERRACE DR
VISTA, CA 92084-5218

Phone: (760) 631-5000

Fax: (858) 715-1316

After Hours Phone: (760)

631-5000

Website:

www.vistacommunityclinic.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

♿ *Accessibility:* W

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

QUAN, MARIA C

Provider ID: 206338

Provider Gender: Female

License number: C143703

NPI: 1043281405

Provider English Spoken: Yes

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

Cultural Competency: No

Hospital Affiliation: Tri City Medical Ctr

Board Certified Specialty: No
IHP-VISTA COMMUNITY CLINIC

1000 VALE TERRACE DR
VISTA, CA 92084-5218

Phone: (760) 631-5000

Fax:

After Hours Phone: (760) 631-5000

Website:

www.vistacommunityclinic.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

♿ *Accessibility:* W

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

PEDIATRICS

AMANI, RAMIN

Provider ID: 79901

Provider Gender: Male

License number: A53984

NPI: 1659366292

Provider English Spoken: Yes

Provider Language(s) Spoken: Cultural Competency: No

Hospital Affiliation: Tri City

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Medical Ctr, Rady Childrens Hospital San Diego
Board Certified Specialty: No
HEALTH EXCEL IPA INC
950 CIVIC CENTER DR # A VISTA, CA 92083-5208
Phone: (760) 439-4839
Fax: (760) 439-4841
After Hours Phone: (760) 439-4839
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/21
American Sign Language (ASL): No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM

AMANI, RAMIN

Provider ID: 79901
Provider Gender: Male
License number: A53984
NPI: 1659366292
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Rady Childrens Hospital San Diego
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
950 CIVIC CENTER DR # A VISTA, CA 92083-5208
Phone: (760) 439-4839
Fax: (760) 439-4841
After Hours Phone: (760) 439-4839
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No

♿ *Accessibility:* W
Hours: M-SA 9AM-5PM

AMBO, STANLEY G

Provider ID: 52269
Provider Gender: Male
License number: G77814
NPI: 1891735676
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital Encinitas, Rady Childrens Hospital San Diego
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
2067 W VISTA WAY STE 180 VISTA, CA 92083-6033
Phone: (760) 945-3434
Fax: (760) 945-6761
After Hours Phone: (760) 945-3434
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ *Accessibility:* P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM

BAILEY, ROMANA

Provider ID: 206338
Provider Gender: Female
License number: A72224
NPI: 1396023685
Provider English Spoken: Yes
Provider Language(s) Spoken: Czech
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Community Memorial Hosp Of San

Buenaventura, St Johns Regional Medical Center
Board Certified Specialty: No
IHP-VISTA COMMUNITY CLINIC
1000 VALE TERRACE DR VISTA, CA 92084-5218
Phone: (844) 308-5003
Fax:
After Hours Phone: (844) 308-5003
Website:
www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ *Accessibility:* W
Hours: M-TH 8AM-8PM, F 8AM-5PM, SA 9AM-4PM

CASTRO, JORGE L

Provider ID: 100779
Provider Gender: Male
License number: A41618
NPI: 1326082868
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital Encinitas, Rady Childrens Hospital San Diego
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
2067 W VISTA WAY STE 180 VISTA, CA 92083-6033
Phone: (760) 945-3434
Fax: (760) 945-6761
After Hours Phone: (760) 945-3434
Website:
Email:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☯ *Accessibility:* P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM

FREDRICKS, ROBERT E

Provider ID: 206338
Provider Gender: Male
License number: G86902
NPI: 1073524492
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
 IHP-VISTA COMMUNITY
 CLINIC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218
Phone: (760) 631-5000

Fax:
After Hours Phone: (760)
 631-5000
Website:
 www.vistacommunityclinic.org

Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-TH 8AM-8PM, F
 8AM-5PM, SA 9AM-4PM

GRANT, COLETTE L

Provider ID: 328679
Provider Gender: Female
License number: G65865
NPI: 1073638680
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency: No

Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Southwest Healthcare System
 Wildomar, Southwest Healthcare
 System Murrieta
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 2067 W VISTA WAY STE 180
 VISTA, CA 92083-6033
Phone: (760) 945-3434
Fax: (760) 945-6761
After Hours Phone: (760)
 945-3434
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM

GUNTA, SUJANA S

Provider ID: 206338
Provider Gender: Female
License number: A109056
NPI: 1932304342
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Hindi, Marathi, Spanish, Telugu
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego, Tri
 City Medical Ctr
Board Certified Specialty: No
 IHP-VISTA COMMUNITY
 CLINIC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax:
After Hours Phone: (760)
 631-5000

Website:
 www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-TH 8AM-8PM, F
 8AM-5PM, SA 9AM-4PM

HARTFORD, NICOLE P

Provider ID: 206338
Provider Gender: Female
License number: 20A14390
NPI: 1346530466
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital Encinitas, Tri
 City Medical Ctr
Board Certified Specialty: No
 IHP-VISTA COMMUNITY
 CLINIC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218
Phone: (760) 414-3892

Fax:
After Hours Phone: (760)
 414-3892
Website:
 www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-TH 8AM-8PM, F
 8AM-5PM, SA 9AM-4PM

HARTFORD, NICOLE P

Provider ID: 400339
Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

License number: 20A14390
NPI: 1346530466
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Tri City Medical Ctr
Board Certified Specialty: No
IHP-VISTA COMMUNITY CLINIC
 134 GRAPEVINE RD
 VISTA, CA 92083-4004
Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M,W-F 8AM-5PM, TU 10:30AM-7:30PM, SA 9AM-5PM

HOKE, EILEEN M

Provider ID: 206338
Provider Gender: Female
License number: A62558
NPI: 1528031457
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr
Board Certified Specialty: No
IHP-VISTA COMMUNITY CLINIC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218

Phone: (844) 308-5003
Fax:
After Hours Phone: (844) 308-5003
Website:
 www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-TH 8AM-8PM, F 8AM-5PM, SA 9AM-4PM

LUSCHWITZ, BRIAN S

Provider ID: 400339
Provider Gender: Male
License number: A60517
NPI: 1205868510
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr
Board Certified Specialty: No
IHP-VISTA COMMUNITY CLINIC
 134 GRAPEVINE RD
 VISTA, CA 92083-4004
Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M,W-F 8AM-5PM, TU 10:30AM-7:30PM, SA 9AM-5PM

MOREIRA, LUCILA K

Provider ID: 368590
Provider Gender: Female
License number: 20A15437
NPI: 1104846567
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Rady Childrens Hospital San Diego
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 2067 W VISTA WAY STE 180
 VISTA, CA 92083-6033
Phone: (760) 945-3434
Fax: (760) 945-6761
After Hours Phone: (760) 945-3434
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM

MOVAHHEDIAN, HAMID R

Provider ID: 206338
Provider Gender: Male
License number: A49253
NPI: 1619920816
Provider English Spoken: Yes
Provider Language(s) Spoken: Faroese, Farsi
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr
Board Certified Specialty: No
IHP-VISTA COMMUNITY CLINIC

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax:
After Hours Phone: (760)
631-5000
Website:
www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-TH 8AM-8PM, F
8AM-5PM, SA 9AM-4PM

NAUDIN, VERONICA L

Provider ID: 84118
Provider Gender: Female
License number: G75489
NPI: 1093755878
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr, Scripps Memorial
Hospital Encinitas, Rady
Childrens Hospital San Diego
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
2067 W VISTA WAY STE 180
VISTA, CA 92083-6033
Phone: (760) 945-3434
Fax: (760) 945-6761
After Hours Phone: (760)
945-3434
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R, T

Hours: M-SA 9AM-5PM
PARK, SUE A
Provider ID: 206338
Provider Gender: Female
License number: A64003
NPI: 1538176201
Provider English Spoken: Yes
Provider Language(s) Spoken:
Korean, Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-VISTA COMMUNITY
CLINIC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax:
After Hours Phone: (760)
631-5000
Website:
www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-TH 8AM-8PM, F
8AM-5PM, SA 9AM-4PM

RAHIMI, NASSRIN

Provider ID: 206338
Provider Gender: Female
License number: A56214
NPI: 1063438166
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr
Board Certified Specialty: No
IHP-VISTA COMMUNITY

CLINIC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax:
After Hours Phone: (760)
631-5000
Website:
www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-TH 8AM-8PM, F
8AM-5PM, SA 9AM-4PM

RAYA-MORONES, RUBY A

Provider ID: 206338
Provider Gender: Female
License number: G51286
NPI: 1164467791
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Pih Health
Hospital - Whittier, Marian
Regional Medical Center,
Whittier Hospital Medical Center,
Providence St Jude Medical
Center
Board Certified Specialty: No
IHP-VISTA COMMUNITY
CLINIC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax:
After Hours Phone: (760)
631-5000
Website:
www.vistacommunityclinic.org
Email:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-TH 8AM-8PM, F
8AM-5PM, SA 9AM-4PM

NPI: 1063552800
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-VISTA COMMUNITY
CLINIC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (844) 308-5003

Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M,W-F 8AM-5PM, TU
10:30AM-7:30PM, SA 9AM-5PM

PHYSICIANS ASSISTANT

WALLACE, STEPHANIE C

Provider ID: 206338
Provider Gender: Female
License number: PA19629
NPI: 1518104942
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr
Board Certified Specialty: No
IHP-VISTA COMMUNITY
CLINIC

1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000

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

Website:
www.vistacommunityclinic.org

Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-TH 8AM-8PM, F
8AM-5PM, SA 9AM-4PM

WEAVER, APRIL H

Provider ID: 206338
Provider Gender: Female
License number: PA20775

Fax:
After Hours Phone: (844)
308-5003
Website:
www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-TH 8AM-8PM, F
8AM-5PM, SA 9AM-4PM

WEAVER, APRIL H

Provider ID: 400339
Provider Gender: Female
License number: PA20775
NPI: 1063552800
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-VISTA COMMUNITY
CLINIC
134 GRAPEVINE RD
VISTA, CA 92083-4004
Phone: (760) 631-5000
Fax:
After Hours Phone: (760)
631-5000

PODIATRIST

MILLER, JULIE A

Provider ID: 206338
Provider Gender: Female
License number: DPM3999
NPI: 1619115664
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas, Tri
City Medical Ctr
Board Certified Specialty: No
IHP-VISTA COMMUNITY
CLINIC

1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000

Fax:
After Hours Phone: (760)
631-5000
Website:
www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-TH 8AM-8PM, F
8AM-5PM, SA 9AM-4PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

ALPINE

CERTIFIED NURSE PRACTITIONER

NACE, MICHAEL A , NPA

Provider ID: 240033
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1620 ALPINE BLVD STE 110
ALPINE, CA 91901-1103
Phone: (619) 445-6200
Fax:
After Hours Phone: (619)
445-6200
Provider Gender: Male
License number: NP11492
NPI: 1912929936
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

OPHTHALMOLOGY

BINDER, NICHOLAS R

Provider ID: 214259
Board Certified Specialty: No
HEALTH EXCEL IPA INC
1620 ALPINE BLVD STE 117
ALPINE, CA 91901-1103

Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone: (619)
445-2687
Provider Gender: Male
License number: A124698
NPI: 1306076716
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Grossmont
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

BINDER, NICHOLAS R , MD

Provider ID: 268753
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1620 ALPINE BLVD STE 117
ALPINE, CA 91901-1103
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone: (619)
445-2687
Provider Gender: Male
License number: A124698
NPI: 1306076716
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Grossmont

Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

CHANG, TOM S , MD

Provider ID: 270362
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1620 ALPINE BLVD STE 117
ALPINE, CA 91901-1103
Phone: (800) 897-2020
Fax: (844) 897-3788
After Hours Phone: (800)
897-2020
Provider Gender: Male
License number: A69909
NPI: 1609848969
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Armenian, Cantonese,
Chinese, Croatian, Korean,
Mandarin, Spanish
Cultural Competency: No
Hospital Affiliation: San Gabriel
Valley Med Ctr, Providence Little
Co Of Mary Med Ctr Torrance,
Methodist Hosp Of Southern
California, Hollywood
Presbyterian Med Ctr, Desert
Regional Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

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D. Directorio de proveedores de atención especializada

<p> <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc </p>	<p> 1620 ALPINE BLVD STE 117 ALPINE, CA 91901-1103 <i>Phone:</i> (619) 445-2687 <i>Fax:</i> (619) 445-0801 <i>After Hours Phone:</i> (619) 445-2687 <i>Provider Gender:</i> Male <i>License number:</i> G52627 <i>NPI:</i> 1982636031 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Tagalog, Vietnamese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Medi-Cal Open Panel: Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd </p>	<p> Armenian, Cantonese, Chinese, Indonesian, Mandarin, Spanish, Tagalog, Vietnamese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Scripps Memorial Hospital, Sharp Memorial Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd </p>
<p> MILLER, DOUGLAS G <i>Provider ID:</i> 262447 <i>Board Certified Specialty:</i> No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 1620 ALPINE BLVD STE 117 ALPINE, CA 91901-1103 <i>Phone:</i> (619) 445-2687 <i>Fax:</i> (619) 445-0801 <i>After Hours Phone:</i> (619) 445-2687 <i>Provider Gender:</i> Male <i>License number:</i> G52627 <i>NPI:</i> 1982636031 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Tagalog, Vietnamese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Medi-Cal Open Panel: Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd </p>	<p> MORRISON-REYES, JOSHUA A <i>Provider ID:</i> 108009 <i>Board Certified Specialty:</i> No WEST COAST EYE CARE ASSOCS MED GRP 1620 ALPINE BLVD STE 117 ALPINE, CA 91901-1103 <i>Phone:</i> (619) 445-2687 <i>Fax:</i> (619) 697-2410 <i>After Hours Phone:</i> (619) 445-2687 <i>Provider Gender:</i> Male <i>License number:</i> A125435 <i>NPI:</i> 1235366782 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> </p>	<p> PATEL, GITANE <i>Provider ID:</i> 244861 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 1620 ALPINE BLVD STE 117 ALPINE, CA 91901-1103 <i>Phone:</i> (800) 898-2020 <i>Fax:</i> (844) 897-3788 <i>After Hours Phone:</i> (800) 898-2020 <i>Provider Gender:</i> Male <i>License number:</i> A108603 <i>NPI:</i> 1710171434 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic, Gujarati, Spanish, Tagalog, Vietnamese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Paradise Valley Hospital, Scripps Memorial Hospital <i>Medi-Cal Open Panel:</i> Yes </p>
<p> MILLER, DOUGLAS G , MD <i>Provider ID:</i> 268957 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC </p>		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: 0/999
American Sign Language (ASL):
 No

Accessibility:
Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc, Imperial
 Health Holdings Medical
 Group-Sd

PATEL, GITANE

Provider ID: 262317

Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD

1620 ALPINE BLVD STE 117
 ALPINE, CA 91901-1103

Phone: (800) 898-2020

Fax: (844) 897-3788

After Hours Phone: (800)
 898-2020

Provider Gender: Male

License number: A108603

NPI: 1710171434

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, Gujarati, Spanish,
 Tagalog, Vietnamese

Cultural Competency: No

Hospital Affiliation: Grossmont
 Hospital, Paradise Valley

Hospital, Scripps Memorial

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
 No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc, Imperial
 Health Holdings Medical
 Group-Sd

PATEL, GITANE, MD

Provider ID: 268739

Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 1620 ALPINE BLVD STE 117

ALPINE, CA 91901-1103

Phone: (800) 898-2020

Fax: (844) 897-3788

After Hours Phone: (800)
 898-2020

Provider Gender: Male

License number: A108603

NPI: 1710171434

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, Gujarati, Spanish,
 Tagalog, Vietnamese

Cultural Competency: No

Hospital Affiliation: Grossmont
 Hospital, Paradise Valley

Hospital, Scripps Memorial

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
 No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc, Imperial

Health Holdings Medical

Group-Sd

PATEL, SARJAN H

Provider ID: 262408

Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD
 1620 ALPINE BLVD STE 117
 ALPINE, CA 91901-1103

Phone: (619) 445-2687

Fax: (619) 445-0801

After Hours Phone: (619)

445-2687

Provider Gender: Male

License number: A114976

NPI: 1316199326

Provider English Spoken: Yes

Provider Language(s) Spoken:

Gujarati, Hindi, Spanish,
 Tagalog, Vietnamese

Cultural Competency: No

Hospital Affiliation: Alvarado

Hospital Llc, Grossmont Hospital,

Scripps Memorial Hospital,

Paradise Valley Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
 No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc, Imperial

Health Holdings Medical

Group-Sd

PATEL, SARJAN H , MD

Provider ID: 268803

Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 1620 ALPINE BLVD STE 117

ALPINE, CA 91901-1103

Phone: (619) 445-2687

Fax: (619) 445-0801

After Hours Phone: (619)

445-2687

Provider Gender: Male

License number: A114976

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1316199326
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Gujarati, Hindi, Spanish, Tagalog, Vietnamese
 Cultural Competency: No
 Hospital Affiliation: Alvarado Hospital Llc, Grossmont Hospital, Scripps Memorial Hospital, Paradise Valley Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

PRABHU, SUJATA P
 Provider ID: 262391
 Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 1620 ALPINE BLVD STE 117
 ALPINE, CA 91901-1103
 Phone: (619) 445-2687
 Fax: (619) 697-2410
 After Hours Phone: (619) 445-2687
 Provider Gender: Female
 License number: A115965
 NPI: 1982872552
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish, Tagalog, Telugu, Vietnamese
 Cultural Competency: No
 Hospital Affiliation: Paradise Valley Hospital, Alvarado

Community Hospital, Scripps Memorial Hospital, Grossmont Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

PRABHU, SUJATA P , MD
 Provider ID: 268918
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 1620 ALPINE BLVD STE 117
 ALPINE, CA 91901-1103
 Phone: (619) 445-2687
 Fax: (619) 697-2410
 After Hours Phone: (619) 445-2687
 Provider Gender: Female
 License number: A115965
 NPI: 1982872552
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish, Tagalog, Telugu, Vietnamese
 Cultural Competency: No
 Hospital Affiliation: Paradise Valley Hospital, Alvarado Community Hospital, Scripps Memorial Hospital, Grossmont Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: Accessibility:

Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

WAINESS, REID M , MD
 Provider ID: 254761
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 1620 ALPINE BLVD STE 117
 ALPINE, CA 91901-1103
 Phone: (800) 898-2020
 Fax:
 After Hours Phone: (800) 898-2020
 Provider Gender: Male
 License number: A108766
 NPI: 1396935979
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Armenian, Cantonese, Chinese, Hebrew, Mandarin, Spanish, Vietnamese
 Cultural Competency: No
 Hospital Affiliation: San Gabriel Valley Med Ctr, Desert Regional Med Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 5/99
 American Sign Language (ASL): No
 Accessibility: Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

CAMPO

CERTIFIED NURSE

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

PRACTITIONER		
<p>NACE, MICHAEL A , NPA <i>Provider ID:</i> 240032 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 1388 BUCKMAN SPRINGS RD CAMPO, CA 91906-2028 <i>Phone:</i> (619) 445-6200 <i>Fax:</i> <i>After Hours Phone:</i> (619) 445-6200 <i>Provider Gender:</i> Male <i>License number:</i> NP11492 <i>NPI:</i> 1912929936 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Ⓜ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc</p>	<p><i>Phone:</i> (760) 631-3000 <i>Fax:</i> (760) 631-3016 <i>After Hours Phone:</i> (760) 631-3000 <i>Provider Gender:</i> Male <i>License number:</i> A128918 <i>NPI:</i> 1780903492 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Gujarati <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Tri City Medical Ctr, Scripps Green Hospital, Palomar Medical Center, Pomerado Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Ⓜ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc</p> <p>TRUONG, NGOC B <i>Provider ID:</i> 273552 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 6010 HIDDEN VALLEY RD STE 110 CARLSBAD, CA 92011-4219 <i>Phone:</i> (760) 607-5350 <i>Fax:</i> (760) 607-5365 <i>After Hours Phone:</i> (760) 607-5350 <i>Provider Gender:</i> Female <i>License number:</i> 20A13556 <i>NPI:</i> 1841634797 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Vietnamese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Ⓜ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc</p>	<p>Vietnamese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Ⓜ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc</p> <p>TRUONG, NGOC B <i>Provider ID:</i> 277809 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 6010 HIDDEN VALLEY RD STE 110 CARLSBAD, CA 92011-4219 <i>Phone:</i> (760) 607-5350 <i>Fax:</i> (760) 607-5365 <i>After Hours Phone:</i> (760) 607-5350 <i>Provider Gender:</i> Female <i>License number:</i> 20A13556 <i>NPI:</i> 1841634797 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Vietnamese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Ⓜ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc</p>
CARLSBAD		
ANESTHESIOLOGY PAIN MANAGEMENT		
<p>MADHAV, SANDIP J <i>Provider ID:</i> 265242 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 6010 HIDDEN VALLEY RD STE 200 CARLSBAD, CA 92011-4219</p>	<p>TRUONG, NGOC B <i>Provider ID:</i> 273552 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 6010 HIDDEN VALLEY RD STE 110 CARLSBAD, CA 92011-4219 <i>Phone:</i> (760) 607-5350 <i>Fax:</i> (760) 607-5365 <i>After Hours Phone:</i> (760) 607-5350 <i>Provider Gender:</i> Female <i>License number:</i> 20A13556 <i>NPI:</i> 1841634797 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i></p>	<p>Vietnamese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Ⓜ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

ANESTHESIOLOGY	2141 PALOMAR AIRPORT RD STE 350 CARLSBAD, CA 92011-1451	<i>American Sign Language (ASL):</i> No
<p>PRASAD, RUPA S <i>Provider ID:</i> 283629 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 6010 HIDDEN VALLEY RD STE 200 CARLSBAD, CA 92011-4219 <i>Phone:</i> (760) 631-3000 <i>Fax:</i> (760) 631-3016 <i>After Hours Phone:</i> (760) 631-3000 <i>Provider Gender:</i> Female <i>License number:</i> A152691 <i>NPI:</i> 1689037384 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Palomar Medical Center, Tri City Medical Ctr, Scripps Memorial Hospital Encinitas <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 18/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Health Excel Ipa Inc</p>	<p><i>Phone:</i> (760) 438-0078 <i>Fax:</i> (877) 839-6751 <i>After Hours Phone:</i> (760) 438-0078 <i>Provider Gender:</i> Female <i>License number:</i> BCBA16189 <i>NPI:</i> 1194130484 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p> <p>JACQUART, AMANDA <i>Provider ID:</i> 123284 <i>Board Certified Specialty:</i> No CENTER FOR AUTISM AND RELATED DISORDER 5140 AVENIDA ENCINAS CARLSBAD, CA 92008-4372 <i>Phone:</i> (760) 795-9898 <i>Fax:</i> (818) 449-0994 <i>After Hours Phone:</i> (760) 795-9898 <i>Provider Gender:</i> Female <i>License number:</i> BCBA11725364 <i>NPI:</i> 1154854271 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None</p>	<p><i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p> <hr/> <p style="text-align: center;">CERTIFIED NURSE PRACTITIONER</p> <hr/> <p>BATAC, NADINE M <i>Provider ID:</i> 254563 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 6010 HIDDEN VALLEY RD STE 110 CARLSBAD, CA 92011-4219 <i>Phone:</i> (858) 432-7880 <i>Fax:</i> (858) 432-7868 <i>After Hours Phone:</i> (858) 432-7880 <i>Provider Gender:</i> Female <i>License number:</i> NP21763 <i>NPI:</i> 1942657937 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital Chula Vista <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 18/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Health Excel Ipa Inc</p>
<p style="text-align: center;">CERTIFIED BEHAVIORAL ANALYST MASTERS</p> <p>EVANS, MELISSA <i>Provider ID:</i> 122850 <i>Board Certified Specialty:</i> No MAXIM HEALTHCARE SERVICES INC</p>	<p><i>Provider Gender:</i> Female <i>License number:</i> BCBA11725364 <i>NPI:</i> 1154854271 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None</p>	<p><i>Medical Group(s):</i> <i>IPA:</i> Health Excel Ipa Inc</p> <p>BIERMAN, ANDREW, NPA <i>Provider ID:</i> 247291</p>

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D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
6010 HIDDEN VALLEY RD STE
200
CARLSBAD, CA 92011-4219
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760)
631-3000
Provider Gender: Male
License number: NP95011909
NPI: 1306408505
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 18/200
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

BIERMAN, ANDREW

Provider ID: 252271
Board Certified Specialty: No
HEALTH EXCEL IPA INC
6010 HIDDEN VALLEY RD STE
200
CARLSBAD, CA 92011-4219
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760)
631-3000
Provider Gender: Male
License number: NP95011909
NPI: 1306408505
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 18/200
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

BINAVI, HOWNAZ Z , NPA

Provider ID: 265369
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
6010 HIDDEN VALLEY RD STE
120
CARLSBAD, CA 92011-4219
Phone: (760) 884-5990
Fax: (760) 448-4404
After Hours Phone: (760)
884-5990
Provider Gender: Female
License number: NP95010956
NPI: 1083276273
Provider English Spoken: Yes
Provider Language(s) Spoken:
Kurdish, Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

BINAVI, HOWNAZ Z

Provider ID: 272946
Board Certified Specialty: No
HEALTH EXCEL IPA INC
6010 HIDDEN VALLEY RD STE
120
CARLSBAD, CA 92011-4219
Phone: (760) 884-5990
Fax: (760) 448-4404
After Hours Phone: (760)
884-5990
Provider Gender: Female
License number: NP95010956
NPI: 1083276273
Provider English Spoken: Yes
Provider Language(s) Spoken:
Kurdish, Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

BISHOP, LESLIE A , NPA

Provider ID: 243217
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
6010 HIDDEN VALLEY RD STE
200
CARLSBAD, CA 92011-4219
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760)
631-3000
Provider Gender: Female
License number: NP95010047

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1669941878
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Pomerado
Hospital, Tri City Medical Ctr,
Palomar Medical Center, Scripps
Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 18/200
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

BISHOP, LESLIE A

Provider ID: 252886
Board Certified Specialty: No
HEALTH EXCEL IPA INC
6010 HIDDEN VALLEY RD STE
200
CARLSBAD, CA 92011-4219
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760)
631-3000
Provider Gender: Female
License number: NP95010047
NPI: 1669941878
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/110
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

HOOPER, BONNIE J
Provider ID: 269842
Board Certified Specialty: No
HEALTH EXCEL IPA INC
6010 HIDDEN VALLEY RD STE
120
CARLSBAD, CA 92011-4219
Phone: (760) 884-5990
Fax: (760) 448-4404
After Hours Phone: (760)
884-5990
Provider Gender: Female
License number: NP6495
NPI: 1821062878
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

BISHOP, LESLIE A
Provider ID: 252886
Board Certified Specialty: No
HEALTH EXCEL IPA INC
6010 HIDDEN VALLEY RD STE
200
CARLSBAD, CA 92011-4219
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760)
631-3000
Provider Gender: Female
License number: NP95010047
NPI: 1669941878
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/110
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

HOOPER, BONNIE J , NPA
Provider ID: 275252
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
6010 HIDDEN VALLEY RD STE
120
CARLSBAD, CA 92011-4219

Phone: (760) 884-5990
Fax: (760) 448-4404
After Hours Phone: (760)
884-5990
Provider Gender: Female
License number: NP6495
NPI: 1821062878
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

MCNALLY, PAUL D

Provider ID: 115263
Board Certified Specialty: No
UCSD MEDICAL GROUP
6010 HIDDEN VALLEY RD STE
200
CARLSBAD, CA 92011-4219
Phone: (619) 543-5540
Fax:
After Hours Phone: (619)
543-5540
Provider Gender: Male
License number: RN706288
NPI: 1588893788
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Paradise
Valley Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>No ☯ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>	<p><i>Phone:</i> (760) 631-3000 <i>Fax:</i> (760) 631-3016 <i>After Hours Phone:</i> (760) 631-3000 <i>Provider Gender:</i> Female <i>License number:</i> NP95014065 <i>NPI:</i> 1265082838 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Tri City Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 18/200 <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc</p>	<p>Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> W <i>Hours:</i> M-F 7:30AM-4:30PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc</p>
<p>MCNALLY, PAUL D <i>Provider ID:</i> 115263 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 6010 HIDDEN VALLEY RD STE 200 CARLSBAD, CA 92011-4219 <i>Phone:</i> (619) 543-5540 <i>Fax:</i> <i>After Hours Phone:</i> (619) 543-5540 <i>Provider Gender:</i> Male <i>License number:</i> NP19028 <i>NPI:</i> 1588893788 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Paradise Valley Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>	<p>ALASANTRO, LORI H <i>Provider ID:</i> 252909 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 6010 HIDDEN VALLEY RD STE 200 CARLSBAD, CA 92011-4219 <i>Phone:</i> (760) 631-3000 <i>Fax:</i> (760) 631-3016 <i>After Hours Phone:</i> (760) 631-3000 <i>Provider Gender:</i> Female <i>License number:</i> PSY25817 <i>NPI:</i> 1669807111 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital Encinitas <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 18/999 <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc</p>	<p>ALASANTRO, LORI H <i>Provider ID:</i> 103426 <i>Board Certified Specialty:</i> No NORTH COUNTY NEUROLOGY ASSOCS MED GRP 6010 HIDDEN VALLEY RD STE 200 CARLSBAD, CA 92011-4219 <i>Phone:</i> (760) 631-3000 <i>Fax:</i> <i>After Hours Phone:</i> (760) 631-3000 <i>Provider Gender:</i> Female <i>License number:</i> PSY25817 <i>NPI:</i> 1669807111 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Tri City</p>
<hr/> <p>CLINICAL NEUROPSYCHOLOGIST</p> <hr/>		
<p>ROSS, JESSICA L <i>Provider ID:</i> 285921 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 6010 HIDDEN VALLEY RD STE 200 CARLSBAD, CA 92011-4219</p>	<p>ALASANTRO, LORI H <i>Provider ID:</i> 103426 <i>Board Certified Specialty:</i> No NORTH COUNTY NEUROLOGY ASSOCS MED GRP 6010 HIDDEN VALLEY RD STE 200 CARLSBAD, CA 92011-4219 <i>Phone:</i> (760) 631-3000 <i>Fax:</i> <i>After Hours Phone:</i> (760) 631-3000 <i>Provider Gender:</i> Female <i>License number:</i> PSY25817 <i>NPI:</i> 1669807111 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Tri City</p>	<p>ALASANTRO, LORI H <i>Provider ID:</i> 252909 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 6010 HIDDEN VALLEY RD STE 200 CARLSBAD, CA 92011-4219 <i>Phone:</i> (760) 631-3000 <i>Fax:</i> (760) 631-3016 <i>After Hours Phone:</i> (760) 631-3000 <i>Provider Gender:</i> Female <i>License number:</i> PSY25817 <i>NPI:</i> 1669807111 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital Encinitas <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 18/999 <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc</p>

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D. Directorio de proveedores de atención especializada

QUESNELL, TARA A

Provider ID: 253082
Board Certified Specialty: No
HEALTH EXCEL IPA INC
6010 HIDDEN VALLEY RD STE 200
CARLSBAD, CA 92011-4219
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760) 631-3000
Provider Gender: Female
License number: 20A13609
NPI: 1619288172
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Palomar Medical Center, Pomerado Hospital, Scripps Memorial Hospital Encinitas, Palomar Health Downtown Campus
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

DERMATOLOGY

BROUHA, BROOK L , MD

Provider ID: 267945
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
6010 HIDDEN VALLEY RD STE 120

CARLSBAD, CA 92011-4219
Phone: (760) 884-5990
Fax: (760) 448-4404
After Hours Phone: (760) 884-5990
Provider Gender: Male
License number: A97902
NPI: 1114173937
Provider English Spoken: Yes
Provider Language(s) Spoken: French
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

BROUHA, BROOK L

Provider ID: 272987
Board Certified Specialty: No
HEALTH EXCEL IPA INC
6010 HIDDEN VALLEY RD STE 120
CARLSBAD, CA 92011-4219
Phone: (760) 884-5990
Fax: (760) 448-4404
After Hours Phone: (760) 884-5990
Provider Gender: Male
License number: A97902
NPI: 1114173937
Provider English Spoken: Yes
Provider Language(s) Spoken: French

Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

RILEY, JESSICA A

Provider ID: 265582
Board Certified Specialty: No
HEALTH EXCEL IPA INC
6010 HIDDEN VALLEY RD STE 120
CARLSBAD, CA 92011-4219
Phone: (760) 884-5990
Fax: (760) 448-4404
After Hours Phone: (760) 884-5990
Provider Gender: Female
License number: 20A16345
NPI: 1548677438
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Email:
Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc

FAMILY PRACTICE

MADHAV, KINJAL S , MD
Provider ID: 244004
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 6010 HIDDEN VALLEY RD STE
 200
 CARLSBAD, CA 92011-4219
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760)
 631-3000
Provider Gender: Female
License number: A132338
NPI: 1124385182
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Gujarati, Hindi, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital Encinitas, Tri
 City Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/200
American Sign Language (ASL):
 No

⚡ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc

FEMALE PELVIC MED AND RECONSTRUCTIVE SURG

MOUKARZEL, ELIAS N , MD
Provider ID: 269151

Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 6125 PASEO DEL NORTE STE
 140
 CARLSBAD, CA 92011-1119
Phone: (760) 352-4103
Fax: (760) 545-0258
After Hours Phone: (760)
 352-4103
Provider Gender: Male
License number: C50303
NPI: 1205912847
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Arabic, French, Spanish
Cultural Competency: No
Hospital Affiliation: El Centro
 Regional Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL):
 No
 ⚡ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc

HEARING AID DEALER / SUPPLIER

DAVIS, KELLE L
Provider ID: 253149
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 1820 MARRON RD
 CARLSBAD, CA 92008-1177
Phone: (760) 434-0125
Fax: (760) 434-4531
After Hours Phone: (760)
 434-0125
Provider Gender: Female
License number: HA6083
NPI: 1902853344

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ⚡ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc

DAVIS, KELLE L , MD
Provider ID: 268654
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 1820 MARRON RD STE 102
 CARLSBAD, CA 92008-1177
Phone: (760) 434-0125
Fax: (760) 434-4531
After Hours Phone: (760)
 434-0125
Provider Gender: Female
License number: HA6083
NPI: 1902853344
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ⚡ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

WYMAN, WENDY A

Provider ID: 252978
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 1820 MARRON RD STE 102
 CARLSBAD, CA 92008-1177
Phone: (760) 434-0125
Fax: (760) 434-4531
After Hours Phone: (760) 434-0125
Provider Gender: Female
License number: HA8365
NPI: 1922668631
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

NEUROLOGY

BLUMENFELD, ANDREW M

Provider ID: 252872
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 6010 HIDDEN VALLEY RD STE 200
 CARLSBAD, CA 92011-4219
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760) 631-3000
Provider Gender: Male
License number: A47863
NPI: 1164459913

Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

BLUMENFELD, ANDREW M , MD

Provider ID: 25914
Board Certified Specialty: No
 NORTH COUNTY NEUROLOGY ASSOCS MED GRP
 6010 HIDDEN VALLEY RD STE 200
 CARLSBAD, CA 92011-4219
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760) 631-3000
Provider Gender: Male
License number: A47863
NPI: 1164459913
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

BLUMENFELD, ANDREW M

Provider ID: 25914
Board Certified Specialty: No
 NORTH COUNTY NEUROLOGY ASSOCS MED GRP
 6010 HIDDEN VALLEY RD STE 200
 CARLSBAD, CA 92011-4219
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760) 631-3000
Provider Gender: Male
License number: A47863
NPI: 1164459913
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-F 7:30AM-4:30PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

CHOUDRY, BILAL A

Provider ID: 252908
Board Certified Specialty: No
 HEALTH EXCEL IPA INC

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D. Directorio de proveedores de atención especializada

<p>6010 HIDDEN VALLEY RD STE 200 CARLSBAD, CA 92011-4219 Phone: (760) 631-3000 Fax: (760) 631-3016 After Hours Phone: (760) 631-3000 Provider Gender: Male License number: A114607 NPI: 1396921144 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish, Urdu Cultural Competency: No Hospital Affiliation: Palomar Health Downtown Campus, Tri City Medical Ctr, Pomerado Hospital, Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Palomar Medical Center, Scripps Mercy Hospital Chula Vista Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Health Excel Ipa Inc</p> <p>CHOUDRY, BILAL A , MD Provider ID: 85292 Board Certified Specialty: No NORTH COUNTY NEUROLOGY ASSOCS MED GRP 6010 HIDDEN VALLEY RD STE 200 CARLSBAD, CA 92011-4219</p>	<p>Phone: (760) 631-3000 Fax: (760) 631-3016 After Hours Phone: (760) 631-3000 Provider Gender: Male License number: A114607 NPI: 1396921144 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish, Urdu Cultural Competency: No Hospital Affiliation: Palomar Health Downtown Campus, Tri City Medical Ctr, Pomerado Hospital, Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Palomar Medical Center, Scripps Mercy Hospital Chula Vista Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Health Excel Ipa Inc</p> <p>CHOUDRY, BILAL A Provider ID: 85292 Board Certified Specialty: No NORTH COUNTY NEUROLOGY ASSOCS MED GRP 6010 HIDDEN VALLEY RD STE 200 CARLSBAD, CA 92011-4219 Phone: (760) 631-3000 Fax: After Hours Phone: (760) 631-3000 Provider Gender: Male License number: A114607</p>	<p>NPI: 1396921144 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish, Urdu Cultural Competency: No Hospital Affiliation: Scripps Memorial Hospital Encinitas, Tri City Medical Ctr, Pomerado Hospital, Scripps Memorial Hospital, Palomar Medical Center, Scripps Mercy Hospital Chula Vista Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-F 7:30AM-4:30PM, SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Health Excel Ipa Inc</p> <p>DELANEY, MICHAEL W Provider ID: 252864 Board Certified Specialty: No HEALTH EXCEL IPA INC 6010 HIDDEN VALLEY RD STE 200 CARLSBAD, CA 92011-4219 Phone: (760) 631-6000 Fax: (760) 631-3016 After Hours Phone: (760) 631-6000 Provider Gender: Male License number: C146015 NPI: 1710157920 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Palomar Medical Center, Pomerado</p>
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D. Directorio de proveedores de atención especializada

<p>Hospital, Scripps Memorial Hospital Encinitas, Tri City Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 18/110 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc</p> <p>DELANEY, MICHAEL W , MD <i>Provider ID:</i> 269103 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 6010 HIDDEN VALLEY RD STE 200 CARLSBAD, CA 92011-4219 <i>Phone:</i> (760) 631-6000 <i>Fax:</i> (760) 631-3016 <i>After Hours Phone:</i> (760) 631-6000 <i>Provider Gender:</i> Male <i>License number:</i> C146015 <i>NPI:</i> 1710157920 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Palomar Medical Center, Pomerado Hospital, Scripps Memorial Hospital Encinitas, Tri City Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i></p>	<p><i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc</p> <p>DESADIER, LAURA L <i>Provider ID:</i> 102205 <i>Board Certified Specialty:</i> No NORTH COUNTY NEUROLOGY ASSOCS MED GRP 6010 HIDDEN VALLEY RD STE 200 CARLSBAD, CA 92011-4219 <i>Phone:</i> (760) 631-3000 <i>Fax:</i> (760) 631-3016 <i>After Hours Phone:</i> (760) 631-3000 <i>Provider Gender:</i> Female <i>License number:</i> 20A14045 <i>NPI:</i> 1245487982 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Tri City Medical Ctr, Pomerado Hospital, Scripps Memorial Hospital Encinitas, Palomar Medical Center <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-F 7:30AM-4:30PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc</p> <p>DESADIER, LAURA L <i>Provider ID:</i> 242451 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC</p>	<p>6010 HIDDEN VALLEY RD STE 200 CARLSBAD, CA 92011-4219 <i>Phone:</i> (760) 631-3000 <i>Fax:</i> (760) 631-3016 <i>After Hours Phone:</i> (760) 631-3000 <i>Provider Gender:</i> Female <i>License number:</i> 20A14045 <i>NPI:</i> 1245487982 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Tri City Medical Ctr, Palomar Health Downtown Campus, Scripps Memorial Hospital Encinitas, Palomar Medical Center, Pomerado Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 12/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc</p> <p>DESADIER, LAURA L <i>Provider ID:</i> 252879 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 6010 HIDDEN VALLEY RD STE 200 CARLSBAD, CA 92011-4219 <i>Phone:</i> (760) 631-3000 <i>Fax:</i> (760) 631-3016 <i>After Hours Phone:</i> (760) 631-3000 <i>Provider Gender:</i> Female <i>License number:</i> 20A14045 <i>NPI:</i> 1245487982</p>
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D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City
 Medical Ctr, Palomar Health
 Downtown Campus, Scripps
 Memorial Hospital Encinitas,
 Palomar Medical Center,
 Pomerado Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc

FRISHBERG, BENJAMIN M

Provider ID: 252878
Board Certified Specialty: Yes
 HEALTH EXCEL IPA INC
 6010 HIDDEN VALLEY RD STE
 200
 CARLSBAD, CA 92011-4219
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760)
 631-3000
Provider Gender: Male
License number: G43493
NPI: 1952346348
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital Encinitas, Tri
 City Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):

No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc

FRISHBERG, BENJAMIN M , MD

Provider ID: 65471
Board Certified Specialty: Yes
 NORTH COUNTY NEUROLOGY
 ASSOCS MED GRP
 6010 HIDDEN VALLEY RD STE
 200
 CARLSBAD, CA 92011-4219
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760)
 631-3000
Provider Gender: Male
License number: G43493
NPI: 1952346348
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital Encinitas, Tri
 City Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc

FRISHBERG, BENJAMIN M

Provider ID: 65471
Board Certified Specialty: Yes
 NORTH COUNTY NEUROLOGY
 ASSOCS MED GRP
 6010 HIDDEN VALLEY RD STE
 200
 CARLSBAD, CA 92011-4219
Phone: (760) 631-3000
Fax:
After Hours Phone: (760)
 631-3000
Provider Gender: Male
License number: G43493
NPI: 1952346348
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital Encinitas, Tri
 City Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility: W
Hours: M-F 7:30AM-4:30PM, SA
 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc

GOKALDAS, RESHMA, MD

Provider ID: 108460
Board Certified Specialty: No
 NORTH COUNTY NEUROLOGY
 ASSOCS MED GRP
 6010 HIDDEN VALLEY RD STE
 200
 CARLSBAD, CA 92011-4219

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D. Directorio de proveedores de atención especializada

Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760) 631-3000
Provider Gender: Female
License number: A138459
NPI: 1083015846
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Tri City Medical Ctr, Pomerado Hospital, Palomar Medical Center, Natividad Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

GUALBERTO, GARY C , MD

Provider ID: 103158
Board Certified Specialty: No
 NORTH COUNTY NEUROLOGY ASSOCS MED GRP
 6010 HIDDEN VALLEY RD STE 200
 CARLSBAD, CA 92011-4219
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760) 631-3000
Provider Gender: Male
License number: C138319
NPI: 1689875668
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish

Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Palomar Medical Center, Pomerado Hospital, Palomar Health Downtown Campus, Scripps Memorial Hospital Encinitas, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

GUALBERTO, GARY C

Provider ID: 103158
Board Certified Specialty: Yes
 NORTH COUNTY NEUROLOGY ASSOCS MED GRP
 6010 HIDDEN VALLEY RD STE 200
 CARLSBAD, CA 92011-4219
Phone: (760) 631-3000
Fax:
After Hours Phone: (760) 631-3000
Provider Gender: Male
License number: C138319
NPI: 1689875668
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Palomar Medical Center, Pomerado Hospital, Scripps Memorial Hospital Encinitas, Scripps Mercy Hospital Chula Vista

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 7:30AM-4:30PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

GUALBERTO, GARY C

Provider ID: 252880
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 6010 HIDDEN VALLEY RD STE 200
 CARLSBAD, CA 92011-4219
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760) 631-3000
Provider Gender: Male
License number: C138319
NPI: 1689875668
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Palomar Medical Center, Pomerado Hospital, Palomar Health Downtown Campus, Scripps Memorial Hospital Encinitas, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<i>Email:</i>	<i>Phone:</i> (858) 674-1289	Center, Pomerado Hospital,
<i>Medical Group(s):</i>	<i>Fax:</i> (858) 726-6221	Scripps Memorial Hospital
<i>IPA:</i> Community Care Ipa Llc,	<i>After Hours Phone:</i> (858)	Encinitas
Health Excel Ipa Inc	674-1289	<i>Medi-Cal Open Panel:</i> Yes
HALL, JACOB N	<i>Provider Gender:</i> Male	<i>Min/Max Age:</i> 0/999
<i>Provider ID:</i> 269788	<i>License number:</i> A55117	<i>American Sign Language (ASL):</i>
<i>Board Certified Specialty:</i> No	<i>NPI:</i> 1851320600	No
HEALTH EXCEL IPA INC	<i>Provider English Spoken:</i> Yes	<i>Accessibility:</i>
6010 HIDDEN VALLEY RD STE	<i>Provider Language(s) Spoken:</i>	<i>Hours:</i> M-SA 9AM-5PM
200	Spanish, Taiwanese	<i>Website:</i>
CARLSBAD, CA 92011-4219	<i>Cultural Competency:</i> No	<i>Email:</i>
<i>Phone:</i> (760) 631-3000	<i>Hospital Affiliation:</i> Palomar	<i>Medical Group(s):</i>
<i>Fax:</i> (760) 631-3016	Health Downtown Campus,	<i>IPA:</i> Community Care Ipa Llc,
<i>After Hours Phone:</i> (760)	Pomerado Hospital, Palomar	Health Excel Ipa Inc
631-3000	Medical Center	
<i>Provider Gender:</i> Male	<i>Medi-Cal Open Panel:</i> Yes	LANE, RICHARD A
<i>License number:</i> A132420	<i>Min/Max Age:</i> None	<i>Provider ID:</i> 276889
<i>NPI:</i> 1194068031	<i>American Sign Language (ASL):</i>	<i>Board Certified Specialty:</i> No
<i>Provider English Spoken:</i> Yes	No	COMMUNITY CARE IPA LLC
<i>Provider Language(s) Spoken:</i>	<i>Accessibility:</i>	6010 HIDDEN VALLEY RD STE
Spanish	<i>Hours:</i> M-SA 9AM-5PM	200
<i>Cultural Competency:</i> No	<i>Website:</i>	CARLSBAD, CA 92011-4219
<i>Hospital Affiliation:</i> Stanford	<i>Email:</i>	<i>Phone:</i> (760) 631-3000
Health Care, Lucile Salter	<i>Medical Group(s):</i>	<i>Fax:</i> (760) 631-3007
Packard Childrens Hosp,	<i>IPA:</i> Health Excel Ipa Inc	<i>After Hours Phone:</i> (760)
Temecula Valley Hospital Inc		631-3000
<i>Medi-Cal Open Panel:</i> Yes	LANE, RICHARD A	<i>Provider Gender:</i> Male
<i>Min/Max Age:</i> 0/999	<i>Provider ID:</i> 270431	<i>License number:</i> A160001
<i>American Sign Language (ASL):</i>	<i>Board Certified Specialty:</i> No	<i>NPI:</i> 1669859443
No	HEALTH EXCEL IPA INC	<i>Provider English Spoken:</i> Yes
<i>Accessibility:</i>	6010 HIDDEN VALLEY RD STE	<i>Provider Language(s) Spoken:</i>
<i>Hours:</i> M-SA 9AM-5PM	200	<i>Cultural Competency:</i> No
<i>Website:</i>	CARLSBAD, CA 92011-4219	<i>Hospital Affiliation:</i> Tri City
<i>Email:</i>	<i>Phone:</i> (760) 631-3000	Medical Ctr, Palomar Medical
<i>Medical Group(s):</i>	<i>Fax:</i> (760) 631-3007	Center, Pomerado Hospital,
<i>IPA:</i> Health Excel Ipa Inc	<i>After Hours Phone:</i> (760)	Scripps Memorial Hospital
	631-3000	Encinitas
	<i>Provider Gender:</i> Male	<i>Medi-Cal Open Panel:</i> Yes
HO, GILBERT J	<i>License number:</i> A160001	<i>Min/Max Age:</i> 0/200
<i>Provider ID:</i> 212732	<i>NPI:</i> 1669859443	<i>American Sign Language (ASL):</i>
<i>Board Certified Specialty:</i> No	<i>Provider English Spoken:</i> Yes	No
HEALTH EXCEL IPA INC	<i>Provider Language(s) Spoken:</i>	<i>Accessibility:</i>
5814 VAN ALLEN WAY STE 209	<i>Cultural Competency:</i> No	<i>Hours:</i> M-SA 9AM-5PM
CARLSBAD, CA 92008-7360	<i>Hospital Affiliation:</i> Tri City	<i>Website:</i>
	Medical Ctr, Palomar Medical	<i>Email:</i>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p><i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc</p> <p>LAWLER, ABIGAIL C <i>Provider ID:</i> 124983 <i>Board Certified Specialty:</i> No NORTH COUNTY NEUROLOGY ASSOCS MED GRP 6010 HIDDEN VALLEY RD STE 200 CARLSBAD, CA 92011-4219 <i>Phone:</i> (760) 631-3000 <i>Fax:</i> <i>After Hours Phone:</i> (760) 631-3000 <i>Provider Gender:</i> Female <i>License number:</i> A152080 <i>NPI:</i> 1568789741 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital Encinitas, Tri City Medical Ctr, Pomerado Hospital, Palomar Medical Center <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-F 7:30AM-4:30PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc</p> <p>LAWLER, ABIGAIL C , MD <i>Provider ID:</i> 124983 <i>Board Certified Specialty:</i> No NORTH COUNTY NEUROLOGY</p>	<p>ASSOCS MED GRP 6010 HIDDEN VALLEY RD STE 200 CARLSBAD, CA 92011-4219 <i>Phone:</i> (760) 631-3000 <i>Fax:</i> (760) 631-3016 <i>After Hours Phone:</i> (760) 631-3000 <i>Provider Gender:</i> Female <i>License number:</i> A152080 <i>NPI:</i> 1568789741 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital Encinitas, Tri City Medical Ctr, Pomerado Hospital, Palomar Medical Center <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc</p> <p>LAWLER, ABIGAIL C <i>Provider ID:</i> 252955 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 6010 HIDDEN VALLEY RD STE 200 CARLSBAD, CA 92011-4219 <i>Phone:</i> (760) 631-3000 <i>Fax:</i> (760) 631-3016 <i>After Hours Phone:</i> (760) 631-3000 <i>Provider Gender:</i> Female <i>License number:</i> A152080</p>	<p><i>NPI:</i> 1568789741 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Pomerado Hospital, Palomar Medical Center, Scripps Memorial Hospital Encinitas, Tri City Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 18/200 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc</p> <p>LOBATZ, MICHAEL A <i>Provider ID:</i> 252974 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 6010 HIDDEN VALLEY RD STE 200 CARLSBAD, CA 92011-4219 <i>Phone:</i> (760) 631-3000 <i>Fax:</i> (760) 631-3016 <i>After Hours Phone:</i> (760) 631-3002 <i>Provider Gender:</i> Male <i>License number:</i> G38353 <i>NPI:</i> 1619912078 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Hebrew, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 18/110</p>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

LOBATZ, MICHAEL A

Provider ID: 52424

Board Certified Specialty: No
NORTH COUNTY NEUROLOGY
ASSOCS MED GRP

6010 HIDDEN VALLEY RD STE
200

CARLSBAD, CA 92011-4219

Phone: (760) 631-3000

Fax: (760) 631-3016

After Hours Phone: (760)
631-3000

Provider Gender: Male

License number: G38353

NPI: 1619912078

Provider English Spoken: Yes

Provider Language(s) Spoken:

Hebrew, Spanish

Cultural Competency: No

Hospital Affiliation: Scripps
Memorial Hospital Encinitas,

Scripps Memorial Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-F 7:30AM-4:30PM, SA
9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

LOBATZ, MICHAEL A , MD

Provider ID: 52424

Board Certified Specialty: No
NORTH COUNTY NEUROLOGY
ASSOCS MED GRP

6010 HIDDEN VALLEY RD STE
200

CARLSBAD, CA 92011-4219

Phone: (760) 631-3000

Fax: (760) 631-3016

After Hours Phone: (760)

631-3002

Provider Gender: Male

License number: G38353

NPI: 1619912078

Provider English Spoken: Yes

Provider Language(s) Spoken:

Hebrew, Spanish

Cultural Competency: No

Hospital Affiliation: Scripps
Memorial Hospital, Scripps
Memorial Hospital Encinitas

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

MEHTA, RITVIK P

Provider ID: 240603

Board Certified Specialty: No
HEALTH EXCEL IPA INC
2390 FARADAY AVE

CARLSBAD, CA 92008-7216

Phone: (858) 909-0770

Fax: (858) 909-0880

After Hours Phone: (858)

909-0770

Provider Gender: Male

License number: A93336

NPI: 1245393586

Provider English Spoken: Yes

Provider Language(s) Spoken:

Gujarati, Hindi

Cultural Competency: No

Hospital Affiliation: Sharp
Memorial Hospital, Rady
Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

NIELSEN, AMY C

Provider ID: 277704

Board Certified Specialty: No
HEALTH EXCEL IPA INC

6010 HIDDEN VALLEY RD STE
200

CARLSBAD, CA 92011-4219

Phone: (760) 631-3000

Fax: (760) 631-3016

After Hours Phone: (760)

631-3000

Provider Gender: Female

License number: 20A11494

NPI: 1730110529

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps
Memorial Hospital Encinitas, Tri
City Medical Ctr, Pomerado

Hospital, Palomar Medical

Center, Scripps Memorial

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc</p> <p>NIELSEN, AMY C <i>Provider ID:</i> 74893 <i>Board Certified Specialty:</i> No NORTH COUNTY NEUROLOGY ASSOCS MED GRP 6010 HIDDEN VALLEY RD STE 200 CARLSBAD, CA 92011-4219 <i>Phone:</i> (760) 631-3000 <i>Fax:</i> (760) 631-3016 <i>After Hours Phone:</i> (760) 631-3000 <i>Provider Gender:</i> Female <i>License number:</i> 20A11494 <i>NPI:</i> 1730110529 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital Encinitas, Tri City Medical Ctr, Pomerado Hospital, Palomar Medical Center, Scripps Memorial Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-F 7:30AM-4:30PM, SA 9AM-5PM</p>	<p><i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc</p> <p>NIELSEN, AMY C <i>Provider ID:</i> 74893 <i>Board Certified Specialty:</i> No NORTH COUNTY NEUROLOGY ASSOCS MED GRP 6010 HIDDEN VALLEY RD STE 200 CARLSBAD, CA 92011-4219 <i>Phone:</i> (760) 631-3000 <i>Fax:</i> (760) 631-3016 <i>After Hours Phone:</i> (760) 631-3000 <i>Provider Gender:</i> Female <i>License number:</i> 20A11494 <i>NPI:</i> 1730110529 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital Encinitas, Tri City Medical Ctr, Pomerado Hospital, Palomar Medical Center, Scripps Memorial Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc</p> <p>OH, IRENE J <i>Provider ID:</i> 253017</p>	<p><i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 6010 HIDDEN VALLEY RD STE 200 CARLSBAD, CA 92011-4219 <i>Phone:</i> (760) 631-3000 <i>Fax:</i> (760) 631-3016 <i>After Hours Phone:</i> (760) 631-3000 <i>Provider Gender:</i> Female <i>License number:</i> A106450 <i>NPI:</i> 1306089008 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Tri City Medical Ctr, Scripps Memorial Hospital Encinitas, Palomar Health Downtown Campus, Pomerado Hospital, Palomar Medical Center <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc</p> <p>OH, IRENE J <i>Provider ID:</i> 52430 <i>Board Certified Specialty:</i> No NORTH COUNTY NEUROLOGY ASSOCS MED GRP 6010 HIDDEN VALLEY RD STE 200 CARLSBAD, CA 92011-4219</p>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (760) 631-3000
 Fax: (760) 631-3016
 After Hours Phone: (760) 631-3000
 Provider Gender: Female
 License number: A106450
 NPI: 1306089008
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital Encinitas, Pomerado Hospital, Palomar Medical Center
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-F 7:30AM-4:30PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc

OH, IRENE J , MD

Provider ID: 52430
 Board Certified Specialty: No
 NORTH COUNTY NEUROLOGY ASSOCS MED GRP
 6010 HIDDEN VALLEY RD STE 200
 CARLSBAD, CA 92011-4219
 Phone: (760) 631-3000
 Fax: (760) 631-3016
 After Hours Phone: (760) 631-3000
 Provider Gender: Female
 License number: A106450
 NPI: 1306089008
 Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital Encinitas, Palomar Health Downtown Campus, Pomerado Hospital, Palomar Medical Center
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc

OMURO, ARTHUR K

Provider ID: 270477
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 6010 HIDDEN VALLEY RD STE 200
 CARLSBAD, CA 92011-4219
 Phone: (760) 631-3000
 Fax: (760) 631-3007
 After Hours Phone: (760) 631-3000
 Provider Gender: Male
 License number: 20A15164
 NPI: 1851785505
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital Encinitas, Pomerado Hospital, Palomar Medical Center, Tri City Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999

American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc

OMURO, ARTHUR K

Provider ID: 276907
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 6010 HIDDEN VALLEY RD STE 200
 CARLSBAD, CA 92011-4219
 Phone: (760) 631-3000
 Fax: (760) 631-3007
 After Hours Phone: (760) 631-3000

Provider Gender: Male
 License number: 20A15164
 NPI: 1851785505
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital Encinitas, Pomerado Hospital, Palomar Medical Center, Tri City Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc

PADUGA, REMIA S

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider ID: 252983
Board Certified Specialty: No
HEALTH EXCEL IPA INC
6010 HIDDEN VALLEY RD STE 200
CARLSBAD, CA 92011-4219
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760) 631-3000
Provider Gender: Female
License number: A113451
NPI: 1194933853
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus, Scripps Memorial Hospital Encinitas, Tri City Medical Ctr, Pomerado Hospital, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

PADUGA, REMIA S , MD

Provider ID: 57065
Board Certified Specialty: No
NORTH COUNTY NEUROLOGY ASSOCS MED GRP
6010 HIDDEN VALLEY RD STE 200
CARLSBAD, CA 92011-4219

Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760) 631-3000
Provider Gender: Female
License number: A113451
NPI: 1194933853
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus, Scripps Memorial Hospital Encinitas, Tri City Medical Ctr, Pomerado Hospital, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

PADUGA, REMIA S

Provider ID: 57065
Board Certified Specialty: No
NORTH COUNTY NEUROLOGY ASSOCS MED GRP
6010 HIDDEN VALLEY RD STE 200
CARLSBAD, CA 92011-4219
Phone: (760) 631-3000
Fax:
After Hours Phone: (760) 631-3000
Provider Gender: Female
License number: A113451
NPI: 1194933853
Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Tri City Medical Ctr, Pomerado Hospital, Palomar Medical Center
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 7:30AM-4:30PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

PHAM, ALISE K

Provider ID: 276490
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
6010 HIDDEN VALLEY RD STE 200
CARLSBAD, CA 92011-4219
Phone: (760) 631-3000
Fax: (760) 631-3007
After Hours Phone: (760) 631-3000
Provider Gender: Female
License number: 20A18259
NPI: 1184011363
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Pomerado Hospital, Palomar Medical Center, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc</p>	<p>QUESNELL, TARA A <i>Provider ID:</i> 109393 <i>Board Certified Specialty:</i> No NORTH COUNTY NEUROLOGY ASSOCS MED GRP 6010 HIDDEN VALLEY RD STE 200</p>	<p>CARLSBAD, CA 92011-4219 <i>Phone:</i> (760) 631-3000 <i>Fax:</i> (760) 631-3016 <i>After Hours Phone:</i> (760) 631-3000 <i>Provider Gender:</i> Male <i>License number:</i> G17059 <i>NPI:</i> 1609804848</p>
<p>QUESNELL, TARA A <i>Provider ID:</i> 109393 <i>Board Certified Specialty:</i> No NORTH COUNTY NEUROLOGY ASSOCS MED GRP 6010 HIDDEN VALLEY RD STE 200 CARLSBAD, CA 92011-4219 <i>Phone:</i> (760) 631-3000 <i>Fax:</i> <i>After Hours Phone:</i> (760) 631-3000 <i>Provider Gender:</i> Female <i>License number:</i> 20A13609 <i>NPI:</i> 1619288172 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Tri City Medical Ctr, Scripps Memorial Hospital Encinitas, Pomerado Hospital, Palomar Medical Center <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> W</p>	<p>CARLSBAD, CA 92011-4219 <i>Phone:</i> (760) 631-3000 <i>Fax:</i> (760) 631-3016 <i>After Hours Phone:</i> (760) 631-3000 <i>Provider Gender:</i> Female <i>License number:</i> 20A13609 <i>NPI:</i> 1619288172 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Tri City Medical Ctr, Palomar Medical Center, Pomerado Hospital, Scripps Memorial Hospital Encinitas, Palomar Health Downtown Campus <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No</p>	<p><i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Tri City Medical Ctr, Scripps Memorial Hospital Encinitas <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc</p>
<p><i>Hours:</i> M-F 7:30AM-4:30PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc</p>	<p>ROSENBERG, JAY H <i>Provider ID:</i> 31935 <i>Board Certified Specialty:</i> No NORTH COUNTY NEUROLOGY ASSOCS MED GRP 6010 HIDDEN VALLEY RD STE 200</p>	<p>SADOFF, MARK N <i>Provider ID:</i> 253701 <i>Board Certified Specialty:</i> Yes HEALTH EXCEL IPA INC 6010 HIDDEN VALLEY RD STE 200 CARLSBAD, CA 92011-4219 <i>Phone:</i> (760) 631-3000 <i>Fax:</i> (760) 631-3016 <i>After Hours Phone:</i> (760) 631-3000 <i>Provider Gender:</i> Male <i>License number:</i> G42818 <i>NPI:</i> 1497784946 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Tri City</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Ctr, Pomerado Hospital,
Scripps Memorial Hospital
Encinitas, Palomar Medical
Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

SADOFF, MARK N , MD

Provider ID: 40012

Board Certified Specialty: Yes

NORTH COUNTY NEUROLOGY

ASSOCS MED GRP

6010 HIDDEN VALLEY RD STE
200

CARLSBAD, CA 92011-4219

Phone: (760) 631-3000

Fax: (760) 631-3016

After Hours Phone: (760)

631-3000

Provider Gender: Male

License number: G42818

NPI: 1497784946

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Tri City

Medical Ctr, Pomerado Hospital,

Scripps Memorial Hospital

Encinitas, Palomar Medical

Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc

SADOFF, MARK N

Provider ID: 40012

Board Certified Specialty: No

NORTH COUNTY NEUROLOGY

ASSOCS MED GRP

6010 HIDDEN VALLEY RD STE
200

CARLSBAD, CA 92011-4219

Phone: (760) 631-3000

Fax: (760) 631-3016

After Hours Phone: (760)

631-3000

Provider Gender: Male

License number: G42818

NPI: 1497784946

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Tri City

Medical Ctr, Pomerado Hospital,

Scripps Memorial Hospital

Encinitas, Palomar Medical

Center

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-F 7:30AM-4:30PM, SA

9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc

SAHAGIAN, GREGORY A

Provider ID: 253742

Board Certified Specialty: No

HEALTH EXCEL IPA INC

6010 HIDDEN VALLEY RD STE
200

CARLSBAD, CA 92011-4219

Phone: (760) 631-3000

Fax: (760) 631-3016

After Hours Phone: (760)

631-3000

Provider Gender: Male

License number: A62263

NPI: 1831132109

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Tri City

Medical Ctr, Scripps Memorial

Hospital Encinitas, Pomerado

Hospital, Palomar Medical

Center, Rady Childrens Hospital

San Diego, Palomar Health

Downtown Campus

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc

SAHAGIAN, GREGORY A , MD

Provider ID: 65995

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

6010 HIDDEN VALLEY RD STE

200

CARLSBAD, CA 92011-4219

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (760) 631-3000
 Fax: (760) 631-3016
 After Hours Phone: (760) 631-3000
 Provider Gender: Male
 License number: A62263
 NPI: 1831132109
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital, Tri City Medical Ctr, Scripps Memorial Hospital Encinitas, Pomerado Hospital, Palomar Medical Center, Rady Childrens Hospital San Diego, Palomar Health Downtown Campus
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc

SAHAGIAN, GREGORY A
 Provider ID: 94241
 Board Certified Specialty: No
 NORTH COUNTY NEUROLOGY ASSOCS MED GRP
 6010 HIDDEN VALLEY RD STE 200
 CARLSBAD, CA 92011-4219
 Phone: (760) 631-3000
 Fax:
 After Hours Phone: (760) 631-3000
 Provider Gender: Male
 License number: A62263

NPI: 1831132109
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital, Tri City Medical Ctr, Scripps Memorial Hospital Encinitas, Pomerado Hospital, Palomar Medical Center, Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 7:30AM-4:30PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc

SCHIM, JACK D
 Provider ID: 252939
 Board Certified Specialty: Yes
 HEALTH EXCEL IPA INC
 6010 HIDDEN VALLEY RD STE 200
 CARLSBAD, CA 92011-4219
 Phone: (760) 631-3000
 Fax: (760) 631-3016
 After Hours Phone: (760) 631-3000
 Provider Gender: Male
 License number: G48807
 NPI: 1346276375
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital Encinitas, Tri

City Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc

SCHIM, JACK D
 Provider ID: 52446
 Board Certified Specialty: No
 NORTH COUNTY NEUROLOGY ASSOCS MED GRP
 6010 HIDDEN VALLEY RD STE 200
 CARLSBAD, CA 92011-4219
 Phone: (760) 631-3000
 Fax: (760) 631-3016
 After Hours Phone: (760) 631-3000
 Provider Gender: Male
 License number: G48807
 NPI: 1346276375
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital Encinitas, Tri City Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 7:30AM-4:30PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

SCHIM, JACK D , MD

Provider ID: 52446
Board Certified Specialty: Yes
NORTH COUNTY NEUROLOGY
ASSOCS MED GRP
6010 HIDDEN VALLEY RD STE
200
CARLSBAD, CA 92011-4219
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760)
631-3000
Provider Gender: Male
License number: G48807
NPI: 1346276375
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas, Tri
City Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

WANG, ANCHI

Provider ID: 52465
Board Certified Specialty: No
NORTH COUNTY NEUROLOGY
ASSOCS MED GRP
6010 HIDDEN VALLEY RD STE
200
CARLSBAD, CA 92011-4219

Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760)
631-3000
Provider Gender: Female
License number: A79381
NPI: 1093744542
Provider English Spoken: Yes
Provider Language(s) Spoken:
Mandarin, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas, Tri
City Medical Ctr, Pomerado
Hospital, Palomar Medical
Center
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 7:30AM-4:30PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

WANG, ANCHI

Provider ID: 52465
Board Certified Specialty: No
NORTH COUNTY NEUROLOGY
ASSOCS MED GRP
6010 HIDDEN VALLEY RD STE
200
CARLSBAD, CA 92011-4219
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760)
631-3000
Provider Gender: Female
License number: A79381
NPI: 1093744542
Provider English Spoken: Yes

Provider Language(s) Spoken:
Mandarin, Spanish
Cultural Competency: No
Hospital Affiliation: Palomar
Health Downtown Campus,
Scripps Memorial Hospital
Encinitas, Tri City Medical Ctr,
Pomerado Hospital, Palomar
Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

WANG, ANCHI, MD

Provider ID: 52465
Board Certified Specialty: No
NORTH COUNTY NEUROLOGY
ASSOCS MED GRP
6010 HIDDEN VALLEY RD STE
200
CARLSBAD, CA 92011-4219
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760)
631-3000
Provider Gender: Female
License number: A79381
NPI: 1093744542
Provider English Spoken: Yes
Provider Language(s) Spoken:
Mandarin, Spanish
Cultural Competency: No
Hospital Affiliation: Palomar
Health Downtown Campus,
Scripps Memorial Hospital
Encinitas, Tri City Medical Ctr,
Pomerado Hospital, Palomar

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D. Directorio de proveedores de atención especializada

Medical Center
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No

♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:

Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc

WANG, CHUNYANG T

Provider ID: 253007
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 6010 HIDDEN VALLEY RD STE
 200

CARLSBAD, CA 92011-4219
 Phone: (760) 631-3000
 Fax: (760) 631-3016
 After Hours Phone: (760)
 631-3000

Provider Gender: Female
 License number: A105660
 NPI: 1386890770
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Mandarin, Spanish

Cultural Competency: No
 Hospital Affiliation: Palomar
 Health Downtown Campus,
 Scripps Memorial Hospital
 Encinitas, Tri City Medical Ctr,
 Pomerado Hospital, Scripps
 Memorial Hospital, Palomar
 Medical Center

Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No

♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:

Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc

OTOLARYNGOLOGY

BANTHIA, VISHAL

Provider ID: 283694
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 2390 FARADAY AVE
 CARLSBAD, CA 92008-7216

Phone: (858) 909-0770
 Fax: (858) 909-0880
 After Hours Phone: (858)
 909-0770

Provider Gender: Male
 License number: A86814
 NPI: 1043396559

Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Washington
 Hospital, Cedars Sinai Medical
 Center, Scripps Memorial
 Hospital, Sharp Memorial
 Hospital, Temecula Valley
 Hospital Inc

Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No

♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:

Email:
 Medical Group(s):
 IPA: Health Excel Ipa Inc

DONALDSON, CHADWICK J , MD

Provider ID: 268146
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC

2390 FARADAY AVE
 CARLSBAD, CA 92008-7216
 Phone: (858) 909-0770
 Fax:

After Hours Phone: (858)
 909-0770

Provider Gender: Male
 License number: A84567
 NPI: 1891743910

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

Cultural Competency: No
 Hospital Affiliation: Temecula
 Valley Hospital Inc, Scripps
 Memorial Hospital, Southwest
 Healthcare System Murrieta,
 Southwest Healthcare System
 Wildomar, Sharp Memorial
 Hospital, Sharp Chula Vista Med
 Ctr

Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No

♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:

Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

RIEDLER, KIERSTEN L , MD

Provider ID: 256202
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 2390 FARADAY AVE
 CARLSBAD, CA 92008-7216

Phone: (858) 909-0770
 Fax: (858) 909-0880
 After Hours Phone: (858)
 909-0770

Provider Gender: Female
 License number: A135480
 NPI: 1437536216

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D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas, Sutter Roseville Medical Center, Mercy General Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

PHYSICAL MEDICINE / REHABILITATION

JAFFER, JIHAD, MD

Provider ID: 119557
Board Certified Specialty: No
 NORTH COUNTY NEUROLOGY ASSOCS MED GRP
 6010 HIDDEN VALLEY RD STE 200
 CARLSBAD, CA 92011-4219
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760) 631-3000
Provider Gender: Male
License number: A98822
NPI: 1366659294
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas,

Scripps Memorial Hospital, Palomar Medical Center, Pomerado Hospital, Tri City Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

JAFFER, JIHAD

Provider ID: 119557
Board Certified Specialty: No
 NORTH COUNTY NEUROLOGY ASSOCS MED GRP
 6010 HIDDEN VALLEY RD STE 200
 CARLSBAD, CA 92011-4219
Phone: (760) 631-3000
Fax:
After Hours Phone: (760) 631-3000
Provider Gender: Male
License number: A98822
NPI: 1366659294
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Pomerado Hospital, Tri City Medical Ctr, Palomar Medical Center
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

♿ Accessibility: W
Hours: M-F 7:30AM-4:30PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

JAFFER, JIHAD

Provider ID: 253006
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 6010 HIDDEN VALLEY RD STE 200
 CARLSBAD, CA 92011-4219
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760) 631-3000
Provider Gender: Male
License number: A98822
NPI: 1366659294
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Palomar Medical Center, Pomerado Hospital, Tri City Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/200
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

LUTFY, PATRICIA M

Provider ID: 254630
Board Certified Specialty: No
HEALTH EXCEL IPA INC
 6010 HIDDEN VALLEY RD STE 110
 CARLSBAD, CA 92011-4219
Phone: (619) 761-5308
Fax: (619) 325-1717
After Hours Phone: (619) 761-5308
Provider Gender: Female
License number: A133725
NPI: 1497024061
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

MADHAV, SANDIP J , MD

Provider ID: 256381
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 6010 HIDDEN VALLEY RD STE 200
 CARLSBAD, CA 92011-4219
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760) 631-3000
Provider Gender: Male
License number: A128918
NPI: 1780903492

Provider English Spoken: Yes
Provider Language(s) Spoken: Gujarati
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Tri City Medical Ctr, Scripps Green Hospital, Palomar Medical Center, Pomerado Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/200
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

RICHARDSON, HENRY A

Provider ID: 254570
Board Certified Specialty: No
HEALTH EXCEL IPA INC
 6010 HIDDEN VALLEY RD STE 110
 CARLSBAD, CA 92011-4219
Phone: (760) 607-5350
Fax: (760) 607-5365
After Hours Phone: (760) 607-5350
Provider Gender: Male
License number: A105294
NPI: 1407052459
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999

American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

PHYSICIANS ASSISTANT

BURNEY, MELISSA A

Provider ID: 277535
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 6010 HIDDEN VALLEY RD STE 200
 CARLSBAD, CA 92011-4219
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760) 631-3000
Provider Gender: Female
License number: PA58612
NPI: 1386260842
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

HEINEN, JOHN P , NPA

Provider ID: 241051
Board Certified Specialty: No
COMMUNITY CARE IPA LLC

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

6010 HIDDEN VALLEY RD STE 200
CARLSBAD, CA 92011-4219
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760) 631-3000
Provider Gender: Male
License number: PA10565
NPI: 1427096643
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
⚭ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

HEINEN, JOHN P

Provider ID: 252981
Board Certified Specialty: No
HEALTH EXCEL IPA INC
6010 HIDDEN VALLEY RD STE 200
CARLSBAD, CA 92011-4219
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760) 631-3000
Provider Gender: Male
License number: PA10565
NPI: 1427096643
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes

Min/Max Age: 18/200
American Sign Language (ASL):
No
⚭ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

HERMANSON, KATHLEEN H

Provider ID: 256205
Board Certified Specialty: No
HEALTH EXCEL IPA INC
6010 HIDDEN VALLEY RD STE 200
CARLSBAD, CA 92011-4219
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760) 631-3000
Provider Gender: Female
License number: PA51880
NPI: 1598160343
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
⚭ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

Provider ID: 252981
Board Certified Specialty: No
HEALTH EXCEL IPA INC
6010 HIDDEN VALLEY RD STE 200
CARLSBAD, CA 92011-4219
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760) 631-3000
Provider Gender: Male
License number: PA10565
NPI: 1427096643
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/200
American Sign Language (ASL):
No
⚭ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

HERMANSON, KATHLEEN H , NPA

Provider ID: 269004
Board Certified Specialty: No

COMMUNITY CARE IPA LLC
6010 HIDDEN VALLEY RD STE 200
CARLSBAD, CA 92011-4219
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760) 631-3000
Provider Gender: Female
License number: PA51880
NPI: 1598160343
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
⚭ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

HUANG, STEPHANIE K

Provider ID: 252989
Board Certified Specialty: No
HEALTH EXCEL IPA INC
6010 HIDDEN VALLEY RD STE 200
CARLSBAD, CA 92011-4219
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760) 631-3000
Provider Gender: Female
License number: PA21008
NPI: 1073826210
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:

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D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes
 Min/Max Age: 18/200
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc

INOCELDA, ANDREW G

Provider ID: 252919
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 6010 HIDDEN VALLEY RD STE
 200
 CARLSBAD, CA 92011-4219
 Phone: (760) 631-3000
 Fax: (760) 631-3016
 After Hours Phone: (760)
 631-3000
 Provider Gender: Male
 License number: PA19207
 NPI: 1497950208
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc

INOCELDA, ANDREW G , NPA

Provider ID: 269089
 Board Certified Specialty: No

COMMUNITY CARE IPA LLC
 6010 HIDDEN VALLEY RD STE
 200
 CARLSBAD, CA 92011-4219
 Phone: (760) 631-3000
 Fax: (760) 631-3016
 After Hours Phone: (760)
 631-3000
 Provider Gender: Male
 License number: PA19207
 NPI: 1497950208
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc

RAI, PHILIPPA

Provider ID: 238506
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 1905 CALLE BARCELONA STE
 211
 CARLSBAD, CA 92009-8452
 Phone: (858) 554-1212
 Fax: (858) 795-1195
 After Hours Phone: (858)
 554-1212
 Provider Gender: Female
 License number: PA56698
 NPI: 1174083836
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps

Memorial Hospital
 Medi-Cal Open Panel: No
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Health Excel Ipa Inc

PULMONARY DISEASES

HSING, ANDREW Y

Provider ID: 125301
 Board Certified Specialty: No
 NORTH COUNTY NEUROLOGY
 ASSOCS MED GRP
 6010 HIDDEN VALLEY RD STE
 200
 CARLSBAD, CA 92011-4219
 Phone: (760) 631-3000
 Fax: (760) 631-3016
 After Hours Phone: (760)
 631-3000
 Provider Gender: Male
 License number: A127271
 NPI: 1790769131
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps
 Memorial Hospital Encinitas
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc,

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D. Directorio de proveedores de atención especializada

Health Excel Ipa Inc

RADIOLOGY DIAGNOSTIC X-RAY

BIGONI, BRIAN J

Provider ID: 26550

Board Certified Specialty: No

CARLSBAD IMAGING CTR

6010 HIDDEN VALLEY RD STE
125

CARLSBAD, CA 92011-4219

Phone: (760) 730-3536

Fax: (760) 720-4833

After Hours Phone: (760)
730-3536

Provider Gender: Male

License number: A55249

NPI: 1083713002

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi, Spanish

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Rady

Childrens Hospital San Diego,

Scripps Green Hospital,

Providence Mission Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

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

9AM-5PM

Website:

<https://carlsbadimaging.com/>

Email:

Medical Group(s):

IPA:

MAGHSOUDY, AFSANEH

Provider ID: 27175

Board Certified Specialty: No

CARLSBAD IMAGING CTR

6010 HIDDEN VALLEY RD STE
125

CARLSBAD, CA 92011-4219

Phone: (760) 730-3536

Fax: (760) 720-4833

After Hours Phone: (760)

730-3536

Provider Gender: Female

License number: A60622

NPI: 1386742401

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

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

9AM-5PM

Website:

<https://carlsbadimaging.com/>

Email:

Medical Group(s):

IPA:

REGISTERED PHYSICAL THERAPIST

ALABY, AMY L

Provider ID: 269217

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

3070 MADISON ST

CARLSBAD, CA 92008-2310

Phone: (760) 591-7750

Fax:

After Hours Phone: (760)

591-7750

Provider Gender: Female

License number: PT42087

NPI: 1003202862

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

AMBROSE, CHRISTOPHER S

Provider ID: 248010

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

3070 MADISON ST

CARLSBAD, CA 92008-2310

Phone: (760) 434-6100

Fax: (760) 434-4583

After Hours Phone: (760)

591-7750

Provider Gender: Male

License number: PT26311

NPI: 1114977535

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 8/125

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

BAKER, LISA J

Provider ID: 269094

Board Certified Specialty: No

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D. Directorio de proveedores de atención especializada

COMMUNITY CARE IPA LLC
3070 MADISON ST
CARLSBAD, CA 92008-2310
Phone: (760) 591-7750

Fax:

After Hours Phone: (760)
591-7750

Provider Gender: Female

License number: PT22824

NPI: 1346200045

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

BOUTELLE, BARBARA J

Provider ID: 246318

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

3070 MADISON ST

CARLSBAD, CA 92008-2310

Phone: (760) 434-6100

Fax: (760) 434-4583

After Hours Phone: (760)

434-6100

Provider Gender: Female

License number: PT12716

NPI: 1437107711

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

BOUTELLE, DAVID C

Provider ID: 248307

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

3070 MADISON ST

CARLSBAD, CA 92008-2310

Phone: (760) 434-6100

Fax: (760) 434-4583

After Hours Phone: (760)
434-6100

Provider Gender: Male

License number: PT12422

NPI: 1063461101

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

FARRAR, COURTNEY L

Provider ID: 255874

Board Certified Specialty: No

HEALTH EXCEL IPA INC

6010 HIDDEN VALLEY RD STE
110

CARLSBAD, CA 92011-4219

Phone: (619) 761-5308

Fax: (619) 325-1717

After Hours Phone: (619)
761-5308

Provider Gender: Male

License number: PT292062

NPI: 1124577952

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

MCGEE, JACQUELINE M

Provider ID: 252472

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

3070 MADISON ST

CARLSBAD, CA 92008-2310

Phone: (760) 434-6100

Fax: (760) 471-5139

After Hours Phone: (760)
434-6100

Provider Gender: Female

License number: PT294790

NPI: 1194217133

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 8/999

American Sign Language (ASL):
No

♿ Accessibility:

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D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

OLIVEROS, YUNNUEN

Provider ID: 277464
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
3070 MADISON ST
CARLSBAD, CA 92008-2310
Phone: (760) 434-6100
Fax: (760) 434-4583
After Hours Phone: (760)
434-6100
Provider Gender: Female
License number: PT294386
NPI: 1295234987
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

Ⓜ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SLEEP MEDICINE

MADHAV, KINJAL S

Provider ID: 252834
Board Certified Specialty: No
HEALTH EXCEL IPA INC
6010 HIDDEN VALLEY RD STE
200
CARLSBAD, CA 92011-4219

Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760)
631-3000
Provider Gender: Female
License number: A132338
NPI: 1124385182
Provider English Spoken: Yes
Provider Language(s) Spoken:
Gujarati, Hindi, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas, Tri
City Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/200
American Sign Language (ASL):
No
Ⓜ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

SURGERY NEUROLOGICAL

BEN-HAIM, SHARONA

Provider ID: 110723
Board Certified Specialty: No
UCSD MEDICAL GROUP
6010 HIDDEN VALLEY RD STE
200
CARLSBAD, CA 92011-4219
Phone: (619) 543-5540
Fax:
After Hours Phone: (619)
543-5540
Provider Gender: Female
License number: A124866
NPI: 1942469663
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hebrew, Spanish

Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Ⓜ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BEN-HAIM, SHARONA

Provider ID: 244069
Board Certified Specialty: No
UCSD MEDICAL GROUP
6010 HIDDEN VALLEY RD STE
200
CARLSBAD, CA 92011-4219
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A124866
NPI: 1942469663
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hebrew, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Ⓜ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

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D. Directorio de proveedores de atención especializada

IPA: Ucsd Medical Group

BLASKIEWICZ, DONALD J

Provider ID: 270283

Board Certified Specialty: No

UCSD MEDICAL GROUP

6010 HIDDEN VALLEY RD STE 200

CARLSBAD, CA 92011-4219

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A109748

NPI: 1215176839

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Palomar

Health Downtown Campus, Ucsd

La Jolla John Sally Thornton,

Ucsd Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

OLSON, SCOTT E

Provider ID: 244056

Board Certified Specialty: No

UCSD MEDICAL GROUP

6010 HIDDEN VALLEY RD STE 200

CARLSBAD, CA 92011-4219

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A83715

NPI: 1376568659

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Tri City

Medical Ctr, Palomar Health

Downtown Campus, Ucsd

Medical Ctr, Pomerado Hospital,

Palomar Medical Center, Scripps

Green Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

PHAM, MARTIN H

Provider ID: 127139

Board Certified Specialty: No

UCSD MEDICAL GROUP

6010 HIDDEN VALLEY RD STE 200

CARLSBAD, CA 92011-4219

Phone: (619) 543-5540

Fax:

After Hours Phone: (619)

543-5540

Provider Gender: Male

License number: A121590

NPI: 1609130921

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

PHAM, MARTIN H

Provider ID: 203510

Board Certified Specialty: No

UCSD MEDICAL GROUP

6010 HIDDEN VALLEY RD STE 200

CARLSBAD, CA 92011-4219

Phone: (619) 543-5540

Fax:

After Hours Phone: (619)

543-5540

Provider Gender: Male

License number: A121590

NPI: 1609130921

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

TUNG, HOWARD

Provider ID: 244085

Board Certified Specialty: Yes

UCSD MEDICAL GROUP

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D. Directorio de proveedores de atención especializada

6010 HIDDEN VALLEY RD STE 200
CARLSBAD, CA 92011-4219
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: G58235
NPI: 1538153341
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Rady Childrens Hospital San Diego, Scripps Green Hospital, Tri City Medical Ctr, Palomar Medical Center, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CHULA VISTA

ADVANCED HEART FAILURE AND TRANSPLANT CARDIOLOGY

HOAGLAND, PETER M
Provider ID: 275446
Board Certified Specialty: No
HEALTH EXCEL IPA INC
890 EASTLAKE PKWY STE 205
CHULA VISTA, CA 91914-4521

Phone: (858) 244-6800
Fax: (858) 244-6909
After Hours Phone: (858) 244-6800
Provider Gender: Male
License number: G54598
NPI: 1629059779
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Sharp Memorial Hospital, Sharp Mary Birch Hosp For Women And Newborns
Medi-Cal Open Panel: Yes
Min/Max Age: 18/110
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

JASKI, BRIAN E
Provider ID: 275474
Board Certified Specialty: No
HEALTH EXCEL IPA INC
890 EASTLAKE PKWY STE 205
CHULA VISTA, CA 91914-4521
Phone: (858) 244-6800
Fax: (858) 244-6909
After Hours Phone: (858) 244-6800
Provider Gender: Male
License number: G55011
NPI: 1194706242
Provider English Spoken: Yes
Provider Language(s) Spoken: French
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Sharp Chula

Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/110
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

ANESTHESIOLOGY PAIN MANAGEMENT

FISHER, CASEY J
Provider ID: 204415
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
374 H ST STE 103
CHULA VISTA, CA 91910-5547
Phone: (619) 625-1144
Fax:
After Hours Phone: (619) 625-1144
Provider Gender: Male
License number: A118592
NPI: 1275780686
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Sharp Memorial Hospital, Scripps Mercy Hospital, Pomerado Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

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D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

NAVARRO, ROSA M

Provider ID: 262220
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
2452 FENTON ST # C101
CHULA VISTA, CA 91914-3599
Phone: (619) 600-5309
Fax: (619) 655-4700
After Hours Phone: (619)
600-5309
Provider Gender: Female
License number: C53858
NPI: 1083691802
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr, Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

NAVARRO, ROSA M

Provider ID: 262221
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
2452 FENTON ST # C203

CHULA VISTA, CA 91914-3599
Phone: (619) 600-5309
Fax: (619) 655-4700
After Hours Phone: (619)
600-5309
Provider Gender: Female
License number: C53858
NPI: 1083691802
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr, Scripps Memorial
Hospital, Paradise Valley
Hospital, Scripps Green Hospital,
Scripps Mercy Hospital Chula
Vista, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

NAVARRO, ROSA M , MD

Provider ID: 268792
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
2452 FENTON ST # C101
CHULA VISTA, CA 91914-3599
Phone: (619) 600-5309
Fax: (619) 655-4700
After Hours Phone: (619)
600-5309
Provider Gender: Female
License number: C53858
NPI: 1083691802
Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr, Scripps Memorial
Hospital, Paradise Valley
Hospital, Scripps Green Hospital,
Scripps Mercy Hospital Chula
Vista, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

NAVARRO, ROSA M , MD

Provider ID: 268793
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
2452 FENTON ST # C203
CHULA VISTA, CA 91914-3599
Phone: (619) 600-5309
Fax: (619) 655-4700
After Hours Phone: (619)
600-5309
Provider Gender: Female
License number: C53858
NPI: 1083691802
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr, Scripps Memorial
Hospital, Paradise Valley
Hospital, Scripps Green Hospital,
Scripps Mercy Hospital Chula
Vista, Scripps Mercy Hospital

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D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

TRUONG, NGOC B

Provider ID: 273553
Board Certified Specialty: No
HEALTH EXCEL IPA INC
340 4TH AVE STE 19
CHULA VISTA, CA 91910-3898
Phone: (619) 761-5308
Fax: (619) 325-1717
After Hours Phone: (619)
761-5308
Provider Gender: Female
License number: 20A13556
NPI: 1841634797
Provider English Spoken: Yes
Provider Language(s) Spoken:
Vietnamese
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

VERDOLIN, MICHAEL H , MD

Provider ID: 257923

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
2452 FENTON ST STE 205
CHULA VISTA, CA 91914-4551
Phone: (619) 625-1144
Fax:
After Hours Phone: (619)
625-1144
Provider Gender: Male
License number: A92149
NPI: 1477525657

Provider English Spoken: Yes
Provider Language(s) Spoken:
Italian, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Sharp Chula Vista Med
Ctr, Sharp Coronado Hosp And
Healthcare Ctr, Scripps Mercy
Hospital Chula Vista

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health
Plan Direct, Community Care Ipa
Llc

ANESTHESIOLOGY

LEE, INSUN

Provider ID: 282100
Board Certified Specialty: No
HEALTH EXCEL IPA INC
344 F ST STE 203
CHULA VISTA, CA 91910-2646
Phone: (858) 571-3630
Fax: (858) 295-3948
After Hours Phone: (858)
571-3630

Provider Gender: Female
License number: A119066
NPI: 1447499199
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

CARDIAC ELECTROPHYSIOLOGY

PUGH, MATTHEW D

Provider ID: 284394
Board Certified Specialty: No
HEALTH EXCEL IPA INC
765 MEDICAL CENTER CT STE
205
CHULA VISTA, CA 91911-6600
Phone: (619) 482-4333
Fax: (619) 482-4445
After Hours Phone: (619)
482-4333
Provider Gender: Male
License number: 20A12102
NPI: 1306077870

Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Sharp Chula
Vista Med Ctr, Grossmont
Hospital, Scripps Mercy Hospital,
Scripps Mercy Hospital Chula
Vista

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>Medi-Cal Open Panel: Yes Min/Max Age: 18/115 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Health Excel Ipa Inc</p>	<p>IPA: Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p> <p>BERMAN, BRETT J , MD Provider ID: 268466 Board Certified Specialty: No COMMUNITY CARE IPA LLC 321 E ST STE A CHULA VISTA, CA 91910-2667 Phone: (619) 934-3260 Fax: (619) 934-3268 After Hours Phone: (619) 934-3260 Provider Gender: Female License number: A78854 NPI: 1457446684 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Ucsd Medical Ctr, Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista, Sharp Chula Vista Med Ctr Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p> <p>BERMAN, BRETT J Provider ID: 35528 Board Certified Specialty: No IMPERIAL HEALTH HOLDINGS</p>	<p>MEDICAL GROUP-SD 321 E ST STE A CHULA VISTA, CA 91910-2667 Phone: (619) 934-3260 Fax: (619) 934-3268 After Hours Phone: (619) 934-3260 Provider Gender: Female License number: A78854 NPI: 1457446684 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Ucsd Medical Ctr, Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista, Sharp Chula Vista Med Ctr Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p> <p>BERMAN, BRETT J Provider ID: 35528 Board Certified Specialty: No HEALTH EXCEL IPA INC 321 E ST STE A CHULA VISTA, CA 91910-2667 Phone: (619) 934-3260 Fax: (619) 934-3268 After Hours Phone: (619) 934-3260 Provider Gender: Female</p>
CARDIOLOGY		
<p>AIZIN, VITALI Provider ID: 103813 Board Certified Specialty: No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 321 E ST STE A CHULA VISTA, CA 91910-2667 Phone: (619) 934-3260 Fax: (619) 934-3268 After Hours Phone: (619) 934-3260 Provider Gender: Male License number: A82761 NPI: 1366545733 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Sharp Chula Vista Med Ctr, Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Scripps Mercy Hospital Medi-Cal Open Panel: Yes Min/Max Age: 18/100 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s):</p>	<p>IPA: Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p> <p>BERMAN, BRETT J , MD Provider ID: 268466 Board Certified Specialty: No COMMUNITY CARE IPA LLC 321 E ST STE A CHULA VISTA, CA 91910-2667 Phone: (619) 934-3260 Fax: (619) 934-3268 After Hours Phone: (619) 934-3260 Provider Gender: Female License number: A78854 NPI: 1457446684 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Ucsd Medical Ctr, Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista, Sharp Chula Vista Med Ctr Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p> <p>BERMAN, BRETT J Provider ID: 35528 Board Certified Specialty: No IMPERIAL HEALTH HOLDINGS</p>	<p>MEDICAL GROUP-SD 321 E ST STE A CHULA VISTA, CA 91910-2667 Phone: (619) 934-3260 Fax: (619) 934-3268 After Hours Phone: (619) 934-3260 Provider Gender: Female License number: A78854 NPI: 1457446684 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Ucsd Medical Ctr, Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista, Sharp Chula Vista Med Ctr Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p> <p>BERMAN, BRETT J Provider ID: 35528 Board Certified Specialty: No HEALTH EXCEL IPA INC 321 E ST STE A CHULA VISTA, CA 91910-2667 Phone: (619) 934-3260 Fax: (619) 934-3268 After Hours Phone: (619) 934-3260 Provider Gender: Female</p>

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D. Directorio de proveedores de atención especializada

<p>License number: A78854 NPI: 1457446684 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Ucsd Medical Ctr, Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista, Sharp Chula Vista Med Ctr Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p> <p>CEPIN, DANIEL, MD Provider ID: 268781 Board Certified Specialty: No COMMUNITY CARE IPA LLC 890 EASTLAKE PKWY STE 205 CHULA VISTA, CA 91914-4521 Phone: (619) 482-0300 Fax: (619) 482-0959 After Hours Phone: (619) 482-0300 Provider Gender: Male License number: G52521 NPI: 1053320556 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Sharp Memorial Hospital, Sharp Chula</p>	<p>Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Health Excel Ipa Inc</p> <p>COX, JUSTIN M Provider ID: 284605 Board Certified Specialty: No HEALTH EXCEL IPA INC 890 EASTLAKE PKWY STE 205 CHULA VISTA, CA 91914-4521 Phone: (858) 244-6800 Fax: (858) 244-6809 After Hours Phone: (858) 244-6800 Provider Gender: Male License number: A132232 NPI: 1821144718 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Cedars Sinai Medical Center, Sharp Memorial Hospital, Naval Medical Ctr Sd Rbe Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s):</p>	<p>IPA: Health Excel Ipa Inc</p> <p>KAFRI, HASSAN, MD Provider ID: 265196 Board Certified Specialty: No COMMUNITY CARE IPA LLC 429 BROADWAY CHULA VISTA, CA 91910-4320 Phone: (619) 434-0204 Fax: (619) 337-0191 After Hours Phone: (619) 434-0204 Provider Gender: Male License number: A96002 NPI: 1730258401 Provider English Spoken: Yes Provider Language(s) Spoken: Arabic, Farsi, German, Russian, Spanish Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Sharp Chula Vista Med Ctr, Grossmont Hospital, Sharp Memorial Hospital, Alvarado Hospital Llc, Redlands Community Hosp Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Health Excel Ipa Inc</p> <p>MOHAMEDALI, BURHAN, MD Provider ID: 245576 Board Certified Specialty: No COMMUNITY CARE IPA LLC 765 MEDICAL CENTER CT STE 211</p>
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D. Directorio de proveedores de atención especializada

CHULA VISTA, CA 91911-6600
Phone: (619) 616-2100
Fax: (619) 616-2104
After Hours Phone: (619) 616-2100
Provider Gender: Male
License number: A125669
NPI: 1831393289
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Swahili
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

MONDRAGON, GUSTAVO A

Provider ID: 34939
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 480 4TH AVE STE 500
 CHULA VISTA, CA 91910-4414
Phone: (619) 656-5252
Fax: (619) 656-5250
After Hours Phone: (619) 656-5252
Provider Gender: Male
License number: A40640
NPI: 1619080041
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Paradise Valley

Hospital, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital
 Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings Medical Group-Sd

MOUSSAVIAN, MEHRAN, MD

Provider ID: 242263
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 765 MEDICAL CENTER CT STE 211
 CHULA VISTA, CA 91911-6600
Phone: (619) 616-2100
Fax: (619) 616-2104
After Hours Phone: (619) 616-2100
Provider Gender: Male
License number: 20A7241
NPI: 1689788234
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Tri City Medical Ctr, Sharp Memorial Hospital, Alvarado Hospital Llc, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 16/120
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

NAGHI, JESSE J , MD
Provider ID: 247625
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 752 MEDICAL CENTER CT STE 207
 CHULA VISTA, CA 91911-6660
Phone: (619) 867-0557
Fax:
After Hours Phone: (619) 867-0557
Provider Gender: Male
License number: A110094
NPI: 1386896736
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Bulgarian, Russian, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Grossmont Hospital, Sharp Memorial Hospital, Alvarado Hospital Llc, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

NAGHI, JESSE J
Provider ID: 283620

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D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
HEALTH EXCEL IPA INC
 752 MEDICAL CENTER CT STE 207
 CHULA VISTA, CA 91911-6660
Phone: (619) 867-0557
Fax:
After Hours Phone: (619) 867-0557
Provider Gender: Male
License number: A110094
NPI: 1386896736
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Bulgarian, Russian, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Grossmont Hospital, Sharp Memorial Hospital, Alvarado Hospital Llc, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

NARAYANAN, MEENA R , MD
Provider ID: 247694
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 765 MEDICAL CENTER CT STE 211
 CHULA VISTA, CA 91911-6600

Phone: (619) 616-2100
Fax: (619) 616-2104
After Hours Phone: (619) 616-2100
Provider Gender: Female
License number: A113448
NPI: 1508170697
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: No
Min/Max Age: 18/999
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

PARIKH, MILIND D
Provider ID: 268745
Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC
 765 MEDICAL CENTER CT STE 211
 CHULA VISTA, CA 91911-6600
Phone: (619) 616-2100
Fax: (619) 616-2104
After Hours Phone: (619) 616-2100
Provider Gender: Male
License number: 20A13745
NPI: 1194161406
Provider English Spoken: Yes
Provider Language(s) Spoken: Gujarati, Hindi, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula

Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

PONCE, SONIA G
Provider ID: 268702
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 450 4TH AVE STE 215
 CHULA VISTA, CA 91910-4428
Phone: (619) 434-0204
Fax: (619) 337-0191
After Hours Phone: (619) 434-0204
Provider Gender: Female
License number: A145008
NPI: 1164659033
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

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D. Directorio de proveedores de atención especializada

RUTLEDGE, MICHAEL R

Provider ID: 268763
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
751 MEDICAL CENTER CT
CHULA VISTA, CA 91911-6617
Phone: (619) 502-5851

Fax:
After Hours Phone: (619)
502-5851

Provider Gender: Male
License number: C166106
NPI: 1265624167

Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SHEREV, DIMITRI A , MD

Provider ID: 268950
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
752 MEDICAL CENTER CT STE
207
CHULA VISTA, CA 91911-6660
Phone: (619) 597-1341

Fax: (619) 867-0558
After Hours Phone: (619)
597-1341

Provider Gender: Male
License number: A70917
NPI: 1154323996

Provider English Spoken: Yes
Provider Language(s) Spoken:
Bulgarian, Malayalam, Russian,
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Grossmont Hospital,
Alvarado Community Hospital,
Sharp Memorial Hospital, Scripps
Memorial Hospital, Alvarado
Hospital Llc, Sharp Chula Vista
Med Ctr

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

SHETABI, KAMBIZ

Provider ID: 268772
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
765 MEDICAL CENTER CT STE
211
CHULA VISTA, CA 91911-6600
Phone: (619) 616-2100

Fax: (619) 616-2104
After Hours Phone: (619)
616-2100

Provider Gender: Male
License number: A126187
NPI: 1972827806
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr
Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

WYSOCZANSKI, MARIUSZ W

Provider ID: 124990
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
750 MEDICAL CENTER CT STE
3
CHULA VISTA, CA 91911-6634
Phone: (619) 434-4288

Fax:
After Hours Phone: (619)
434-4288

Provider Gender: Male
License number: C55986
NPI: 1659535656
Provider English Spoken: Yes
Provider Language(s) Spoken:
Polish, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr

Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

CARDIOVASCULAR DISEASE	<i>Phone:</i> (619) 934-3260 <i>Fax:</i> (619) 934-3268 <i>After Hours Phone:</i> (619) 934-3260 <i>Provider Gender:</i> Male <i>License number:</i> A82761 <i>NPI:</i> 1366545733 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Ucsd Medical Ctr, Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista, Sharp Chula Vista Med Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd	<i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Ucsd Medical Ctr, Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista, Sharp Chula Vista Med Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd
AIZIN, VITALI <i>Provider ID:</i> 103813 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 321 E ST STE A CHULA VISTA, CA 91910-2667 <i>Phone:</i> (619) 934-3260 <i>Fax:</i> (619) 934-3268 <i>After Hours Phone:</i> (619) 934-3260 <i>Provider Gender:</i> Male <i>License number:</i> A82761 <i>NPI:</i> 1366545733 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital Chula Vista, Sharp Chula Vista Med Ctr, Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd	BERMAN, BRETT J <i>Provider ID:</i> 257542 <i>Board Certified Specialty:</i> No BLUE SHIELD PROMISE HEALTH PLAN DIRECT 321 E ST STE A CHULA VISTA, CA 91910-2667 <i>Phone:</i> (619) 934-3260 <i>Fax:</i> (619) 934-3268 <i>After Hours Phone:</i> (619) 934-3260 <i>Provider Gender:</i> Female <i>License number:</i> A78854 <i>NPI:</i> 1457446684 <i>Provider English Spoken:</i> Yes	CARLSON, STEVEN K <i>Provider ID:</i> 238127 <i>Board Certified Specialty:</i> Yes HEALTH EXCEL IPA INC 765 MEDICAL CENTER CT STE 211 CHULA VISTA, CA 91911-6600 <i>Phone:</i> (619) 616-2100 <i>Fax:</i> (619) 616-2104 <i>After Hours Phone:</i> (619) 616-2100 <i>Provider Gender:</i> Male <i>License number:</i> A109957 <i>NPI:</i> 1467602946 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Santa Monica Ucla Med Ctr, Ronald Reagan Ucla Med Ctr, Scripps Mercy Hospital, Grossmont Hospital,
AIZIN, VITALI <i>Provider ID:</i> 39325 <i>Board Certified Specialty:</i> No VITALI AIZIN MD INC 321 E ST STE A CHULA VISTA, CA 91910-2667		

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D. Directorio de proveedores de atención especializada

Sharp Chula Vista Med Ctr,
Alvarado Hospital Llc, Sharp
Memorial Hospital, Garfield
Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 18/99
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

CEPIN, DANIEL

Provider ID: 276989
Board Certified Specialty: No
HEALTH EXCEL IPA INC
890 EASTLAKE PKWY STE 205
CHULA VISTA, CA 91914-4521
Phone: (619) 482-0300
Fax: (619) 482-0959
After Hours Phone: (619)
482-0300
Provider Gender: Male
License number: G52521
NPI: 1053320556
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Sharp Chula
Vista Med Ctr, Scripps Mercy
Hospital Chula Vista, Scripps
Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/110
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc
DAWOOD, FARAH Z
Provider ID: 283626
Board Certified Specialty: No
HEALTH EXCEL IPA INC
752 MEDICAL CENTER CT STE
207
CHULA VISTA, CA 91911-6660
Phone: (619) 597-1341
Fax: (619) 867-0558
After Hours Phone: (619)
597-1341

Provider Gender: Female
License number: A143088
NPI: 1922263466
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Egyptian
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital Chula Vista, Scripps
Mercy Hospital, Scripps
Memorial Hospital, Alvarado
Hospital Llc, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

FERNANDEZ, GENARO

Provider ID: 283608
Board Certified Specialty: No
HEALTH EXCEL IPA INC
752 MEDICAL CENTER CT STE
207

CHULA VISTA, CA 91911-6660
Phone: (619) 867-0557
Fax:
After Hours Phone: (619)
867-0557
Provider Gender: Male
License number: A122302
NPI: 1073768891
Provider English Spoken: Yes
Provider Language(s) Spoken:
French, Italian, Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Sharp Chula Vista Med
Ctr, Alvarado Hosp Med Ctr,
Scripps Memorial Hospital, Sharp
Memorial Hospital, Scripps
Mercy Hospital, Scripps Mercy
Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

GOLLAPUDI, RAGHA V A R

Provider ID: 221390
Board Certified Specialty: No
HEALTH EXCEL IPA INC
450 4TH AVE STE 215
CHULA VISTA, CA 91910-4428
Phone: (858) 244-6870
Fax: (858) 244-6809
After Hours Phone: (858)
244-6870
Provider Gender: Male
License number: A73392
NPI: 1467429191
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Scripps Mercy Hospital Chula Vista, Grossmont Hospital, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

GORDON, JOHN B

Provider ID: 278285
Board Certified Specialty: No
HEALTH EXCEL IPA INC
890 EASTLAKE PKWY STE 203
CHULA VISTA, CA 91914-4521
Phone: (858) 244-6800
Fax: (858) 244-6909
After Hours Phone: (858) 244-6800
Provider Gender: Male
License number: C42631
NPI: 1962483099
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/110
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

KAFRI, HASSAN
Provider ID: 259905
Board Certified Specialty: No
HEALTH EXCEL IPA INC
429 BROADWAY
CHULA VISTA, CA 91910-4320
Phone: (619) 434-0204
Fax: (619) 337-0191
After Hours Phone: (619) 434-0204
Provider Gender: Male
License number: A96002
NPI: 1730258401
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Farsi, German, Russian, Spanish

Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Sharp Chula Vista Med Ctr, Grossmont Hospital, Sharp Memorial Hospital, Alvarado Hospital Llc, Redlands Community Hosp
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

KIM, JAMES T
Provider ID: 280244
Board Certified Specialty: No
HEALTH EXCEL IPA INC

754 MEDICAL CENTER CT STE 101
CHULA VISTA, CA 91911-6655
Phone: (619) 434-4288
Fax: (619) 434-4315
After Hours Phone: (619) 434-4288
Provider Gender: Male
License number: A121180
NPI: 1336378371
Provider English Spoken: Yes
Provider Language(s) Spoken: Korean, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

LY, NANCY L
Provider ID: 280254
Board Certified Specialty: No
HEALTH EXCEL IPA INC
754 MEDICAL CENTER CT STE 101
CHULA VISTA, CA 91911-6655
Phone: (619) 434-4288
Fax: (619) 434-4315
After Hours Phone: (619) 434-4288
Provider Gender: Female
License number: A125595
NPI: 1295007144
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: No

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D. Directorio de proveedores de atención especializada

Hospital Affiliation: Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

MEHTA, HIRSCH S

Provider ID: 275526
Board Certified Specialty: No
HEALTH EXCEL IPA INC
890 EASTLAKE PKWY STE 205
CHULA VISTA, CA 91914-4521
Phone: (858) 244-6800
Fax: (858) 244-6909
After Hours Phone: (858) 244-6800
Provider Gender: Male
License number: A105910
NPI: 1407099799
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/110
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

MOHAMEDALI, BURHAN

Provider ID: 238120
Board Certified Specialty: No
HEALTH EXCEL IPA INC
765 MEDICAL CENTER CT STE 211
CHULA VISTA, CA 91911-6600
Phone: (619) 616-2100
Fax: (619) 616-2104
After Hours Phone: (619) 616-2100
Provider Gender: Male
License number: A125669
NPI: 1831393289
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Swahili
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

MOUSSAVIAN, MEHRAN
Provider ID: 238395
Board Certified Specialty: No
HEALTH EXCEL IPA INC
765 MEDICAL CENTER CT STE 211
CHULA VISTA, CA 91911-6600
Phone: (619) 616-2100
Fax: (619) 616-2104
After Hours Phone: (619) 616-2100
Provider Gender: Male
License number: 20A7241
NPI: 1689788234

Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Sharp Memorial Hospital, Tri City Medical Ctr, Alvarado Hospital Llc, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 16/120
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

NARAYANAN, MEENA R
Provider ID: 238132
Board Certified Specialty: No
HEALTH EXCEL IPA INC
765 MEDICAL CENTER CT STE 211
CHULA VISTA, CA 91911-6600
Phone: (619) 616-2100
Fax: (619) 616-2104
After Hours Phone: (619) 616-2100
Provider Gender: Female
License number: A113448
NPI: 1508170697
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/99
American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>No ☯ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc</p>	<p><i>Phone:</i> (619) 434-4288 <i>Fax:</i> (619) 434-4315 <i>After Hours Phone:</i> (619) 434-4288 <i>Provider Gender:</i> Male <i>License number:</i> A76050 <i>NPI:</i> 1972533941 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Polish, Spanish, Tagalog <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 18/999 <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc</p>	<p>Gujarati, Hindi, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 16/99 <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc</p>
<p>NUNEZ GARCIA, ARISMENDY S <i>Provider ID:</i> 280026 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 890 EASTLAKE PKWY STE 205 CHULA VISTA, CA 91914-4521 <i>Phone:</i> (858) 244-6800 <i>Fax:</i> (858) 244-6909 <i>After Hours Phone:</i> (858) 244-6800 <i>Provider Gender:</i> Male <i>License number:</i> A171872 <i>NPI:</i> 1013236330 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Health Excel Ipa Inc</p>	<p>PARIKH, MILIND D <i>Provider ID:</i> 238194 <i>Board Certified Specialty:</i> Yes HEALTH EXCEL IPA INC 765 MEDICAL CENTER CT STE 211 CHULA VISTA, CA 91911-6600 <i>Phone:</i> (619) 616-2100 <i>Fax:</i> (619) 616-2104 <i>After Hours Phone:</i> (619) 616-2100 <i>Provider Gender:</i> Male <i>License number:</i> 20A13745 <i>NPI:</i> 1194161406 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i></p>	<p>PARIZO, JUSTIN T <i>Provider ID:</i> 284539 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 890 EASTLAKE PKWY STE 205 CHULA VISTA, CA 91914-4521 <i>Phone:</i> (858) 244-6800 <i>Fax:</i> (858) 244-6809 <i>After Hours Phone:</i> (858) 244-6800 <i>Provider Gender:</i> Male <i>License number:</i> A139952 <i>NPI:</i> 1023438637 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Health Excel Ipa Inc</p>
<p>OVIEDO-LINARES, RAUL <i>Provider ID:</i> 280255 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 754 MEDICAL CENTER CT STE 101 CHULA VISTA, CA 91911-6655</p>	<p><i>After Hours Phone:</i> (619) 616-2100 <i>Provider Gender:</i> Male <i>License number:</i> 20A13745 <i>NPI:</i> 1194161406 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i></p>	<p><i>After Hours Phone:</i> (858) 244-6800 <i>Provider Gender:</i> Male <i>License number:</i> A139952 <i>NPI:</i> 1023438637 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Health Excel Ipa Inc</p>

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D. Directorio de proveedores de atención especializada

PONCE, SONIA G

Provider ID: 212809
Board Certified Specialty: No
HEALTH EXCEL IPA INC
450 4TH AVE STE 215
CHULA VISTA, CA 91910-4428
Phone: (619) 434-0204
Fax: (619) 337-0191
After Hours Phone: (619) 434-0204
Provider Gender: Female
License number: A145008
NPI: 1164659033
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

♻️ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

ROUGH, STEVEN J

Provider ID: 280243
Board Certified Specialty: No
HEALTH EXCEL IPA INC
754 MEDICAL CENTER CT STE 101
CHULA VISTA, CA 91911-6655
Phone: (619) 434-4288
Fax: (619) 434-4315
After Hours Phone: (619) 434-4288

Provider Gender: Male
License number: A124001
NPI: 1386821460
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Sharp Memorial Hospital, Paradise Valley Hospital, Alvarado Hosp Med Ctr
Medi-Cal Open Panel: No
Min/Max Age: 18/120
American Sign Language (ASL): No
♻️ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

SHEREV, DIMITRI A

Provider ID: 283639
Board Certified Specialty: No
HEALTH EXCEL IPA INC
752 MEDICAL CENTER CT STE 207
CHULA VISTA, CA 91911-6660
Phone: (619) 597-1341
Fax: (619) 867-0558
After Hours Phone: (619) 597-1341

Provider Gender: Male
License number: A70917
NPI: 1154323996
Provider English Spoken: Yes
Provider Language(s) Spoken: Bulgarian, Malayalam, Russian, Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont

Hospital, Alvarado Community Hospital, Sharp Memorial Hospital, Scripps Memorial Hospital, Alvarado Hospital Llc, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♻️ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

SHETABI, KAMBIZ

Provider ID: 257163
Board Certified Specialty: No
HEALTH EXCEL IPA INC
765 MEDICAL CENTER CT STE 211
CHULA VISTA, CA 91911-6600
Phone: (619) 616-2100
Fax: (619) 616-2104
After Hours Phone: (619) 616-2100
Provider Gender: Male
License number: A126187
NPI: 1972827806
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♻️ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:

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D. Directorio de proveedores de atención especializada

Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

SZKOPIEC, ROMAN L
Provider ID: 35527
Board Certified Specialty: No
CHULA VISTA HEART CLINIC
INC
480 4TH AVE STE 401
CHULA VISTA, CA 91910-4413
Phone: (619) 427-8646
Fax: (619) 425-7128
After Hours Phone: (619)
427-8646
Provider Gender: Male
License number: A37537
NPI: 1851332803
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr, Scripps Mercy
Hospital Chula Vista, Scripps
Mercy Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-F 9AM-6PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

WYSOCZANSKI, MARIUSZ W
Provider ID: 280245
Board Certified Specialty: No
HEALTH EXCEL IPA INC
754 MEDICAL CENTER CT STE
101
CHULA VISTA, CA 91911-6655

Phone: (619) 434-4288
Fax: (619) 434-4315
After Hours Phone: (619)
434-4288
Provider Gender: Male
License number: C55986
NPI: 1659535656
Provider English Spoken: Yes
Provider Language(s) Spoken:
Polish, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/100
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

CERTIFIED NURSE PRACTITIONER

AKINS, MELANIE R
Provider ID: 125136
Board Certified Specialty: No
BALBOA NEPHROLOGY MED
GRP INC
752 MEDICAL CENTER CT STE
302
CHULA VISTA, CA 91911-6661
Phone: (916) 421-3361
Fax:
After Hours Phone: (916)
421-3361
Provider Gender: Female
License number: NP95008069
NPI: 1508370875

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

AKINS, MELANIE R
Provider ID: 214065
Board Certified Specialty: No
HEALTH EXCEL IPA INC
752 MEDICAL CENTER CT STE
302
CHULA VISTA, CA 91911-6661
Phone: (619) 421-3361
Fax: (619) 869-4378
After Hours Phone: (619)
421-3361
Provider Gender: Female
License number: NP95008069
NPI: 1508370875
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/120
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

AKINS, MELANIE R

Provider ID: 262342
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
752 MEDICAL CENTER CT STE
302
CHULA VISTA, CA 91911-6661
Phone: (619) 421-3361
Fax: (619) 869-4378
After Hours Phone: (619)
421-3361
Provider Gender: Female
License number: NP95008069
NPI: 1508370875
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

⚡ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

AKINS, MELANIE R , NPA

Provider ID: 268746
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
752 MEDICAL CENTER CT STE
302
CHULA VISTA, CA 91911-6661

Phone: (619) 421-3361
Fax: (619) 869-4378
After Hours Phone: (619)
421-3361
Provider Gender: Female
License number: NP95008069
NPI: 1508370875
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
⚡ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

BATAC, NADINE M

Provider ID: 113818
Board Certified Specialty: No
SYNOVATION MEDICAL
GROUP
340 4TH AVE STE 19
CHULA VISTA, CA 91910-3898
Phone: (619) 761-5308
Fax:
After Hours Phone: (619)
761-5308
Provider Gender: Female
License number: NP21763
NPI: 1942657937
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital Chula Vista

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
⚡ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

CARAPIA, FABIOLA, NPA

Provider ID: 268543
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
340 4TH AVE STE 4
CHULA VISTA, CA 91910-3885
Phone: (619) 427-1144
Fax: (619) 427-1185
After Hours Phone: (619)
427-1144
Provider Gender: Female
License number: NP20855
NPI: 1184905994
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
⚡ Accessibility: P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

CARAPIA, FABIOLA, NPA

Provider ID: 268543
Board Certified Specialty: No

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D. Directorio de proveedores de atención especializada

COMMUNITY CARE IPA LLC
340 4TH AVE STE 4
CHULA VISTA, CA 91910-3885
Phone: (619) 427-1144
Fax: (619) 427-1185
After Hours Phone: (619) 427-1144
Provider Gender: Female
License number: RN603937
NPI: 1184905994
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

CARAPIA, FABIOLA

Provider ID: 54496
Board Certified Specialty: No
BALBOA NEPHROLOGY MED
GRP INC
340 4TH AVE STE 4
CHULA VISTA, CA 91910-3885
Phone: (619) 427-1144
Fax: (619) 427-1185
After Hours Phone: (619) 427-1144
Provider Gender: Female
License number: NP20855
NPI: 1184905994
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:

Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

CARAPIA, FABIOLA

Provider ID: 54496
Board Certified Specialty: No
BALBOA NEPHROLOGY MED
GRP INC
340 4TH AVE STE 4
CHULA VISTA, CA 91910-3885
Phone: (619) 427-1144
Fax:
After Hours Phone: (619) 427-1144
Provider Gender: Female
License number: NP20855
NPI: 1184905994
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

CARAPIA, FABIOLA

Provider ID: 54496
Board Certified Specialty: No
BALBOA NEPHROLOGY MED
GRP INC
340 4TH AVE STE 4
CHULA VISTA, CA 91910-3885
Phone: (619) 427-1144
Fax: (619) 427-1185
After Hours Phone: (619) 427-1144
Provider Gender: Female
License number: RN603937
NPI: 1184905994
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

CARAPIA, FABIOLA

Provider ID: 54496
Board Certified Specialty: No
BALBOA NEPHROLOGY MED
GRP INC
340 4TH AVE STE 4
CHULA VISTA, CA 91910-3885
Phone: (619) 427-1144
Fax:
After Hours Phone: (619) 427-1144
Provider Gender: Female
License number: RN603937
NPI: 1184905994
Provider English Spoken: Yes

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D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
 Imperial Health Holdings Medical
 Group-Sd

COLLINSWORTH, JESSICA B

Provider ID: 259725
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 344 F ST STE 203
 CHULA VISTA, CA 91910-2646
Phone: (619) 427-9627
Fax: (858) 430-3146
After Hours Phone: (619)
 427-9627
Provider Gender: Female
License number: NP95008585
NPI: 1467887828
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

DA CUNHA, MARIA LUISA B

Provider ID: 275530
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 880 3RD AVE # A
 CHULA VISTA, CA 91911-1305
Phone: (619) 662-4100
Fax: (619) 618-2035
After Hours Phone: (619)
 662-4100
Provider Gender: Female
License number: NP95000200
NPI: 1750708434
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

FERNANDEZ LEYVA, JUAN C

Provider ID: 109771
Board Certified Specialty: No
 LOGAN HEIGHTS FAMILY
 HEALTH CENTER
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2500
Fax:
After Hours Phone: (619)
 515-2500
Provider Gender: Male
License number: NP95001964
NPI: 1194115568
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No

Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* P, EB, IB, E, R,
 T, W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FISH, PAMELA B

Provider ID: 260588
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 865 3RD AVE STE 101
 CHULA VISTA, CA 91911-1349
Phone: (619) 426-7910
Fax: (619) 426-2337
After Hours Phone: (619)
 426-7910
Provider Gender: Female
License number: NP14601
NPI: 1063651867
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

GRUBENSKY, LINDSAY T

Provider ID: 261029

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 769 MEDICAL CENTER CT STE 300
 CHULA VISTA, CA 91911-6602
Phone: (619) 482-3090
Fax: (619) 482-7350
After Hours Phone: (619) 482-3090
Provider Gender: Female
License number: NP20953
NPI: 1619255577
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☒ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

GUADARRAMA, IGNACIO
Provider ID: 262418
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 1323 3RD AVE
 CHULA VISTA, CA 91911-4302
Phone: (619) 409-6900
Fax: (619) 409-6901
After Hours Phone: (619) 409-6900
Provider Gender: Male
License number: NP95003671
NPI: 1821331174
Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☒ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings Medical Group-Sd

HUYNH, KIMBERLY T
Provider ID: 261046
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 769 MEDICAL CENTER CT STE 300
 CHULA VISTA, CA 91911-6602
Phone: (619) 482-3090
Fax: (619) 482-7350
After Hours Phone: (619) 482-3090
Provider Gender: Female
License number: NP95005078
NPI: 1376094144
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☒ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health

Network
JERSEY, KAREN
Provider ID: 109692
Board Certified Specialty: No
SYNOVATION MEDICAL GROUP
 340 4TH AVE STE 19
 CHULA VISTA, CA 91910-3898
Phone: (619) 761-5308
Fax:
After Hours Phone: (619) 761-5308
Provider Gender: Female
License number: NP21684
NPI: 1700150695
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☒ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

JOHNSON, KIMBERLY A
Provider ID: 283635
Board Certified Specialty: No
HEALTH EXCEL IPA INC
 429 BROADWAY
 CHULA VISTA, CA 91910-4320
Phone: (619) 434-0204
Fax: (619) 337-0191
After Hours Phone: (619) 434-0204
Provider Gender: Female
License number: NP95010364
NPI: 1477024370

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

LANG, PO L

Provider ID: 278437
Board Certified Specialty: No
HEALTH EXCEL IPA INC
765 MEDICAL CENTER CT STE
210
CHULA VISTA, CA 91911-6600
Phone: (619) 482-0565
Fax: (619) 482-2775
After Hours Phone: (619)
482-0565
Provider Gender: Female
License number: NP95016187
NPI: 1598352312
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

LANG, PO L

Provider ID: 283744
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
765 MEDICAL CENTER CT STE
210
CHULA VISTA, CA 91911-6600
Phone: (619) 482-0565
Fax: (619) 482-2775
After Hours Phone: (619)
482-0565
Provider Gender: Female
License number: NP95016187
NPI: 1598352312
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

LEONARD, BEVERLY S

Provider ID: 115083
Board Certified Specialty: No
LOGAN HEIGHTS FAMILY
HEALTH CENTER
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2500
Fax:
After Hours Phone: (619)
515-2500
Provider Gender: Female
License number: NP10943
NPI: 1285772392

Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
T, W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LOPEZ, RITO A

Provider ID: 258168
Board Certified Specialty: No
HEALTH EXCEL IPA INC
340 4TH AVE STE 10
CHULA VISTA, CA 91910-3813
Phone: (619) 934-2215
Fax: (619) 934-2340
After Hours Phone: (619)
934-2215
Provider Gender: Male
License number: NP95013287
NPI: 1124667779
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

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D. Directorio de proveedores de atención especializada

SOTO, ROBIN J

Provider ID: 80435
Board Certified Specialty: No
 FAMILY HLTH CTR SAN
 DIEGO-RICE FAM HC
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2325
Fax:
After Hours Phone: (619)
 515-2325
Provider Gender: Female
License number: NP11778
NPI: 1487688099
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility:
Hours: M-F 8AM-5PM, SA
 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Family Hlth Ctr
 San Diego-Rice Fam Hc
IPA:

SPAULDING, ENJOLI B

Provider ID: 265022
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 786 3RD AVE STE B
 CHULA VISTA, CA 91910-5826
Phone: (619) 425-0797
Fax:
After Hours Phone: (619)
 425-0797
Provider Gender: Female
License number: NP21947

NPI: 1174828099
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/120
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc, Imperial
 Health Holdings Medical
 Group-Sd

DERMATOLOGY

STEIN, ALEXANDER D

Provider ID: 213494
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 340 4TH AVE STE 14
 CHULA VISTA, CA 91910-3813
Phone: (619) 303-3681
Fax: (760) 687-2825
After Hours Phone: (619)
 303-3681
Provider Gender: Male
License number: A106295
NPI: 1760431654
Provider English Spoken: Yes
Provider Language(s) Spoken:
 French, Romanian
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc

Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc

STEIN, ALEXANDER D , MD

Provider ID: 268620
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 340 4TH AVE STE 14
 CHULA VISTA, CA 91910-3813
Phone: (619) 303-3681
Fax: (760) 687-2825
After Hours Phone: (619)
 303-3681
Provider Gender: Male
License number: A106295
NPI: 1760431654

Provider English Spoken: Yes
Provider Language(s) Spoken:
 French, Romanian
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc

UEBELHOER, NATHAN S

Provider ID: 265837
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 786 3RD AVE STE B
 CHULA VISTA, CA 91910-5826

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 425-0797
Fax: (619) 425-0596
After Hours Phone: (619) 425-0797
Provider Gender: Male
License number: 20A9328
NPI: 1659344513
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Naval Medical Ctr Sd Rbe
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

ENDOCRINOLOGY METABOLISM DIABETES

ROGERS, MEGAN O
Provider ID: 212903
Board Certified Specialty: No
HEALTH EXCEL IPA INC
480 4TH AVE STE 202
CHULA VISTA, CA 91910-4412
Phone: (619) 427-3362
Fax: (619) 271-7914
After Hours Phone: (619) 427-3362
Provider Gender: Female
License number: A122784
NPI: 1982993374
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Scripps Mercy Hospital
Medi-Cal Open Panel: No
Min/Max Age: 19/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

ROGERS, MEGAN O
Provider ID: 245662
Board Certified Specialty: No
HEALTH EXCEL IPA INC
480 4TH AVE STE 207
CHULA VISTA, CA 91910-4412
Phone: (619) 427-3362
Fax: (619) 427-6821
After Hours Phone: (619) 427-3362
Provider Gender: Female
License number: A122784
NPI: 1982993374

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital
Medi-Cal Open Panel: No
Min/Max Age: 19/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

ROGERS, MEGAN O

Provider ID: 268585
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
480 4TH AVE STE 202
CHULA VISTA, CA 91910-4412
Phone: (619) 427-3362
Fax: (619) 271-7914
After Hours Phone: (619) 427-3362
Provider Gender: Female
License number: A122784
NPI: 1982993374
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

FAMILY PRACTICE

CHERY, FARAH Y
Provider ID: 78244
Board Certified Specialty: No
CHULA VISTA FAMILY HLTH CTR
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2500
Fax:
After Hours Phone: (619) 515-2500
Provider Gender: Female
License number: A108681
NPI: 1114183688

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: El Centro Regional Medical Center, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Chula Vista Family Hlth Ctr
IPA:

CHERY, FARAH Y

Provider ID: 78248
Board Certified Specialty: No
FAMILY HLTH CTR SAN DIEGO-RICE FAM HC
352 L ST
CHULA VISTA, CA 91911-1208
Phone: (619) 515-2325
Fax:
After Hours Phone: (619) 515-2325
Provider Gender: Female
License number: A108681
NPI: 1114183688
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: El Centro Regional Medical Center, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No

Accessibility:
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Family Hlth Ctr San Diego-Rice Fam Hc
IPA:

CORSENTINO-MATSUMOTO, LISA

Provider ID: 268750
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
480 4TH AVE STE 202
CHULA VISTA, CA 91910-4412
Phone: (619) 427-3361
Fax: (619) 827-0539
After Hours Phone: (619) 427-3361

Provider Gender: Female
License number: 20A6906
NPI: 1255441606
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

NGUYEN, LINH T

Provider ID: 129960
Board Certified Specialty: No
FAMILY HLTH CTR SAN DIEGO-RICE FAM HC
352 L ST

CHULA VISTA, CA 91911-1208
Phone: (619) 515-2325
Fax:
After Hours Phone: (619) 515-2325
Provider Gender: Female
License number: A144995
NPI: 1619357993
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Family Hlth Ctr San Diego-Rice Fam Hc
IPA:

NGUYEN, LINH T

Provider ID: 129961
Board Certified Specialty: No
CHULA VISTA FAMILY HLTH CTR
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2500
Fax:
After Hours Phone: (619) 515-2500
Provider Gender: Female
License number: A144995
NPI: 1619357993
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Chula Vista Family Hlth Ctr
IPA:

RABAGO, MAURELLEN B

Provider ID: 268698
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
480 4TH AVE STE 202
CHULA VISTA, CA 91910-4412
Phone: (619) 427-3361
Fax: (619) 827-0551
After Hours Phone: (619) 427-3361
Provider Gender: Female
License number: A146307
NPI: 1720421076
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

RAJ, ASHA P

Provider ID: 127616

Board Certified Specialty: No
FAMILY HLTH CTR SAN
DIEGO-RICE FAM HC
352 L ST
CHULA VISTA, CA 91911-1208
Phone: (619) 515-2500
Fax:
After Hours Phone: (619) 515-2500
Provider Gender: Female
License number: 20A15683
NPI: 1003293507
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Family Hlth Ctr San Diego-Rice Fam Hc
IPA:

RAJ, ASHA P

Provider ID: 127617
Board Certified Specialty: No
CHULA VISTA FAMILY HLTH
CTR
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2325
Fax:
After Hours Phone: (619) 515-2325
Provider Gender: Female
License number: 20A15683
NPI: 1003293507
Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Chula Vista Family Hlth Ctr
IPA:

YELANICH, MELISSA R

Provider ID: 268649
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
480 4TH AVE STE 202
CHULA VISTA, CA 91910-4412
Phone: (619) 427-3361
Fax: (619) 827-0551
After Hours Phone: (619) 427-3361
Provider Gender: Female
License number: A122649
NPI: 1881905362
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

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D. Directorio de proveedores de atención especializada

GASTROENTEROLOGY		
<p>ALAYO, ERICK H <i>Provider ID:</i> 285203 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 400 E ST CHULA VISTA, CA 91910-2413 <i>Phone:</i> (619) 382-3315 <i>Fax:</i> <i>After Hours Phone:</i> (619) 382-3315 <i>Provider Gender:</i> Male <i>License number:</i> A107506 <i>NPI:</i> 1841454758 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital, Scripps Mercy Hospital, Sharp Chula Vista Med Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Blue Shield Promise Health Plan Direct, Health Excel Ipa Inc</p>	<p><i>Phone:</i> (619) 382-3315 <i>Fax:</i> <i>After Hours Phone:</i> (619) 382-3315 <i>Provider Gender:</i> Male <i>License number:</i> A107506 <i>NPI:</i> 1841454758 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital, Scripps Mercy Hospital, Sharp Chula Vista Med Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Blue Shield Promise Health Plan Direct, Health Excel Ipa Inc</p>	<p><i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Sharp Chula Vista Med Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Imperial Health Holdings Medical Group-Sd</p>
<p>ALAYO, ERICK H <i>Provider ID:</i> 285204 <i>Board Certified Specialty:</i> No BLUE SHIELD PROMISE HEALTH PLAN DIRECT 400 E ST CHULA VISTA, CA 91910-2413</p>	<p>CUBAS, IVAN P <i>Provider ID:</i> 109374 <i>Board Certified Specialty:</i> No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 1040 TIERRA DEL REY STE 107 CHULA VISTA, CA 91910-7865 <i>Phone:</i> (619) 266-3332 <i>Fax:</i> (619) 266-6000 <i>After Hours Phone:</i> (619) 266-3332 <i>Provider Gender:</i> Male <i>License number:</i> C55825 <i>NPI:</i> 1447464912 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Portuguese, Spanish</p>	<p>DESTA, TADDESE T <i>Provider ID:</i> 112721 <i>Board Certified Specialty:</i> No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 1040 TIERRA DEL REY STE 107 CHULA VISTA, CA 91910-7865 <i>Phone:</i> (619) 266-3332 <i>Fax:</i> (619) 266-6000 <i>After Hours Phone:</i> (619) 266-3332 <i>Provider Gender:</i> Male <i>License number:</i> A49164 <i>NPI:</i> 1346326246 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Amharic, Arabic, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Paradise Valley Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i></p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Imperial Health Holdings Medical Group-Sd	<i>Provider ID:</i> 268572 <i>Board Certified Specialty:</i> Yes COMMUNITY CARE IPA LLC 480 4TH AVE STE 316 CHULA VISTA, CA 91910-4403 <i>Phone:</i> (619) 691-0240 <i>Fax:</i> (619) 691-8804 <i>After Hours Phone:</i> (619) 691-0240 <i>Provider Gender:</i> Male <i>License number:</i> G48442 <i>NPI:</i> 1295710747 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd	<i>Provider Gender:</i> Male <i>License number:</i> G48442 <i>NPI:</i> 1295710747 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd
DUQUE, JOHN J <i>Provider ID:</i> 244807 <i>Board Certified Specialty:</i> Yes HEALTH EXCEL IPA INC 480 4TH AVE STE 316 CHULA VISTA, CA 91910-4403 <i>Phone:</i> (619) 691-0240 <i>Fax:</i> (619) 691-8804 <i>After Hours Phone:</i> (619) 691-0240 <i>Provider Gender:</i> Male <i>License number:</i> G48442 <i>NPI:</i> 1295710747 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 21/100 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd	DUQUE, JOHN J <i>Provider ID:</i> 32024 <i>Board Certified Specialty:</i> Yes IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 480 4TH AVE STE 316 CHULA VISTA, CA 91910-4403 <i>Phone:</i> (619) 691-0240 <i>Fax:</i> (619) 691-8804 <i>After Hours Phone:</i> (619) 691-0240	HASSANEIN, TAREK I , MD <i>Provider ID:</i> 269555 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 256 LANDIS AVE STE 202 CHULA VISTA, CA 91910-2650 <i>Phone:</i> (619) 332-1221 <i>Fax:</i> (619) 869-4027 <i>After Hours Phone:</i> (619) 332-1221 <i>Provider Gender:</i> Male <i>License number:</i> A54452 <i>NPI:</i> 1801854450 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic, French, German, Spanish, Urdu <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Parkview Community Hospital Medical
DUQUE, JOHN J , MD		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Center, Sharp Coronado Hosp And Healthcare Ctr, Sharp Chula Vista Med Ctr, Saddleback Memorial Med Ctr, Scripps Mercy Hospital Chula Vista, Riverside Community Hosp, Childrens Hospital At Mission, Grossmont Hospital, Hoag Hospital Irvine, Doctors Hosp Of West Covina Inc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc

HASSANEIN, TAREK I , MD

Provider ID: 269558
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 1323 3RD AVE
 CHULA VISTA, CA 91911-4302
Phone: (619) 409-6900
Fax: (619) 409-6901
After Hours Phone: (619) 409-6900
Provider Gender: Male
License number: A54452
NPI: 1801854450
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, French, German, Spanish, Urdu
Cultural Competency: No
Hospital Affiliation: Parkview Community Hospital Medical Center, Sharp Coronado Hosp And Healthcare Ctr, Sharp Chula Vista Med Ctr, Saddleback

Memorial Med Ctr, Scripps Mercy Hospital Chula Vista, Riverside Community Hosp, Childrens Hospital At Mission, Grossmont Hospital, Hoag Hospital Irvine, Doctors Hosp Of West Covina Inc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc

HASSANEIN, TAREK I

Provider ID: 279359
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 303 H ST STE 103
 CHULA VISTA, CA 91910-5549
Phone: (619) 522-0399
Fax: (619) 947-6469
After Hours Phone: (619) 522-0399
Provider Gender: Male
License number: A54452
NPI: 1801854450
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, French, German, Spanish, Urdu
Cultural Competency: No
Hospital Affiliation: Parkview Community Hospital Medical Center, Sharp Coronado Hosp And Healthcare Ctr, Sharp Chula Vista Med Ctr, Saddleback Memorial Med Ctr, Scripps Mercy Hospital Chula Vista, Riverside Community Hosp, Childrens

Hospital At Mission, Grossmont Hospital, Hoag Hospital Irvine, Doctors Hosp Of West Covina Inc
Medi-Cal Open Panel: Yes
Min/Max Age: 17/100
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc

JOHNSON, MARK Y

Provider ID: 257518
Board Certified Specialty: Yes
 HEALTH EXCEL IPA INC
 480 4TH AVE STE 506
 CHULA VISTA, CA 91910-4414
Phone: (619) 585-0313
Fax: (619) 585-0037
After Hours Phone: (619) 585-0313
Provider Gender: Male
License number: G28163
NPI: 1861421372
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Coronado Hosp And Healthcare Ctr, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 18/99
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p><i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Health Excel Ipa Inc</p> <p>THOMAS, CARLTON W <i>Provider ID:</i> 262218 <i>Board Certified Specialty:</i> No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 1040 TIERRA DEL REY STE 107 CHULA VISTA, CA 91910-7865 <i>Phone:</i> (619) 266-3332 <i>Fax:</i> (619) 266-6000 <i>After Hours Phone:</i> (619) 266-3332 <i>Provider Gender:</i> Male <i>License number:</i> A88112 <i>NPI:</i> 1205881398 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Imperial Health Holdings Medical Group-Sd</p> <p>WIENER, GREGORY J <i>Provider ID:</i> 207348 <i>Board Certified Specialty:</i> Yes HEALTH EXCEL IPA INC 353 CHURCH AVE # A</p>	<p>CHULA VISTA, CA 91910-3906 <i>Phone:</i> (619) 585-8883 <i>Fax:</i> (619) 585-0166 <i>After Hours Phone:</i> (619) 585-8883 <i>Provider Gender:</i> Male <i>License number:</i> A41749 <i>NPI:</i> 1811099534 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> French, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Sharp Memorial Hospital, Scripps Memorial Hospital, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 18/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Blue Shield Promise Health Plan Direct, Health Excel Ipa Inc</p> <p>WIENER, GREGORY J <i>Provider ID:</i> 257480 <i>Board Certified Specialty:</i> Yes BLUE SHIELD PROMISE HEALTH PLAN DIRECT 353 CHURCH AVE # A CHULA VISTA, CA 91910-3906 <i>Phone:</i> (619) 585-8883 <i>Fax:</i> (619) 585-0166 <i>After Hours Phone:</i> (619) 585-8883 <i>Provider Gender:</i> Male <i>License number:</i> A41749 <i>NPI:</i> 1811099534 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> French, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Sharp Memorial Hospital, Scripps Memorial Hospital, Scripps Mercy Hospital</p>	<p><i>Provider Language(s) Spoken:</i> French, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Sharp Memorial Hospital, Scripps Memorial Hospital, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Blue Shield Promise Health Plan Direct, Health Excel Ipa Inc</p> <p>WIENER, GREGORY J <i>Provider ID:</i> 257481 <i>Board Certified Specialty:</i> No BLUE SHIELD PROMISE HEALTH PLAN DIRECT 353 CHURCH AVE # A CHULA VISTA, CA 91910-3906 <i>Phone:</i> (619) 585-8883 <i>Fax:</i> (619) 585-0166 <i>After Hours Phone:</i> (619) 585-8883 <i>Provider Gender:</i> Male <i>License number:</i> A41749 <i>NPI:</i> 1811099534 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> French, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Sharp Memorial Hospital, Scripps Memorial Hospital, Scripps Mercy Hospital</p>
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D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Blue Shield Promise Health Plan Direct, Health Excel Ipa Inc

GENETICS MEDICAL

NIEMI, ANNA-KAISA

Provider ID: 127722

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED FNDTN

435 H ST

CHULA VISTA, CA 91910-4307

Phone: (619) 691-7249

Fax:

After Hours Phone: (619)

691-7249

Provider Gender: Female

License number: A104907

NPI: 1497941397

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE M

Provider ID: 253459

Board Certified Specialty: No

HEALTH EXCEL IPA INC

310 3RD AVE # B21/C11

CHULA VISTA, CA 91910-3953

Phone: (619) 426-0841

Fax:

After Hours Phone: (619)

426-0841

Provider Gender: Female

License number: HA7100

NPI: 1063558856

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Health Excel Ipa Inc

ANDERSON, ELAINE M , MD

Provider ID: 268688

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

310 3RD AVE STE C11

CHULA VISTA, CA 91910-3965

Phone: (619) 426-0841

Fax: (619) 426-9197

After Hours Phone: (619)

426-0841

Provider Gender: Female

License number: HA7100

NPI: 1063558856

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Health Excel Ipa Inc

DAVIS, KELLE L , MD

Provider ID: 268651

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

310 3RD AVE STE C11

CHULA VISTA, CA 91910-3965

Phone: (619) 426-0841

Fax: (619) 426-9197

After Hours Phone: (619)

426-0841

Provider Gender: Female

License number: HA6083

NPI: 1902853344

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Health Excel Ipa Inc

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D. Directorio de proveedores de atención especializada

HEMATOLOGY / ONCOLOGY		
AL-KOURAINY, KOUSAY A <i>Provider ID: 262225</i> <i>Board Certified Specialty: No</i> IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 480 4TH AVE STE 409 CHULA VISTA, CA 91910-4413 <i>Phone: (619) 425-2080</i> <i>Fax: (619) 425-8410</i> <i>After Hours Phone: (619) 425-2080</i> <i>Provider Gender: Male</i> <i>License number: A39783</i> <i>NPI: 1457361271</i> <i>Provider English Spoken: Yes</i> <i>Provider Language(s) Spoken: Arabic, Spanish, Tagalog</i> <i>Cultural Competency: No</i> <i>Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0/999</i> <i>American Sign Language (ASL): No</i> <i>Accessibility: W</i> <i>Hours: M-SA 9AM-5PM</i> <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd	<i>Phone: (619) 425-2080</i> <i>Fax: (619) 425-8410</i> <i>After Hours Phone: (619) 425-2080</i> <i>Provider Gender: Male</i> <i>License number: A39783</i> <i>NPI: 1457361271</i> <i>Provider English Spoken: Yes</i> <i>Provider Language(s) Spoken: Arabic, Spanish, Tagalog</i> <i>Cultural Competency: No</i> <i>Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 18/999</i> <i>American Sign Language (ASL): No</i> <i>Accessibility: W</i> <i>Hours: M-SA 9AM-5PM</i> <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd	<i>Cultural Competency: No</i> <i>Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0/999</i> <i>American Sign Language (ASL): No</i> <i>Accessibility: W</i> <i>Hours: M-SA 9AM-5PM</i> <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd
AL-KOURAINY, KOUSAY A <i>Provider ID: 269224</i> <i>Board Certified Specialty: No</i> HEALTH EXCEL IPA INC 480 4TH AVE STE 409 CHULA VISTA, CA 91910-4413	ITURBE-ALESSIO, IGNACIO <i>Provider ID: 262142</i> <i>Board Certified Specialty: Yes</i> IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 480 4TH AVE STE 409 CHULA VISTA, CA 91910-4413 <i>Phone: (619) 425-2080</i> <i>Fax: (619) 425-8410</i> <i>After Hours Phone: (619) 425-2080</i> <i>Provider Gender: Male</i> <i>License number: A42415</i> <i>NPI: 1972513695</i> <i>Provider English Spoken: Yes</i> <i>Provider Language(s) Spoken: Spanish, Tagalog</i>	ITURBE-ALESSIO, IGNACIO <i>Provider ID: 270498</i> <i>Board Certified Specialty: Yes</i> HEALTH EXCEL IPA INC 480 4TH AVE STE 409 CHULA VISTA, CA 91910-4413 <i>Phone: (619) 425-2080</i> <i>Fax: (619) 425-8410</i> <i>After Hours Phone: (619) 425-2080</i> <i>Provider Gender: Male</i> <i>License number: A42415</i> <i>NPI: 1972513695</i> <i>Provider English Spoken: Yes</i> <i>Provider Language(s) Spoken: Spanish, Tagalog</i> <i>Cultural Competency: No</i> <i>Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0/999</i> <i>American Sign Language (ASL): No</i> <i>Accessibility: W</i> <i>Hours: M-SA 9AM-5PM</i>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

<i>Website:</i>	480 4TH AVE STE 409	Spanish
<i>Email:</i>	CHULA VISTA, CA 91910-4413	<i>Cultural Competency:</i> No
<i>Medical Group(s):</i>	<i>Phone:</i> (619) 425-2080	<i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr, Paradise Valley Hospital, Sharp Memorial Hospital
<i>IPA:</i> Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd	<i>Fax:</i> (619) 425-8410	<i>Medi-Cal Open Panel:</i> No
	<i>After Hours Phone:</i> (619) 425-2080	<i>Min/Max Age:</i> None
	<i>Provider Gender:</i> Male	<i>American Sign Language (ASL):</i> No
JOHNSON, KENNETH B	<i>License number:</i> C149851	<i>Accessibility:</i> W
<i>Provider ID:</i> 262288	<i>NPI:</i> 1437272010	<i>Hours:</i> M-F 8:30AM-5PM, SA 9AM-5PM
<i>Board Certified Specialty:</i> No	<i>Provider English Spoken:</i> Yes	<i>Website:</i>
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD	<i>Provider Language(s) Spoken:</i>	<i>Email:</i>
769 MEDICAL CENTER CT STE 202	<i>Cultural Competency:</i> No	<i>Medical Group(s):</i>
CHULA VISTA, CA 91911-6602	<i>Hospital Affiliation:</i> Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Sharp Chula Vista Med Ctr	<i>IPA:</i>
<i>Phone:</i> (619) 482-8430	<i>Medi-Cal Open Panel:</i> Yes	SOUTH COUNTY HEMATOLOGY ONCOLOGY INC,
<i>Fax:</i> (619) 482-8005	<i>Min/Max Age:</i> 18/999	<i>Provider ID:</i> 200428
<i>After Hours Phone:</i> (619) 482-8430	<i>American Sign Language (ASL):</i> No	<i>Board Certified Specialty:</i>
<i>Provider Gender:</i> Male	<i>Accessibility:</i>	IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
<i>License number:</i> A79802	<i>Hours:</i> M-SA 9AM-5PM	769 MEDICAL CENTER CT STE 202
<i>NPI:</i> 1063527711	<i>Website:</i>	CHULA VISTA, CA 91911-6602
<i>Provider English Spoken:</i> Yes	<i>Email:</i>	<i>Phone:</i> (619) 482-8430
<i>Provider Language(s) Spoken:</i> Spanish	<i>Medical Group(s):</i>	<i>Fax:</i> (619) 482-8005
<i>Cultural Competency:</i> No	<i>IPA:</i> Health Excel Ipa Inc	<i>After Hours Phone:</i> (619) 482-8430
<i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr, Sharp Memorial Hospital	NORTON, MARILYN S	<i>Provider Gender:</i>
<i>Medi-Cal Open Panel:</i> Yes	<i>Provider ID:</i> 65656	<i>License number:</i>
<i>Min/Max Age:</i> 0/999	<i>Board Certified Specialty:</i> No	<i>NPI:</i> 1326124819
<i>American Sign Language (ASL):</i> No	SOUTH COUNTY HEMATOLOGY ONCOLOGY INC	<i>Provider English Spoken:</i> Yes
<i>Accessibility:</i>	769 MEDICAL CENTER CT STE 202	<i>Provider Language(s) Spoken:</i>
<i>Hours:</i> M-SA 9AM-5PM	CHULA VISTA, CA 91911-6602	<i>Cultural Competency:</i> No
<i>Website:</i>	<i>Phone:</i> (619) 482-8430	<i>Hospital Affiliation:</i>
<i>Email:</i>	<i>Fax:</i> (619) 482-8005	<i>Medi-Cal Open Panel:</i> Yes
<i>Medical Group(s):</i>	<i>After Hours Phone:</i> (619) 482-8430	<i>Min/Max Age:</i> 0/999
<i>IPA:</i> Imperial Health Holdings Medical Group-Sd	<i>Provider Gender:</i> Female	<i>American Sign Language (ASL):</i> No
	<i>License number:</i> G70444	<i>Accessibility:</i> W
	<i>NPI:</i> 1417060054	<i>Hours:</i> M-F 8:30AM-5PM, SA
	<i>Provider English Spoken:</i> Yes	
	<i>Provider Language(s) Spoken:</i>	

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D. Directorio de proveedores de atención especializada

9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

INTERNAL MEDICINE GERIATRIC MEDICINE

GUTIERREZ, AIREEN L

Provider ID: 268646

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

480 4TH AVE STE 202

CHULA VISTA, CA 91910-4412

Phone: (619) 427-3361

Fax:

After Hours Phone: (619)

427-3361

Provider Gender: Female

License number: A77031

NPI: 1306857701

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Tagalog

Cultural Competency: No

Hospital Affiliation: Sharp Chula

Vista Med Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Ucsd Medical Group

INTERNAL MEDICINE

AL-KOURAINY, KOUSAY A

Provider ID: 27249

Board Certified Specialty: No

KOUSAY ABDULLAH AL

KOURAINY

480 4TH AVE STE 409

CHULA VISTA, CA 91910-4413

Phone: (619) 425-2080

Fax: (619) 425-8410

After Hours Phone: (619)

425-2080

Provider Gender: Male

License number: A39783

NPI: 1457361271

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, Spanish, Tagalog

Cultural Competency: No

Hospital Affiliation: Sharp Chula

Vista Med Ctr, Scripps Mercy

Hospital Chula Vista, Scripps

Mercy Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

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

9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc,

Imperial Health Holdings Medical

Group-Sd

BEDOYA, LUIS A

Provider ID: 210600

Board Certified Specialty: Yes

HEALTH EXCEL IPA INC

340 4TH AVE STE 4

CHULA VISTA, CA 91910-3885

Phone: (619) 427-1144

Fax: (619) 427-1185

After Hours Phone: (619)

427-1144

Provider Gender: Male

License number: A51105

NPI: 1922119445

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Chula

Vista Med Ctr, Scripps Mercy

Hospital, Paradise Valley

Hospital, Scripps Mercy Hospital

Chula Vista

Medi-Cal Open Panel: Yes

Min/Max Age: 18/120

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, R,

W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc, Imperial

Health Holdings Medical

Group-Sd

CHITKARA, PUJA

Provider ID: 34936

Board Certified Specialty: No

PUJA CHITKARA MD A MED

CORP

765 MEDICAL CENTER CT STE

216

CHULA VISTA, CA 91911-6600

Phone: (619) 623-3000

Fax: (619) 623-3001

After Hours Phone: (619)

623-3000

Provider Gender: Female

License number: A97619

NPI: 1871718189

Provider English Spoken: Yes

Provider Language(s) Spoken:

Hindi, Russian, Spanish, Tagalog

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

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D. Directorio de proveedores de atención especializada

<p>Hospital Chula Vista, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Medi-Cal Open Panel: Yes Min/Max Age: 18/999 American Sign Language (ASL): No</p>	<p>♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>	<p>480 4TH AVE STE 409 CHULA VISTA, CA 91910-4413 <i>Phone:</i> (619) 425-2080 <i>Fax:</i> (619) 425-8410 <i>After Hours Phone:</i> (619) 425-2080 <i>Provider Gender:</i> Male <i>License number:</i> A42415 <i>NPI:</i> 1972513695</p>
<p>♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>	<p>FERNANDEZ, RODRIGO J <i>Provider ID:</i> 282286 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 450 4TH AVE STE 201 CHULA VISTA, CA 91910-4428 <i>Phone:</i> (619) 476-9054 <i>Fax:</i> (619) 476-9056 <i>After Hours Phone:</i> (619) 476-9054 <i>Provider Gender:</i> Male <i>License number:</i> A44441 <i>NPI:</i> 1366539793</p>	<p><i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Tagalog <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No</p>
<p>ESPINOSA-MELENDZ, ENRIQUE, MD <i>Provider ID:</i> 121742 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 480 4TH AVE STE 507 CHULA VISTA, CA 91910-4414 <i>Phone:</i> (619) 477-7779 <i>Fax:</i> (619) 477-6499 <i>After Hours Phone:</i> (619) 477-7779 <i>Provider Gender:</i> Male <i>License number:</i> C42745 <i>NPI:</i> 1881651156</p>	<p><i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Tagalog <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> 18/999 <i>American Sign Language (ASL):</i> No</p>	<p>♿ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>
<p><i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> French, Portuguese, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Paradise Valley Hospital, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Alvarado Hospital Llc, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No</p>	<p>♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Health Excel Ipa Inc</p> <p>ITURBE-ALESSIO, IGNACIO <i>Provider ID:</i> 26924 <i>Board Certified Specialty:</i> No KOUSAY ABDULLAH AL KOURAINY</p>	<p>LIRA, JOSE A <i>Provider ID:</i> 257526 <i>Board Certified Specialty:</i> Yes HEALTH EXCEL IPA INC 841 KUHN DR STE 200 CHULA VISTA, CA 91914-4523 <i>Phone:</i> (619) 482-7301 <i>Fax:</i> (619) 482-7302 <i>After Hours Phone:</i> (619) 482-7301 <i>Provider Gender:</i> Male <i>License number:</i> A33913 <i>NPI:</i> 1356319446 <i>Provider English Spoken:</i> Yes</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
 ♿ *Accessibility:* P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

LIRA, JOSE A , MD

Provider ID: 268769
Board Certified Specialty: Yes
 COMMUNITY CARE IPA LLC
 841 KUHN DR STE 200
 CHULA VISTA, CA 91914-4523
Phone: (619) 482-7301
Fax: (619) 482-7302
After Hours Phone: (619) 482-7301
Provider Gender: Male
License number: A33913
NPI: 1356319446
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
 ♿ *Accessibility:* P, EB, IB, E, R

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

LIRA, JOSE A

Provider ID: 34349
Board Certified Specialty: No
 SOUTH BAY PULMONARY MED GRP
 841 KUHN DR STE 200
 CHULA VISTA, CA 91914-4523
Phone: (619) 482-7301
Fax: (619) 482-7302
After Hours Phone: (619) 482-7301
Provider Gender: Male
License number: A33913
NPI: 1356319446
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:* P, EB, IB, E, R, W
Hours: M,TU,TH 8:30AM-5PM, W 8:30AM-4:45PM, F 8:30AM-4PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical

Group-Sd

MEYER, JILL M

Provider ID: 212814
Board Certified Specialty: Yes
 HEALTH EXCEL IPA INC
 340 4TH AVE STE 4
 CHULA VISTA, CA 91910-3885
Phone: (619) 427-1144
Fax: (619) 427-1185
After Hours Phone: (619) 427-1144
Provider Gender: Female
License number: A95882
NPI: 1255394789
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/120
American Sign Language (ASL): No
 ♿ *Accessibility:* P, EB, IB, E, R, W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

MEYER, JILL M

Provider ID: 212815
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 752 MEDICAL CENTER CT STE 302
 CHULA VISTA, CA 91911-6661

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D. Directorio de proveedores de atención especializada

Phone: (619) 421-3361
Fax: (619) 869-4378
After Hours Phone: (619) 421-3361
Provider Gender: Female
License number: A95882
NPI: 1255394789
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/120
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

MEYER, JILL M , MD

Provider ID: 268563
Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC
340 4TH AVE STE 4
CHULA VISTA, CA 91910-3885
Phone: (619) 427-1144
Fax: (619) 427-1185
After Hours Phone: (619) 427-1144
Provider Gender: Female
License number: A95882
NPI: 1255394789
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula

Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

MEYER, JILL M , MD

Provider ID: 65487
Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC
752 MEDICAL CENTER CT STE 302
CHULA VISTA, CA 91911-6661
Phone: (619) 421-3361
Fax: (619) 869-4378
After Hours Phone: (619) 421-3361
Provider Gender: Female
License number: A95882
NPI: 1255394789
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

NARULA, ARVIN P

Provider ID: 246870
Board Certified Specialty: No
HEALTH EXCEL IPA INC
890 EASTLAKE PKWY STE 205
CHULA VISTA, CA 91914-4521
Phone: (858) 244-6800
Fax: (858) 244-6809
After Hours Phone: (858) 244-6800
Provider Gender: Male
License number: A125186
NPI: 1144535709
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

OLIVER, DEANNA L

Provider ID: 279360
Board Certified Specialty: No
HEALTH EXCEL IPA INC
303 H ST STE 103
CHULA VISTA, CA 91910-5549

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 522-0399
 Fax: (619) 947-6469
 After Hours Phone: (619) 522-0399
 Provider Gender: Female
 License number: A139921
 NPI: 1750725362
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp Chula Vista Med Ctr, Sharp Coronado Hosp And Healthcare Ctr, Chula Vista Comm Hosp
 Medi-Cal Open Panel: Yes
 Min/Max Age: 17/100
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Health Excel Ipa Inc

PATEL, AMAR V

Provider ID: 245184
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 340 4TH AVE STE 4
 CHULA VISTA, CA 91910-3885
 Phone: (858) 810-8000
 Fax: (619) 427-1185
 After Hours Phone: (858) 810-8000
 Provider Gender: Male
 License number: A158295
 NPI: 1821359605
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Gujarati
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Sharp

Chula Vista Med Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/120
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc

PONCE, SONIA G

Provider ID: 259959
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 429 BROADWAY
 CHULA VISTA, CA 91910-4320
 Phone: (619) 434-0204
 Fax: (619) 337-0191
 After Hours Phone: (619) 434-0204
 Provider Gender: Female
 License number: A145008
 NPI: 1164659033
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc,

Health Excel Ipa Inc
REDDY, SMITHA C
 Provider ID: 240282
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 272 CHURCH AVE STE 1
 CHULA VISTA, CA 91910-2718
 Phone: (858) 312-1717
 Fax: (858) 435-0207
 After Hours Phone: (858) 312-1717
 Provider Gender: Female
 License number: A85072
 NPI: 1750534715
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Hindi, Kannada, Telugu
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital, Pomerado Hospital, Scripps Mercy Hospital Chula Vista, Palomar Health Downtown Campus, Scripps Memorial Hospital, Scripps Green Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc

VYAS, DHWANIL V

Provider ID: 210420
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 752 MEDICAL CENTER CT STE 302
 CHULA VISTA, CA 91911-6661

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D. Directorio de proveedores de atención especializada

Phone: (619) 421-3361
 Fax: (619) 869-4378
 After Hours Phone: (619) 421-3361
 Provider Gender: Male
 License number: A125364
 NPI: 1295043388
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Gujarati, Hindi
 Cultural Competency: No
 Hospital Affiliation: Sharp Chula Vista Med Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/120
 American Sign Language (ASL): No
 Accessibility: Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

WATKINS, ELAINE J

Provider ID: 116902
 Board Certified Specialty: No
 PLANNED PARENTHOOD OF THE PACIFIC SOUTHWEST
 1295 BROADWAY STE 201
 CHULA VISTA, CA 91911-2975
 Phone: (888) 743-7526
 Fax:
 After Hours Phone: (888) 743-7526
 Provider Gender: Female
 License number: 20A6234
 NPI: 1225019557
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No

Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: Accessibility: W
 Hours: M 7AM-6PM, TU-TH 7AM-7:30PM, F 7AM-5:30PM, SA 7AM-4PM
 Website:
 Email:
 Medical Group(s):
 IPA:

INTERVENTIONAL CARDIOLOGY

CARLSON, STEVEN K , MD

Provider ID: 244812
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 751 MEDICAL CENTER CT # 211
 CHULA VISTA, CA 91911-6617
 Phone: (619) 616-2100
 Fax:
 After Hours Phone: (619) 616-2100
 Provider Gender: Male
 License number: A109957
 NPI: 1467602946
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Garfield Medical Center, Santa Monica Ucla Med Ctr, Ronald Reagan Ucla Med Ctr, Scripps Mercy Hospital, Sharp Chula Vista Med Ctr, Sharp Memorial Hospital, Alvarado Hospital Llc, Grossmont Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999

American Sign Language (ASL): No
 Accessibility: Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc

MOUSSAVIAN, MEHRAN

Provider ID: 40191
 Board Certified Specialty: No
 CARDIOVASCULAR INSTITUTE OF SAN DIEGO
 765 MEDICAL CENTER CT STE 211
 CHULA VISTA, CA 91911-6600
 Phone: (619) 616-2100
 Fax: (619) 616-2104
 After Hours Phone: (619) 616-2100
 Provider Gender: Male
 License number: 20A7241
 NPI: 1689788234
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Farsi, Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp Chula Vista Med Ctr, Tri City Medical Ctr, Sharp Memorial Hospital, Alvarado Hospital Llc, Grossmont Hospital
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc,

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D. Directorio de proveedores de atención especializada

Health Excel Ipa Inc

MATERNAL AND FETAL MEDICINE

ADAMCZAK, JOANNA E

Provider ID: 205634

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

386 E H ST STE 202

CHULA VISTA, CA 91910-7486

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)
966-6710

Provider Gender: Female

License number: A116982

NPI: 1447428420

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,
Sharp Memorial Hospital, Tri City
Medical Ctr, Sharp Mary Birch
Hosp For Women And Newborns

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

ADAMI, REBECCA R

Provider ID: 272671

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

386 E H ST STE 202

CHULA VISTA, CA 91910-7486

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)
966-6710

Provider Gender: Female

License number: A149389

NPI: 1992149447

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

CASELE, HOLLY L

Provider ID: 205839

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

386 E H ST STE 202

CHULA VISTA, CA 91910-7486

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)
966-6710

Provider Gender: Female

License number: G87630

NPI: 1255348744

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Grossmont
Hospital, Tri City Medical Ctr,
Sharp Mary Birch Hosp For
Women And Newborns, Scripps
Memorial Hospital Encinitas,
Rady Childrens Hospital San
Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

CATANZARITE, VALERIAN A

Provider ID: 205745

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

386 E H ST STE 202

CHULA VISTA, CA 91910-7486

Phone: (858) 966-8133

Fax: (858) 966-1725

After Hours Phone: (858)
966-8133

Provider Gender: Male

License number: G46026

NPI: 1174694939

Provider English Spoken: Yes

Provider Language(s) Spoken:

Russian, Spanish

Cultural Competency: No

Hospital Affiliation: Sharp
Memorial Hospital, Scripps
Memorial Hospital, Tri City
Medical Ctr, Southwest

Healthcare System Wildomar,
Southwest Healthcare System
Murrieta, Grossmont Hospital,
Scripps Memorial Hospital

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Encinitas, Rady Childrens
Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

MCCULLOUGH, DEIRDRE M

Provider ID: 277263
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
386 E H ST STE 202
CHULA VISTA, CA 91910-7486
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858)
966-6710
Provider Gender: Female
License number: C159758
NPI: 1639153018
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Mary
Birch Hosp For Women And
Newborns
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

RICHARDSON, ALVIE C

Provider ID: 264687
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
386 E H ST STE 202
CHULA VISTA, CA 91910-7486
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858)
966-6710
Provider Gender: Male
License number: C160063
NPI: 1154305977
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

SCHWENDEMANN, WADE D

Provider ID: 205440
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
386 E H ST STE 202
CHULA VISTA, CA 91910-7486
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858)
966-6710
Provider Gender: Male
License number: A109228

NPI: 1477563302
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Scripps Memorial Hospital,
Grossmont Hospital, Sharp
Memorial Hospital, Sharp Mary
Birch Hosp For Women And
Newborns, Tri City Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

TITH, TEVY

Provider ID: 205391
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
386 E H ST STE 202
CHULA VISTA, CA 91910-7486
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858)
966-6710
Provider Gender: Female
License number: A103521
NPI: 1588816086
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital, Tri City
Medical Ctr, Sharp Mary Birch

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hosp For Women And Newborns, University Of California Irvine Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

WESTERMANN, MELISSA L

Provider ID: 242523

Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

386 E H ST STE 202

CHULA VISTA, CA 91910-7486

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)

966-6710

Provider Gender: Female

License number: A130149

NPI: 1760730758

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp Mary

Birch Hosp For Women And

Newborns, Earl And Lorraine

Miller Childrens Hsp, Long Beach

Memorial Med Ctr, University Of

California Irvine Med Ctr, Sharp

Memorial Hospital, Grossmont

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

WILLIAMS, KRISTIN M

Provider ID: 206232

Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

386 E H ST STE 202

CHULA VISTA, CA 91910-7486

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)

966-6710

Provider Gender: Female

License number: A72985

NPI: 1992847131

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Sharp Mary

Birch Hosp For Women And

Newborns, Tri City Medical Ctr,

California Pacific Med Ctr,

Stanford Health Care, Lucile

Salter Packard Childrens Hosp,

San Mateo Medical Ctr, Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

NEONATAL / PERINATAL MEDICINE

FLEMING, SARAH E

Provider ID: 205646

Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

435 H ST

CHULA VISTA, CA 91910-4307

Phone: (619) 691-7000

Fax:

After Hours Phone: (619)

691-7000

Provider Gender: Female

License number: A89838

NPI: 1679809826

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital, Scripps Mercy Hospital

Chula Vista

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

MARDOUM, RIAD

Provider ID: 262123

Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

435 H ST

CHULA VISTA, CA 91910-4307

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 691-7000
 Fax:
 After Hours Phone: (619) 691-7000
 Provider Gender: Male
 License number: A36720
 NPI: 1417050584
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Arabic, Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital, Rady Childrens Hospital San Diego, Scripps Mercy Hospital Chula Vista, Ucsd Medical Ctr

Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessability:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

NIEMI, ANNA-KAISA

Provider ID: 262159
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 435 H ST
 CHULA VISTA, CA 91910-4307
 Phone: (858) 966-5818
 Fax: (858) 966-7483
 After Hours Phone: (858) 966-5818
 Provider Gender: Female
 License number: A104907
 NPI: 1497941397
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessability:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

NEPHROLOGY

AFSHAR, MASOUD

Provider ID: 284629
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 296 H ST STE 304
 CHULA VISTA, CA 91910-4779
 Phone: (760) 736-8091
 Fax: (760) 736-8092
 After Hours Phone: (760) 736-8091
 Provider Gender: Male
 License number: A105324
 NPI: 1225287378
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Farsi, Turkish
 Cultural Competency: No
 Hospital Affiliation: El Centro Regional Medical Center, Pioneers Memorial Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessability:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):

IPA: Health Excel Ipa Inc

BEDOYA, LUIS A , MD

Provider ID: 39369
 Board Certified Specialty: Yes
 BALBOA NEPHROLOGY MED GRP INC
 340 4TH AVE STE 4
 CHULA VISTA, CA 91910-3885
 Phone: (619) 427-1144
 Fax: (619) 427-1185
 After Hours Phone: (619) 427-1144
 Provider Gender: Male

License number: A51105

NPI: 1922119445
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital, Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessability: P, EB, IB, E, R, W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

BEDOYA, LUIS A

Provider ID: 39369
 Board Certified Specialty: No
 BALBOA NEPHROLOGY MED GRP INC

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

340 4TH AVE STE 4
CHULA VISTA, CA 91910-3885
Phone: (619) 427-1144
Fax: (619) 427-1185
After Hours Phone: (619) 427-1144
Provider Gender: Male
License number: A51105
NPI: 1922119445
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital, Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, W
Hours: M-F 9AM-5PM, SA 9AM-5PM
Website: www.bnmg.org
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

BEDOYA, LUIS A

Provider ID: 39369
Board Certified Specialty: Yes
BALBOA NEPHROLOGY MED GRP INC
340 4TH AVE STE 4
CHULA VISTA, CA 91910-3885
Phone: (619) 427-1144
Fax: (619) 427-1185
After Hours Phone: (619) 427-1144

Provider Gender: Male
License number: A51105
NPI: 1922119445
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital, Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

GOLLAPUDI, RAGHAVA R

Provider ID: 246813
Board Certified Specialty: No
HEALTH EXCEL IPA INC
890 EASTLAKE PKWY STE 205
CHULA VISTA, CA 91914-4521
Phone: (858) 244-6800
Fax: (858) 244-6809
After Hours Phone: (858) 244-6800
Provider Gender: Male
License number: A73392
NPI: 1467429191
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp

Memorial Hospital, Scripps Mercy Hospital Chula Vista, Grossmont Hospital, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

HOREISH, ADAM K

Provider ID: 210543
Board Certified Specialty: No
HEALTH EXCEL IPA INC
340 4TH AVE STE 4
CHULA VISTA, CA 91910-3885
Phone: (619) 427-1144
Fax: (619) 427-1185
After Hours Phone: (619) 427-1144
Provider Gender: Male
License number: C56089
NPI: 1760461206
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Paradise Valley Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/120
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:

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D. Directorio de proveedores de atención especializada

Medical Group(s):

IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

HOREISH, ADAM K

Provider ID: 99947

Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC

340 4TH AVE STE 4

CHULA VISTA, CA 91910-3885

Phone: (619) 427-1144

Fax: (619) 427-1185

After Hours Phone: (619) 427-1144

Provider Gender: Male

License number: C56089

NPI: 1760461206

Provider English Spoken: Yes

Provider Language(s) Spoken: Arabic, Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Paradise Valley Hospital, Scripps Mercy Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL): No

♿ *Accessibility:* P, EB, IB, E, R, W

Hours: M-F 9AM-5PM, SA 9AM-5PM

Website: www.bnmg.org

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

HOREISH, ADAM K

Provider ID: 99947

Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC

340 4TH AVE STE 4

CHULA VISTA, CA 91910-3885

Phone: (619) 427-1144

Fax: (619) 427-1185

After Hours Phone: (619) 427-1144

Provider Gender: Male

License number: C56089

NPI: 1760461206

Provider English Spoken: Yes

Provider Language(s) Spoken: Arabic, Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Paradise Valley Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

♿ *Accessibility:* P, EB, IB, E, R
Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

HOREISH, ADAM K , MD

Provider ID: 99947

Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC

340 4TH AVE STE 4

CHULA VISTA, CA 91910-3885

Phone: (619) 427-1144

Fax: (619) 427-1185

After Hours Phone: (619) 427-1144

Provider Gender: Male

License number: C56089

NPI: 1760461206

Provider English Spoken: Yes

Provider Language(s) Spoken: Arabic, Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Paradise Valley Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

♿ *Accessibility:* P, EB, IB, E, R
Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

KAYAL, ANAS

Provider ID: 284390

Board Certified Specialty: No
HEALTH EXCEL IPA INC
296 H ST STE 304

CHULA VISTA, CA 91910-4779

Phone: (760) 736-8091

Fax: (760) 736-8092

After Hours Phone: (760) 736-8091

Provider Gender: Male

License number: A112450

NPI: 1851376917

Provider English Spoken: Yes

Provider Language(s) Spoken: Arabic

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Palomar Medical Center, Temecula Valley Hospital Inc, Scripps Memorial Hospital Encinitas

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

KHAING, KATHY

Provider ID: 128616
Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC
 340 4TH AVE STE 4
 CHULA VISTA, CA 91910-3885
Phone: (619) 427-1144

Fax:
After Hours Phone: (619) 427-1144
Provider Gender: Female
License number: A127006
NPI: 1912219155
Provider English Spoken: Yes
Provider Language(s) Spoken: Burmese, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Paradise Valley Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

♿ *Accessibility:* P, EB, IB, E, R, W

Hours: M-F 9AM-5PM, SA 9AM-5PM

Website: www.bnmg.org

Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

KHAING, KATHY, MD

Provider ID: 205003
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 340 4TH AVE STE 4
 CHULA VISTA, CA 91910-3885
Phone: (619) 427-1144
Fax: (619) 427-1185
After Hours Phone: (619) 427-1144

Provider Gender: Female
License number: A127006
NPI: 1912219155
Provider English Spoken: Yes
Provider Language(s) Spoken: Burmese, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Paradise Valley Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

KHAING, KATHY

Provider ID: 210574

Board Certified Specialty: No
HEALTH EXCEL IPA INC
 340 4TH AVE STE 4
 CHULA VISTA, CA 91910-3885
Phone: (619) 427-1144
Fax: (619) 427-1185
After Hours Phone: (619) 427-1144
Provider Gender: Female
License number: A127006
NPI: 1912219155

Provider English Spoken: Yes
Provider Language(s) Spoken: Burmese, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Paradise Valley Hospital, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/120
American Sign Language (ASL): No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

LOZADA-PASTORIO, ELIZABETH

Provider ID: 212909
Board Certified Specialty: Yes
HEALTH EXCEL IPA INC
 340 4TH AVE STE 4
 CHULA VISTA, CA 91910-3885
Phone: (619) 427-1144
Fax: (619) 427-1185
After Hours Phone: (619) 427-1144
Provider Gender: Female
License number: A90108
NPI: 1730160425

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/120
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

LOZADA-PASTORIO, ELIZABETH

Provider ID: 212910
Board Certified Specialty: No
HEALTH EXCEL IPA INC
752 MEDICAL CENTER CT STE 302
CHULA VISTA, CA 91911-6661
Phone: (619) 421-3361
Fax: (619) 869-4378
After Hours Phone: (619) 421-3361
Provider Gender: Female
License number: A90108
NPI: 1730160425
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital

Medi-Cal Open Panel: Yes
Min/Max Age: 18/120
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

LOZADA-PASTORIO, ELIZABETH

Provider ID: 262289
Board Certified Specialty: Yes
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
340 4TH AVE STE 4
CHULA VISTA, CA 91910-3885
Phone: (619) 427-1144
Fax: (619) 427-1185
After Hours Phone: (619) 427-1144
Provider Gender: Female
License number: A90108
NPI: 1730160425
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd
LOZADA-PASTORIO, ELIZABETH, MD
Provider ID: 268556
Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC
340 4TH AVE STE 4
CHULA VISTA, CA 91910-3885
Phone: (619) 427-1144
Fax: (619) 427-1185
After Hours Phone: (619) 427-1144
Provider Gender: Female
License number: A90108
NPI: 1730160425
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd
LOZADA-PASTORIO, ELIZABETH
Provider ID: 31395

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
BALBOA NEPHROLOGY MED
GRP INC
340 4TH AVE STE 4
CHULA VISTA, CA 91910-3885
Phone: (619) 427-1144
Fax: (619) 427-1185
After Hours Phone: (619)
427-1144
Provider Gender: Female
License number: A90108
NPI: 1730160425
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr, Scripps Mercy
Hospital Chula Vista, Scripps
Mercy Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* P, EB, IB, E, R,
W
Hours: M-F 9AM-5PM, SA
9AM-5PM
Website: www.bnmg.org
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

LOZADA-PASTORIO, ELIZABETH, MD

Provider ID: 31395
Board Certified Specialty: No
BALBOA NEPHROLOGY MED
GRP INC
340 4TH AVE STE 14
CHULA VISTA, CA 91910-3813

Phone: (619) 427-1144
Fax: (619) 427-1185
After Hours Phone: (619)
427-1144
Provider Gender: Female
License number: A90108
NPI: 1730160425
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr, Scripps Mercy
Hospital Chula Vista, Scripps
Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

LOZADA-PASTORIO, ELIZABETH

Provider ID: 31395
Board Certified Specialty: No
BALBOA NEPHROLOGY MED
GRP INC
340 4TH AVE STE 14
CHULA VISTA, CA 91910-3813
Phone: (619) 427-1144
Fax: (619) 427-1185
After Hours Phone: (619)
427-1144
Provider Gender: Female
License number: A90108
NPI: 1730160425
Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr, Scripps Mercy
Hospital Chula Vista, Scripps
Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

LOZADA-PASTORIO, ELIZABETH

Provider ID: 82253
Board Certified Specialty: No
BALBOA NEPHROLOGY MED
GRP INC
752 MEDICAL CENTER CT STE
302
CHULA VISTA, CA 91911-6661
Phone: (619) 421-3361
Fax: (619) 869-4378
After Hours Phone: (619)
421-3361
Provider Gender: Female
License number: A90108
NPI: 1730160425
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr, Scripps Mercy
Hospital Chula Vista, Scripps
Mercy Hospital

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-F 9AM-5PM, SA
9AM-5PM
Website: www.bnmg.org
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

LOZADA-PASTORIO, ELIZABETH

Provider ID: 82253
Board Certified Specialty: No
BALBOA NEPHROLOGY MED
GRP INC
752 MEDICAL CENTER CT STE
302
CHULA VISTA, CA 91911-6661
Phone: (619) 421-3361
Fax: (619) 869-4378
After Hours Phone: (619)
421-3361
Provider Gender: Female
License number: A90108
NPI: 1730160425
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr, Scripps Mercy
Hospital Chula Vista, Scripps
Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

MEYER, JILL M

Provider ID: 262110
Board Certified Specialty: Yes
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
340 4TH AVE STE 4
CHULA VISTA, CA 91910-3885
Phone: (619) 427-1144
Fax: (619) 427-1185
After Hours Phone: (619)
427-1144
Provider Gender: Female
License number: A95882
NPI: 1255394789
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

MEYER, JILL M

Provider ID: 262111

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
752 MEDICAL CENTER CT STE
302
CHULA VISTA, CA 91911-6661
Phone: (619) 421-3361
Fax: (619) 869-4378
After Hours Phone: (619)
421-3361
Provider Gender: Female
License number: A95882
NPI: 1255394789
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

MEYER, JILL M

Provider ID: 55805
Board Certified Specialty: No
BALBOA NEPHROLOGY MED
GRP INC
340 4TH AVE STE 4
CHULA VISTA, CA 91910-3885
Phone: (619) 427-1144
Fax:
After Hours Phone: (619)
427-1144
Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: A95882
 NPI: 1255394789
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp Chula Vista Med Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: P, EB, IB, E, R, W
 Hours: M-F 9AM-5PM, SA 9AM-5PM
 Website: www.bnmg.org
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

MEYER, JILL M

Provider ID: 65487
 Board Certified Specialty: No
 BALBOA NEPHROLOGY MED GRP INC
 752 MEDICAL CENTER CT STE 302
 CHULA VISTA, CA 91911-6661
 Phone: (619) 421-3361
 Fax:
 After Hours Phone: (619) 421-3361
 Provider Gender: Female
 License number: A95882
 NPI: 1255394789
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp Chula Vista Med Ctr

Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-F 9AM-5PM, SA 9AM-5PM
 Website: www.bnmg.org
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

PATEL, AMAR V , MD

Provider ID: 245639
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 340 4TH AVE STE 4
 CHULA VISTA, CA 91910-3885
 Phone: (858) 810-8000
 Fax: (619) 427-1185
 After Hours Phone: (858) 810-8000
 Provider Gender: Male
 License number: A158295
 NPI: 1821359605
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Gujarati
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Sharp Chula Vista Med Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc,

Health Excel Ipa Inc
SOLTERO, RICARDO A
 Provider ID: 213987
 Board Certified Specialty: Yes
 HEALTH EXCEL IPA INC
 340 4TH AVE STE 4
 CHULA VISTA, CA 91910-3885
 Phone: (619) 427-1144
 Fax: (619) 427-1185
 After Hours Phone: (619) 427-1144
 Provider Gender: Male
 License number: A68995
 NPI: 1841295482
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/120
 American Sign Language (ASL): No
 ♿ Accessibility: P, EB, IB, E, R
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

SOLTERO, RICARDO A

Provider ID: 257492
 Board Certified Specialty: Yes
 BLUE SHIELD PROMISE HEALTH PLAN DIRECT
 340 4TH AVE STE 4
 CHULA VISTA, CA 91910-3885

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>Phone: (619) 427-1144 Fax: (619) 427-1185 After Hours Phone: (619) 427-1144 Provider Gender: Male License number: A68995 NPI: 1841295482 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: P, EB, IB, E, R Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>	<p>Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: P, EB, IB, E, R Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>	<p>Min/Max Age: None American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>
<p>SOLTERO, RICARDO A Provider ID: 262113 Board Certified Specialty: Yes IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 340 4TH AVE STE 4 CHULA VISTA, CA 91910-3885 Phone: (619) 427-1144 Fax: (619) 427-1185 After Hours Phone: (619) 427-1144 Provider Gender: Male License number: A68995 NPI: 1841295482 Provider English Spoken: Yes</p>	<p>SOLTERO, RICARDO A , MD Provider ID: 26526 Board Certified Specialty: No BALBOA NEPHROLOGY MED GRP INC 340 4TH AVE STE 14 CHULA VISTA, CA 91910-3813 Phone: (619) 427-1144 Fax: (619) 427-1185 After Hours Phone: (619) 427-1144 Provider Gender: Male License number: A68995 NPI: 1841295482 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital Medi-Cal Open Panel: Yes</p>	<p>SOLTERO, RICARDO A Provider ID: 26526 Board Certified Specialty: No BALBOA NEPHROLOGY MED GRP INC 340 4TH AVE STE 4 CHULA VISTA, CA 91910-3885 Phone: (619) 427-1144 Fax: (619) 427-1185 After Hours Phone: (619) 427-1144 Provider Gender: Male License number: A68995 NPI: 1841295482 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No Accessibility: P, EB, IB, E, R, W Hours: M-F 9AM-5PM, SA 9AM-5PM Website: www.bnmg.org</p>

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D. Directorio de proveedores de atención especializada

Email:

Medical Group(s):

IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

SOLTERO, RICARDO A

Provider ID: 26526

Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC

340 4TH AVE STE 14

CHULA VISTA, CA 91910-3813

Phone: (619) 427-1144

Fax: (619) 427-1185

After Hours Phone: (619)

427-1144

Provider Gender: Male

License number: A68995

NPI: 1841295482

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Chula

Vista Med Ctr, Scripps Mercy

Hospital Chula Vista, Scripps

Mercy Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

SOLTERO, RICARDO A , MD

Provider ID: 268490

Board Certified Specialty: Yes

COMMUNITY CARE IPA LLC

340 4TH AVE STE 4

CHULA VISTA, CA 91910-3885

Phone: (619) 427-1144

Fax: (619) 427-1185

After Hours Phone: (619)

427-1144

Provider Gender: Male

License number: A68995

NPI: 1841295482

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Chula

Vista Med Ctr, Scripps Mercy

Hospital Chula Vista, Scripps

Mercy Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility: P, EB, IB, E, R

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

SOLTERO, RICARDO A , MD

Provider ID: 268491

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

752 MEDICAL CENTER CT STE

302

CHULA VISTA, CA 91911-6661

Phone: (619) 421-3361

Fax:

After Hours Phone: (619)

421-3361

Provider Gender: Male

License number: A68995

NPI: 1841295482

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Chula

Vista Med Ctr, Scripps Mercy

Hospital Chula Vista

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

VIDEEN, JOHN

Provider ID: 212802

Board Certified Specialty: No

HEALTH EXCEL IPA INC

752 MEDICAL CENTER CT STE

302

CHULA VISTA, CA 91911-6661

Phone: (619) 421-3361

Fax: (619) 869-4378

After Hours Phone: (619)

421-3361

Provider Gender: Male

License number: G59271

NPI: 1043318199

Provider English Spoken: Yes

Provider Language(s) Spoken:

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D. Directorio de proveedores de atención especializada

Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 18/120
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

VIDEEN, JOHN

Provider ID: 262286
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 752 MEDICAL CENTER CT STE 302
 CHULA VISTA, CA 91911-6661
Phone: (619) 421-3361
Fax: (619) 869-4378
After Hours Phone: (619) 421-3361
Provider Gender: Male
License number: G59271
NPI: 1043318199
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Sharp Coronado Hosp And Healthcare Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

VIDEEN, JOHN

Provider ID: 265266
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 786 3RD AVE STE B
 CHULA VISTA, CA 91910-5826
Phone: (619) 425-0797
Fax: (619) 425-0596
After Hours Phone: (619) 425-0797
Provider Gender: Male
License number: G59271
NPI: 1043318199
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 18/120
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial

Health Holdings Medical Group-Sd

VIDEEN, JOHN, MD

Provider ID: 65646
Board Certified Specialty: No
 BALBOA NEPHROLOGY MED GRP INC
 752 MEDICAL CENTER CT STE 302
 CHULA VISTA, CA 91911-6661
Phone: (619) 421-3361
Fax: (619) 869-4378
After Hours Phone: (619) 421-3361
Provider Gender: Male
License number: G59271
NPI: 1043318199
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

VIDEEN, JOHN

Provider ID: 65646
Board Certified Specialty: No
 BALBOA NEPHROLOGY MED

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D. Directorio de proveedores de atención especializada

GRP INC
752 MEDICAL CENTER CT STE
302
CHULA VISTA, CA 91911-6661
Phone: (619) 421-3361
Fax: (619) 869-4378
After Hours Phone: (619)
421-3361
Provider Gender: Male
License number: G59271
NPI: 1043318199
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr, Sharp Coronado
Hosp And Healthcare Ctr,
Scripps Mercy Hospital Chula
Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-F 9AM-5PM, SA
9AM-5PM
Website: www.bnmg.org
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

VYAS, DHWANIL V

Provider ID: 106551
Board Certified Specialty: No
BALBOA NEPHROLOGY MED
GRP INC
752 MEDICAL CENTER CT STE
302
CHULA VISTA, CA 91911-6661

Phone: (619) 421-3361
Fax:
After Hours Phone: (619)
421-3361
Provider Gender: Male
License number: A125364
NPI: 1295043388
Provider English Spoken: Yes
Provider Language(s) Spoken:
Gujarati, Hindi
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-F 9AM-5PM, SA
9AM-5PM
Website: www.bnmg.org
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

VYAS, DHWANIL V , MD

Provider ID: 106551
Board Certified Specialty: No
BALBOA NEPHROLOGY MED
GRP INC
752 MEDICAL CENTER CT STE
302
CHULA VISTA, CA 91911-6661
Phone: (619) 421-3361
Fax: (619) 869-4378
After Hours Phone: (619)
421-3361
Provider Gender: Male
License number: A125364
NPI: 1295043388
Provider English Spoken: Yes
Provider Language(s) Spoken:

Gujarati, Hindi
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

VYAS, DHWANIL V

Provider ID: 262366
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
752 MEDICAL CENTER CT STE
302
CHULA VISTA, CA 91911-6661
Phone: (619) 421-3361
Fax: (619) 869-4378
After Hours Phone: (619)
421-3361
Provider Gender: Male
License number: A125364
NPI: 1295043388
Provider English Spoken: Yes
Provider Language(s) Spoken:
Gujarati, Hindi
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc, Imperial
 Health Holdings Medical
 Group-Sd

WIJEYAKUMAR, VIJAYALAKSHMI

Provider ID: 265229
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 786 3RD AVE STE B
 CHULA VISTA, CA 91910-5826
Phone: (619) 425-0797
Fax: (619) 425-0596
After Hours Phone: (619)
 425-0797
Provider Gender: Female
License number: A49216
NPI: 1053491332
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Romanian, Spanish, Tamil,
 Vietnamese
Cultural Competency: No
Hospital Affiliation: South Coast
 Global Medical Center Inc,
 Fountain Valley Regional Hosp
 And Med Ctr, Hoag Hospital
 Irvine, Hoag Memorial Hospital
 Presbyterian, Orange Coast
 Mem Med Ctr, Orange County
 Global Medical Center Inc,
 Kindred Hospital Westminster,
 Encompass Health Rehabilitation
 Hospital Of Tustin
Medi-Cal Open Panel: Yes
Min/Max Age: 18/120
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
 IPA: Health Excel Ipa Inc

YUAN, HENRY, MD

Provider ID: 268551
Board Certified Specialty: Yes
 COMMUNITY CARE IPA LLC
 340 4TH AVE STE 4
 CHULA VISTA, CA 91910-3885
Phone: (619) 427-1144
Fax: (619) 427-1185
After Hours Phone: (619)
 427-1144
Provider Gender: Male
License number: A120403
NPI: 1043442379
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Chinese, Mandarin, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital, Paradise Valley
 Hospital, Providence St Joseph
 Hospital, Providence St Jude
 Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ♿ *Accessibility:* P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
 IPA: Community Care Ipa Llc

NEUROLOGY

MOHAMMAD, AHMAD SHAH, MD

Provider ID: 127244
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC

750 MEDICAL CENTER CT STE
 6
 CHULA VISTA, CA 91911-6634
Phone: (619) 337-7900
Fax: (619) 337-7902
After Hours Phone: (619)
 337-7900
Provider Gender: Male
License number: A98831
NPI: 1902973472
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Arabic, Farsi, French, German,
 Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
 Hospital, Scripps Mercy Hospital
 Chula Vista, Scripps Mercy
 Hospital, Sharp Chula Vista Med
 Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc

OBSTETRICS / GYNECOLOGY

ADAMCZAK, JOANNA E

Provider ID: 121816
Board Certified Specialty: No
 RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDTN
 386 E H ST STE 202
 CHULA VISTA, CA 91910-7486

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D. Directorio de proveedores de atención especializada

Phone: (858) 966-6710
 Fax:
 After Hours Phone: (858) 966-6710
 Provider Gender: Female
 License number: A116982
 NPI: 1447428420
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Tri City Medical Ctr, Sharp Mary Birch Hosp For Women And Newborns
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

ALIMONOS, LYSISTRATI A

Provider ID: 114817
 Board Certified Specialty: No
 CHULA VISTA FAMILY HLTH CTR
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
 Phone: (619) 515-2500
 Fax:
 After Hours Phone: (619) 515-2500
 Provider Gender: Female
 License number: 20A14919
 NPI: 1619397031
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No

Hospital Affiliation: Scripps Mercy Hospital, Grossmont Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, R, T, ME
 Hours: M-SA 9AM-5PM
 Website: www.fhcsd.org
 Email:
 Medical Group(s): Chula Vista Family Hlth Ctr
 IPA:

ANGUIANO, FRANCISCO E

Provider ID: 205791
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 765 MEDICAL CENTER CT STE 209
 CHULA VISTA, CA 91911-6600
 Phone: (619) 427-8892
 Fax: (619) 422-7660
 After Hours Phone: (619) 427-8892
 Provider Gender: Male
 License number: G61584
 NPI: 1215921697
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 16/999
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:

Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd, Rady Childrens Health Network

ANGUIANO, FRANCISCO E

Provider ID: 241992
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 765 MEDICAL CENTER CT STE 209
 CHULA VISTA, CA 91911-6600
 Phone: (619) 427-8892
 Fax: (619) 422-7660
 After Hours Phone: (619) 427-8892
 Provider Gender: Male
 License number: G61584
 NPI: 1215921697
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 15/99
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd, Rady Childrens Health Network

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D. Directorio de proveedores de atención especializada

<p>ANGUIANO, FRANCISCO E , MD <i>Provider ID:</i> 268797 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 765 MEDICAL CENTER CT STE 209 CHULA VISTA, CA 91911-6600 <i>Phone:</i> (619) 427-8892 <i>Fax:</i> (619) 422-7660 <i>After Hours Phone:</i> (619) 427-8892 <i>Provider Gender:</i> Male <i>License number:</i> G61584 <i>NPI:</i> 1215921697 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd, Rady Childrens Health Network</p>	<p>765 MEDICAL CENTER CT STE 209 CHULA VISTA, CA 91911-6600 <i>Phone:</i> (619) 427-8892 <i>Fax:</i> (619) 422-7660 <i>After Hours Phone:</i> (619) 427-8892 <i>Provider Gender:</i> Male <i>License number:</i> G61584 <i>NPI:</i> 1215921697 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd, Rady Childrens Health Network</p>	<p><i>License number:</i> G53756 <i>NPI:</i> 1033138714 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Tagalog <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc</p>
<p>ANGUIANO, FRANCISCO E <i>Provider ID:</i> 27382 <i>Board Certified Specialty:</i> No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD</p>	<p>ATIGA, SCHUBERT J , MD <i>Provider ID:</i> 268953 <i>Board Certified Specialty:</i> Yes COMMUNITY CARE IPA LLC 752 MEDICAL CENTER CT STE 106 CHULA VISTA, CA 91911-6659 <i>Phone:</i> (619) 482-8406 <i>Fax:</i> (619) 482-6656 <i>After Hours Phone:</i> (619) 482-8406 <i>Provider Gender:</i> Male</p>	<p>ATIGA, SCHUBERT J <i>Provider ID:</i> 27235 <i>Board Certified Specialty:</i> No LIFETIME WOMENS HEALTH CARE MED ASSOCS INC 752 MEDICAL CENTER CT STE 106 CHULA VISTA, CA 91911-6659 <i>Phone:</i> (619) 482-8406 <i>Fax:</i> <i>After Hours Phone:</i> (619) 482-8406 <i>Provider Gender:</i> Male <i>License number:</i> G53756 <i>NPI:</i> 1033138714 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Tagalog <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W</p>

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D. Directorio de proveedores de atención especializada

Hours: M,TU,TH 9AM-5PM,
W,F,SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

BUECHNER, CHARLENE A

Provider ID: 127424
Board Certified Specialty: No
CHULA VISTA FAMILY HLTH
CTR
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2500
Fax:
After Hours Phone: (619)
515-2500
Provider Gender: Female
License number: A68463
NPI: 1376663831
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Scripps
Mercy Hospital, Scripps Mercy
Hospital Chula Vista, Sharp Mary
Birch Hosp For Women And
Newborns
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
T, ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Chula Vista
Family Hlth Ctr
IPA:

CARSON, LATISA S

Provider ID: 27071
Board Certified Specialty: No
UNIQUE HEALTHCARE FOR
WOMEN MEDICAL CORP
891 KUHN DR STE 111
CHULA VISTA, CA 91914-3551
Phone: (619) 475-9744
Fax:
After Hours Phone: (619)
475-9744
Provider Gender: Female
License number: A72235
NPI: 1245229129
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-TH 8AM-5PM, F
8AM-3PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CARTER, KHALIL J

Provider ID: 127374
Board Certified Specialty: No
CHULA VISTA FAMILY HLTH
CTR
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2500
Fax:
After Hours Phone: (619)
515-2500
Provider Gender: Male
License number: A113001
NPI: 1225231582

Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
T, ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Chula Vista
Family Hlth Ctr
IPA:

CASELE, HOLLY L

Provider ID: 121820
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDRN
386 E H ST STE 202
CHULA VISTA, CA 91910-7486
Phone: (858) 966-6710
Fax:
After Hours Phone: (858)
966-6710
Provider Gender: Female
License number: G87630
NPI: 1255348744
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Grossmont
Hospital, Tri City Medical Ctr,
Sharp Mary Birch Hosp For
Women And Newborns, Scripps
Memorial Hospital Encinitas,
Rady Childrens Hospital San
Diego

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D. Directorio de proveedores de atención especializada

<p>Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network</p>	<p>Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network</p>	<p>Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 660 OLD TELEGRAPH CANYON RD CHULA VISTA, CA 91910-6587 Phone: (619) 482-2400 Fax: (619) 482-2411 After Hours Phone: (619) 482-2400 Provider Gender: Male License number: A105379 NPI: 1538347760 Provider English Spoken: Yes Provider Language(s) Spoken: Cantonese, Chinese, Mandarin, Spanish, Vietnamese Cultural Competency: No Hospital Affiliation: Sharp Chula Vista Med Ctr Medi-Cal Open Panel: Yes Min/Max Age: 0/18 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network</p>
<p>CATANZARITE, VALERIAN A Provider ID: 121849 Board Certified Specialty: No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 386 E H ST STE 202 CHULA VISTA, CA 91910-7486 Phone: (858) 966-8133 Fax: After Hours Phone: (858) 966-8133 Provider Gender: Male License number: G46026 NPI: 1174694939 Provider English Spoken: Yes Provider Language(s) Spoken: Russian, Spanish Cultural Competency: No Hospital Affiliation: Sharp Memorial Hospital, Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Grossmont Hospital, Tri City Medical Ctr, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Rady Childrens Hospital San Diego Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No</p>	<p>CERVANTES, SANDRA M Provider ID: 114861 Board Certified Specialty: No CHULA VISTA FAMILY HLTH CTR 251 LANDIS AVE CHULA VISTA, CA 91910-2628 Phone: (619) 515-2500 Fax: After Hours Phone: (619) 515-2500 Provider Gender: Female License number: A118095 NPI: 1073701041 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No Accessibility: P, EB, IB, E, R, T, ME Hours: M-SA 9AM-5PM Website: www.fhcsd.org Email: Medical Group(s): Chula Vista Family Hlth Ctr IPA:</p>	<p>FOLCH TORRES-AGUIAR, BEATRIZ M Provider ID: 120505 Board Certified Specialty: No CHULA VISTA FAMILY HLTH CTR 251 LANDIS AVE CHULA VISTA, CA 91910-2628 Phone: (619) 515-2500 Fax: After Hours Phone: (619) 515-2500 Provider Gender: Female</p>
<p>CHAC, RICK T Provider ID: 210483</p>		

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D. Directorio de proveedores de atención especializada

License number: A148014

NPI: 1457794752

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Yue Chinese

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital, Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♠ Accessibility: P, EB, IB, E, R, T, ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Chula Vista Family Hlth Ctr

IPA:

LIPSCHITZ, LISA S

Provider ID: 115426

Board Certified Specialty: No

CHULA VISTA FAMILY HLTH CTR

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2500

Fax:

After Hours Phone: (619)

515-2500

Provider Gender: Female

License number: A72005

NPI: 1649208711

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital, Grossmont Hospital,

Sharp Coronado Hosp And

Healthcare Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♠ Accessibility: P, EB, IB, E, R, T, ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Chula Vista Family Hlth Ctr

IPA:

LOEFFLER, ALLISON M

Provider ID: 115559

Board Certified Specialty: No

CHULA VISTA FAMILY HLTH CTR

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2500

Fax:

After Hours Phone: (619)

515-2500

Provider Gender: Female

License number: A116680

NPI: 1700073962

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital, Scripps Mercy Hospital,

Scripps Mercy Hospital Chula

Vista

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♠ Accessibility: P, EB, IB, E, R, T, ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Chula Vista Family Hlth Ctr

IPA:

MELENDEZ BERRIOS, IARA DEL M

Provider ID: 115025

Board Certified Specialty: No
CHULA VISTA FAMILY HLTH CTR

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2500

Fax:

After Hours Phone: (619)

515-2500

Provider Gender: Female

License number: A114181

NPI: 1740514249

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital, Scripps Mercy Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♠ Accessibility: P, EB, IB, E, R, T, ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Chula Vista

Family Hlth Ctr

IPA:

RODRIGUEZ JEREZ, ROBERTO D

Provider ID: 130086

Board Certified Specialty: No
CHULA VISTA FAMILY HLTH CTR

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

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D. Directorio de proveedores de atención especializada

Phone: (619) 515-2500

Fax:

After Hours Phone: (619)
515-2500

Provider Gender: Male

License number: A154298

NPI: 1710316450

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Sharp Coronado Hosp
And Healthcare Ctr, Grossmont
Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: P, EB, IB, E, R,
T, ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Chula Vista
Family Hlth Ctr

IPA:

SEFA-BOAKYE, KOFI D

Provider ID: 205412

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

340 4TH AVE STE 5

CHULA VISTA, CA 91910-3813

Phone: (619) 422-2121

Fax: (619) 422-2427

After Hours Phone: (619)

422-2121

Provider Gender: Male

License number: G59670

NPI: 1902993660

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Chula
Vista Med Ctr, Sharp Coronado
Hosp And Healthcare Ctr,
Scripps Mercy Hospital Chula
Vista

Medi-Cal Open Panel: Yes

Min/Max Age: 16/999

American Sign Language (ASL):
No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc, Rady
Childrens Health Network

TITH, TEVY

Provider ID: 73302

Board Certified Specialty: No

RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDDTN

386 E H ST STE 202

CHULA VISTA, CA 91910-7486

Phone: (858) 966-6710

Fax:

After Hours Phone: (858)

966-6710

Provider Gender: Female

License number: A103521

NPI: 1588816086

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital, Tri City
Medical Ctr, Sharp Mary Birch
Hosp For Women And
Newborns, University Of
California Irvine Med Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

WILLIAMS, KRISTIN M

Provider ID: 121985

Board Certified Specialty: No

RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDDTN

386 E H ST STE 202

CHULA VISTA, CA 91910-7486

Phone: (858) 966-6710

Fax:

After Hours Phone: (858)

966-6710

Provider Gender: Female

License number: A72985

NPI: 1992847131

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Stanford
Health Care, Lucile Salter

Packard Childrens Hosp, San
Mateo Medical Ctr, Sharp

Memorial Hospital, Sharp Mary

Birch Hosp For Women And

Newborns, Tri City Medical Ctr,

California Pacific Med Ctr, Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Email: CTR
Medical Group(s): 251 LANDIS AVE
IPA: Rady Childrens Health Network

WINESBURG, JENNIFER J
Provider ID: 114800
Board Certified Specialty: No
CHULA VISTA FAMILY HLTH CTR
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2500
Fax:
After Hours Phone: (619) 515-2500
Provider Gender: Female
License number: 20A11535
NPI: 1811162456
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Desert Regional Med Ctr, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Chula Vista Family Hlth Ctr
IPA:

ZIEG, ALAN J
Provider ID: 114831
Board Certified Specialty: No
CHULA VISTA FAMILY HLTH

CTR
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2500
Fax:
After Hours Phone: (619) 515-2500
Provider Gender: Male
License number: G78814
NPI: 1699790634
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Chula Vista Family Hlth Ctr
IPA:

OPHTHALMOLOGY

ABDALLAH, WALID F
Provider ID: 269257
Board Certified Specialty: No
HEALTH EXCEL IPA INC
 835 3RD AVE STE A
 CHULA VISTA, CA 91911-1352
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619) 425-7755
Provider Gender: Male
License number: A146829

NPI: 1871912717
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Korean, Mandarin, Spanish
Cultural Competency: No
Hospital Affiliation: Good Samaritan Hospital Los Angeles, Childrens Hosp Of Los Angeles
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

BRYANT, DUANE M
Provider ID: 212675
Board Certified Specialty: No
HEALTH EXCEL IPA INC
 342 F ST
 CHULA VISTA, CA 91910-2625
Phone: (619) 422-1471
Fax: (619) 422-0450
After Hours Phone: (619) 422-1471
Provider Gender: Male
License number: C155562
NPI: 1023117124
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 13/999
American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>No ☯ <i>Accessibility</i>: P, EB, IB, E <i>Hours</i>: M-SA 9AM-5PM <i>Website</i>: <i>Email</i>: <i>Medical Group(s)</i>: <i>IPA</i>: Community Care Ipa Llc, Health Excel Ipa Inc</p>	<p>CALIFORNIA RETINA ASSOCS 835 3RD AVE STE A CHULA VISTA, CA 91911-1352 <i>Phone</i>: (619) 425-7755 <i>Fax</i>: <i>After Hours Phone</i>: (619) 425-7755 <i>Provider Gender</i>: Male <i>License number</i>: G47836 <i>NPI</i>: 1366530792 <i>Provider English Spoken</i>: Yes <i>Provider Language(s) Spoken</i>: Spanish, Tagalog, Vietnamese <i>Cultural Competency</i>: No <i>Hospital Affiliation</i>: El Centro Regional Medical Center, Pioneers Memorial Hospital, Alvarado Hospital Llc <i>Medi-Cal Open Panel</i>: No <i>Min/Max Age</i>: None <i>American Sign Language (ASL)</i>: No</p>	<p>Spanish, Tagalog, Vietnamese <i>Cultural Competency</i>: No <i>Hospital Affiliation</i>: El Centro Regional Medical Center, Pioneers Memorial Hospital, Alvarado Hospital Llc <i>Medi-Cal Open Panel</i>: Yes <i>Min/Max Age</i>: None <i>American Sign Language (ASL)</i>: No ☯ <i>Accessibility</i>: <i>Hours</i>: M-SA 9AM-5PM <i>Website</i>: <i>Email</i>: <i>Medical Group(s)</i>: <i>IPA</i>: Community Care Ipa Llc, Health Excel Ipa Inc</p>
<p>BRYANT, DUANE M , MD <i>Provider ID</i>: 244753 <i>Board Certified Specialty</i>: No COMMUNITY CARE IPA LLC 342 F ST CHULA VISTA, CA 91910-2625 <i>Phone</i>: (619) 422-1471 <i>Fax</i>: (619) 422-0450 <i>After Hours Phone</i>: (619) 422-1471 <i>Provider Gender</i>: Male <i>License number</i>: C155562 <i>NPI</i>: 1023117124 <i>Provider English Spoken</i>: Yes <i>Provider Language(s) Spoken</i>: Spanish <i>Cultural Competency</i>: No <i>Hospital Affiliation</i>: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital <i>Medi-Cal Open Panel</i>: Yes <i>Min/Max Age</i>: 13/130 <i>American Sign Language (ASL)</i>: No</p>	<p>☯ <i>Accessibility</i>: W <i>Hours</i>: M-SA 9AM-5PM <i>Website</i>: <i>Email</i>: <i>Medical Group(s)</i>: <i>IPA</i>: Community Care Ipa Llc, Health Excel Ipa Inc</p>	<p>CARRABY, ARNETT <i>Provider ID</i>: 212807 <i>Board Certified Specialty</i>: Yes HEALTH EXCEL IPA INC 835 3RD AVE STE A CHULA VISTA, CA 91911-1352 <i>Phone</i>: (619) 425-7755 <i>Fax</i>: (619) 425-2138 <i>After Hours Phone</i>: (619) 425-7755 <i>Provider Gender</i>: Male <i>License number</i>: G47836 <i>NPI</i>: 1366530792 <i>Provider English Spoken</i>: Yes <i>Provider Language(s) Spoken</i>: Spanish, Tagalog, Vietnamese <i>Cultural Competency</i>: No <i>Hospital Affiliation</i>: El Centro Regional Medical Center, Pioneers Memorial Hospital, Alvarado Hospital Llc <i>Medi-Cal Open Panel</i>: Yes <i>Min/Max Age</i>: 0/999 <i>American Sign Language (ASL)</i>: No ☯ <i>Accessibility</i>: <i>Hours</i>: M-SA 9AM-5PM</p>
<p>☯ <i>Accessibility</i>: P, EB, IB, E <i>Hours</i>: M-SA 9AM-5PM <i>Website</i>: <i>Email</i>: <i>Medical Group(s)</i>: <i>IPA</i>: Community Care Ipa Llc, Health Excel Ipa Inc</p>	<p>CARRABY, ARNETT, MD <i>Provider ID</i>: 103061 <i>Board Certified Specialty</i>: Yes CALIFORNIA RETINA ASSOCS 835 3RD AVE STE A CHULA VISTA, CA 91911-1352 <i>Phone</i>: (619) 425-7755 <i>Fax</i>: (619) 425-2138 <i>After Hours Phone</i>: (619) 425-7755 <i>Provider Gender</i>: Male <i>License number</i>: G47836 <i>NPI</i>: 1366530792 <i>Provider English Spoken</i>: Yes <i>Provider Language(s) Spoken</i>:</p>	
<p>CARRABY, ARNETT <i>Provider ID</i>: 103061 <i>Board Certified Specialty</i>: Yes</p>		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc

CASTILLEJOS-RIOS, DAVID

Provider ID: 202144
Board Certified Specialty: Yes
 HEALTH EXCEL IPA INC
 342 F ST
 CHULA VISTA, CA 91910-2625
Phone: (619) 422-1471
Fax: (619) 422-0450
After Hours Phone: (619)
 422-1471
Provider Gender: Male
License number: A44482
NPI: 1558446401
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Chula
 Vista Med Ctr, Scripps Mercy
 Hospital Chula Vista, Paradise
 Valley Hospital, Scripps Mercy
 Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ♿ *Accessibility:* P, EB, IB, E
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc, Imperial
 Health Holdings Medical
 Group-Sd

CASTILLEJOS-RIOS, DAVID

Provider ID: 26867
Board Certified Specialty: Yes
 IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD
 342 F ST
 CHULA VISTA, CA 91910-2625
Phone: (619) 422-1471
Fax: (619) 422-0450
After Hours Phone: (619)
 422-1471
Provider Gender: Male
License number: A44482
NPI: 1558446401
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Chula
 Vista Med Ctr, Scripps Mercy
 Hospital Chula Vista, Paradise
 Valley Hospital, Scripps Mercy
 Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:* P, EB, IB, E
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc, Imperial
 Health Holdings Medical
 Group-Sd

CASTILLEJOS-RIOS, DAVID, MD

Provider ID: 268782
Board Certified Specialty: Yes
 COMMUNITY CARE IPA LLC
 342 F ST
 CHULA VISTA, CA 91910-2625
Phone: (619) 422-1471
Fax: (619) 422-0450
After Hours Phone: (619)
 422-1471
Provider Gender: Male
License number: A44482

NPI: 1558446401
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Chula
 Vista Med Ctr, Scripps Mercy
 Hospital Chula Vista, Paradise
 Valley Hospital, Scripps Mercy
 Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ♿ *Accessibility:* P, EB, IB, E
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc, Imperial
 Health Holdings Medical
 Group-Sd

CASTILLEJOS, MARIA E

Provider ID: 127777
Board Certified Specialty: Yes
 HEALTH EXCEL IPA INC
 342 F ST
 CHULA VISTA, CA 91910-2625
Phone: (619) 422-1471
Fax: (619) 422-0450
After Hours Phone: (619)
 422-1471
Provider Gender: Female
License number: A37652
NPI: 1043395098
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula
 Vista Med Ctr, Scripps Mercy
 Hospital Chula Vista, Scripps
 Mercy Hospital, Scripps
 Memorial Hospital, Paradise

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Valley Hospital, Sharp Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

♿ *Accessibility:* P, EB, IB, E

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

CASTILLEJOS, MARIA E

Provider ID: 26458

Board Certified Specialty: Yes

CASTILLEJOS EYE INSTITUTE MEDICAL GROUP

342 F ST

CHULA VISTA, CA 91910-2625

Phone: (619) 422-1471

Fax: (619) 422-0450

After Hours Phone: (619) 422-1471

Provider Gender: Female

License number: A37652

NPI: 1043395098

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Scripps Memorial Hospital, Paradise Valley Hospital, Sharp Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

♿ *Accessibility:* P, EB, IB, E

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

CASTILLEJOS, MARIA E

Provider ID: 26458

Board Certified Specialty: No

CASTILLEJOS EYE INSTITUTE MEDICAL GROUP

342 F ST

CHULA VISTA, CA 91910-2625

Phone: (619) 422-1471

Fax:

After Hours Phone: (619) 422-1471

Provider Gender: Female

License number: A37652

NPI: 1043395098

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Scripps Memorial Hospital, Paradise Valley Hospital, Sharp Memorial Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL): No

♿ *Accessibility:* P, EB, IB, E, W
Hours: M,W,F 8AM-5PM, TU,TH 7AM-5PM, SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

CASTILLEJOS, MARIA E , MD

Provider ID: 268747

Board Certified Specialty: Yes

COMMUNITY CARE IPA LLC
342 F ST

CHULA VISTA, CA 91910-2625

Phone: (619) 422-1471

Fax: (619) 422-0450

After Hours Phone: (619) 422-1471

Provider Gender: Female

License number: A37652

NPI: 1043395098

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Scripps Memorial Hospital, Paradise Valley Hospital, Sharp Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

♿ *Accessibility:* P, EB, IB, E

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

CHAVEZ, CESAR T

Provider ID: 246267

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
HEALTH EXCEL IPA INC
 835 3RD AVE STE A
 CHULA VISTA, CA 91911-1352
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619) 425-7755
Provider Gender: Male
License number: G51615
NPI: 1720082563
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: El Centro Regional Medical Center, Paradise Valley Hospital, Scripps Mercy Hospital, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

CHAVEZ, CESAR T , MD

Provider ID: 268776
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 835 3RD AVE STE A
 CHULA VISTA, CA 91911-1352
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619) 425-7755
Provider Gender: Male
License number: G51615
NPI: 1720082563

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: El Centro Regional Medical Center, Paradise Valley Hospital, Scripps Mercy Hospital, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

DELENGOCKY, TAYSON

Provider ID: 78153
Board Certified Specialty: Yes
CALIFORNIA RETINA ASSOCS
 835 3RD AVE STE A
 CHULA VISTA, CA 91911-1352
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619) 425-7755
Provider Gender: Male
License number: 20A12784
NPI: 1164637153
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, French, Spanish, Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation: El Centro Regional Medical Center, Alvarado Hospital Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):

No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

DELENGOCKY, TAYSON

Provider ID: 78153
Board Certified Specialty: No
CALIFORNIA RETINA ASSOCS
 835 3RD AVE STE A
 CHULA VISTA, CA 91911-1352
Phone: (619) 425-7755
Fax:
After Hours Phone: (619) 425-7755
Provider Gender: Male
License number: 20A12784
NPI: 1164637153
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, French, Spanish, Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation: El Centro Regional Medical Center, Alvarado Hospital Llc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

DELENGOCKY, TAYSON

Provider ID: 78153
Board Certified Specialty: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>CALIFORNIA RETINA ASSOCS 835 3RD AVE STE A CHULA VISTA, CA 91911-1352 Phone: (619) 425-7755 Fax: (619) 425-2138 After Hours Phone: (619) 425-7755 Provider Gender: Male License number: 20A12784 NPI: 1164637153 Provider English Spoken: Yes Provider Language(s) Spoken: Farsi, French, Spanish, Tagalog, Vietnamese Cultural Competency: No Hospital Affiliation: El Centro Regional Medical Center, Alvarado Hospital Llc Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Health Excel Ipa Inc</p>	<p>Provider Language(s) Spoken: Spanish, Tagalog Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Paradise Valley Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No Accessibility: W Hours: M-F 8AM-5PM, SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc</p>	<p>Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc</p>
<p>ECHEGOYEN, JULIO C Provider ID: 101658 Board Certified Specialty: No EYE INSTITUTE OF CALIFORNIA MED GRP 480 4TH AVE STE 201 CHULA VISTA, CA 91910-4412 Phone: (619) 427-3355 Fax: After Hours Phone: (619) 427-3355 Provider Gender: Male License number: A121431 NPI: 1770801540 Provider English Spoken: Yes</p>	<p>ECHEGOYEN, JULIO C , MD Provider ID: 257137 Board Certified Specialty: Yes COMMUNITY CARE IPA LLC 835 3RD AVE STE A CHULA VISTA, CA 91911-1352 Phone: (619) 425-7755 Fax: (619) 425-9057 After Hours Phone: (619) 425-7755 Provider Gender: Male License number: A121431 NPI: 1770801540 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish, Tagalog Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Paradise Valley Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Medi-Cal Open Panel: Yes</p>	<p>GOLDMAN, RONALD J , MD Provider ID: 26488 Board Certified Specialty: Yes COMMUNITY CARE IPA LLC 480 4TH AVE STE 201 CHULA VISTA, CA 91910-4412 Phone: (619) 427-3355 Fax: (619) 427-0955 After Hours Phone: (619) 427-3355 Provider Gender: Male License number: C27512 NPI: 1114928082 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish, Tagalog Cultural Competency: No Hospital Affiliation: Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista, Sharp Memorial Hospital, Scripps Memorial Hospital, Scripps Mercy Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc</p> <p>KHANDAN, SARA, MD</p>

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D. Directorio de proveedores de atención especializada

Provider ID: 268580
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 835 3RD AVE STE A
 CHULA VISTA, CA 91911-1352
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619) 425-7755
Provider Gender: Female
License number: A155828
NPI: 1063850808
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Hemet Valley Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

KHANDAN, SARA
Provider ID: 269742
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 835 3RD AVE STE A
 CHULA VISTA, CA 91911-1352
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619) 425-7755
Provider Gender: Female
License number: A155828
NPI: 1063850808
Provider English Spoken: Yes
Provider Language(s) Spoken:

Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Hemet Valley Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

MANI, MAJID, MD
Provider ID: 269193
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 835 3RD AVE STE A
 CHULA VISTA, CA 91911-1352
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619) 425-7755
Provider Gender: Male
License number: A60640
NPI: 1043261373
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: El Centro Regional Medical Center, Sharp Memorial Hospital, Pioneers Memorial Hospital, Scripps Memorial Hospital, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc
MANI, MAJID
Provider ID: 26922
Board Certified Specialty: No
 CALIFORNIA RETINA ASSOCS
 835 3RD AVE STE A
 CHULA VISTA, CA 91911-1352
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619) 425-7755
Provider Gender: Male
License number: A60640
NPI: 1043261373
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: El Centro Regional Medical Center, Sharp Memorial Hospital, Pioneers Memorial Hospital, Scripps Memorial Hospital, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc
MANI, MAJID
Provider ID: 26922
Board Certified Specialty: No
 CALIFORNIA RETINA ASSOCS

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

835 3RD AVE STE A
CHULA VISTA, CA 91911-1352
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619)
425-7755

Provider Gender: Male
License number: A60640
NPI: 1043261373
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: El Centro
Regional Medical Center, Sharp
Memorial Hospital, Pioneers
Memorial Hospital, Scripps
Memorial Hospital, Ucsd Medical
Ctr

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

MANI, NASRIN, MD

Provider ID: 269199
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
835 3RD AVE STE A
CHULA VISTA, CA 91911-1352
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619)
425-7755
Provider Gender: Female
License number: A40473
NPI: 1023061314
Provider English Spoken: Yes

Provider Language(s) Spoken:
Arabic, Faroese, Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Sharp
Memorial Hospital, Ucsd Medical
Ctr

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

MANI, NASRIN

Provider ID: 27356
Board Certified Specialty: No
CALIFORNIA RETINA ASSOCS
835 3RD AVE STE A
CHULA VISTA, CA 91911-1352
Phone: (619) 425-7755
Fax:
After Hours Phone: (619)
425-7755
Provider Gender: Female
License number: A40473
NPI: 1023061314

Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Faroese, Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Sharp
Memorial Hospital, Ucsd Medical
Ctr

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

MANI, NASRIN

Provider ID: 27356
Board Certified Specialty: No
CALIFORNIA RETINA ASSOCS
835 3RD AVE STE A
CHULA VISTA, CA 91911-1352
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619)
425-7755
Provider Gender: Female
License number: A40473
NPI: 1023061314

Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Faroese, Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Alvarado
Hospital Llc, Scripps Memorial
Hospital, Sharp Memorial
Hospital, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

MCDONNELL, EMMA C

Provider ID: 280857
Board Certified Specialty: No
HEALTH EXCEL IPA INC
835 3RD AVE STE A

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>CHULA VISTA, CA 91911-1352 Phone: (619) 425-7755 Fax: (619) 425-2138 After Hours Phone: (619) 425-7755 Provider Gender: Female License number: A172521 NPI: 1023357670 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Sharp Memorial Hospital Medi-Cal Open Panel: Yes Min/Max Age: 18/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Health Excel Ipa Inc</p>	<p>American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Health Excel Ipa Inc</p>	<p>Provider ID: 106478 Board Certified Specialty: No CALIFORNIA RETINA ASSOCS 835 3RD AVE STE A CHULA VISTA, CA 91911-1352 Phone: (619) 425-7755 Fax: (619) 425-2138 After Hours Phone: (619) 425-7755 Provider Gender: Male License number: A130529 NPI: 1386961423 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: El Centro Regional Medical Center, Scripps Memorial Hospital, Sharp Chula Vista Med Ctr, Sharp Memorial Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Health Excel Ipa Inc</p>
<p>MCDONNELL, EMMA C Provider ID: 283536 Board Certified Specialty: No COMMUNITY CARE IPA LLC 835 3RD AVE STE A CHULA VISTA, CA 91911-1352 Phone: (619) 425-7755 Fax: (619) 425-2138 After Hours Phone: (619) 425-7755 Provider Gender: Female License number: A172521 NPI: 1023357670 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Sharp Memorial Hospital Medi-Cal Open Panel: Yes Min/Max Age: 18/200</p>	<p>MONTGOMERY, GORDON J Provider ID: 272246 Board Certified Specialty: No HEALTH EXCEL IPA INC 835 3RD AVE STE A CHULA VISTA, CA 91911-1352 Phone: (619) 425-7755 Fax: (619) 425-2138 After Hours Phone: (619) 425-7755 Provider Gender: Male License number: G31591 NPI: 1144226234 Provider English Spoken: Yes Provider Language(s) Spoken: Korean, Spanish, Tagalog Cultural Competency: No Hospital Affiliation: Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>	<p>MOSS, JASON M , MD Provider ID: 106478 Board Certified Specialty: No CALIFORNIA RETINA ASSOCS 835 3RD AVE STE A CHULA VISTA, CA 91911-1352 Phone: (619) 425-7755 Fax: (619) 425-2138 After Hours Phone: (619) 425-7755 Provider Gender: Male License number: A130529</p>
	<p>MOSS, JASON M</p>	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1386961423
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: El Centro Regional Medical Center, Scripps Memorial Hospital, Sharp Chula Vista Med Ctr, Sharp Memorial Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc

PAPASTERGIU, GEORGIOS

Provider ID: 204144
 Board Certified Specialty: Yes
 IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 835 3RD AVE STE A
 CHULA VISTA, CA 91911-1352
 Phone: (619) 425-7755
 Fax: (619) 425-2138
 After Hours Phone: (619) 425-7755
 Provider Gender: Male
 License number: A127706
 NPI: 1790054393
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Arabic, Farsi, French, Greek, Italian, Spanish
 Cultural Competency: No
 Hospital Affiliation: El Centro Regional Medical Center, Scripps Memorial Hospital, Sharp Memorial Hospital

Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

PAPASTERGIU, GEORGIOS, MD

Provider ID: 269189
 Board Certified Specialty: Yes
 COMMUNITY CARE IPA LLC
 835 3RD AVE STE A
 CHULA VISTA, CA 91911-1352
 Phone: (619) 425-7755
 Fax: (619) 425-2138
 After Hours Phone: (619) 425-7755
 Provider Gender: Male
 License number: A127706
 NPI: 1790054393
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Arabic, Farsi, French, Greek, Italian, Spanish
 Cultural Competency: No
 Hospital Affiliation: El Centro Regional Medical Center, Scripps Memorial Hospital, Sharp Memorial Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:

Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

PAPASTERGIU, GEORGIOS

Provider ID: 80983
 Board Certified Specialty: Yes
 CALIFORNIA RETINA ASSOCS
 835 3RD AVE STE A
 CHULA VISTA, CA 91911-1352
 Phone: (619) 425-7755
 Fax: (619) 425-2138
 After Hours Phone: (619) 425-7755
 Provider Gender: Male
 License number: A127706
 NPI: 1790054393
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Arabic, Farsi, French, Greek, Italian, Spanish
 Cultural Competency: No
 Hospital Affiliation: El Centro Regional Medical Center, Scripps Memorial Hospital, Sharp Memorial Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

PAPASTERGIU, GEORGIOS

Provider ID: 80983
 Board Certified Specialty: No

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D. Directorio de proveedores de atención especializada

CALIFORNIA RETINA ASSOCS
835 3RD AVE STE A
CHULA VISTA, CA 91911-1352
Phone: (619) 425-7755
Fax: (619) 425-2318
After Hours Phone: (619) 425-7755
Provider Gender: Male
License number: A127706
NPI: 1790054393
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Farsi, French, Greek, Italian, Spanish
Cultural Competency: No
Hospital Affiliation: El Centro Regional Medical Center, Scripps Memorial Hospital, Sharp Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

PEAIRS, JAMES J

Provider ID: 126597
Board Certified Specialty: No
CALIFORNIA RETINA ASSOCS
835 3RD AVE STE A
CHULA VISTA, CA 91911-1352
Phone: (619) 425-7755
Fax:
After Hours Phone: (619) 425-7755
Provider Gender: Male
License number: A155296

NPI: 1609135623
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Sharp Chula Vista Med Ctr, El Centro Regional Medical Center, Sharp Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

PEAIRS, JAMES J

Provider ID: 212798
Board Certified Specialty: Yes
HEALTH EXCEL IPA INC
835 3RD AVE STE A
CHULA VISTA, CA 91911-1352
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619) 425-7755
Provider Gender: Male
License number: A155296
NPI: 1609135623
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Sharp Chula Vista Med Ctr, El Centro Regional Medical Center, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

PEAIRS, JAMES J , MD

Provider ID: 268818
Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC
835 3RD AVE STE A
CHULA VISTA, CA 91911-1352
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619) 425-7755
Provider Gender: Male
License number: A155296
NPI: 1609135623
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Sharp Chula Vista Med Ctr, El Centro Regional Medical Center, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

PONS, MAURICIO E

Provider ID: 23410
Board Certified Specialty: No
CALIFORNIA RETINA ASSOCS
835 3RD AVE STE A
CHULA VISTA, CA 91911-1352
Phone: (619) 425-7755

Fax:
After Hours Phone: (619)
425-7755

Provider Gender: Male
License number: A87650
NPI: 1376723759
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, El Centro
Regional Medical Center, Sharp
Memorial Hospital, Scripps
Mercy Hospital

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

PONS, MAURICIO E

Provider ID: 23410
Board Certified Specialty: No
CALIFORNIA RETINA ASSOCS
835 3RD AVE STE A
CHULA VISTA, CA 91911-1352
Phone: (619) 425-7755

Fax: (619) 425-2138
After Hours Phone: (619)
425-7755

Provider Gender: Male
License number: A87650
NPI: 1376723759
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, El Centro
Regional Medical Center, Sharp
Memorial Hospital, Childrens
Hosp Of Los Angeles
Medi-Cal Open Panel: Yes

Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

PONS, MAURICIO E , MD

Provider ID: 269242
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
835 3RD AVE STE A
CHULA VISTA, CA 91911-1352
Phone: (619) 425-7755

Fax: (619) 425-2138
After Hours Phone: (619)
425-7755

Provider Gender: Male
License number: A87650
NPI: 1376723759
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, El Centro
Regional Medical Center, Sharp
Memorial Hospital, Scripps

Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

RAJSBAUM, MARTIN

Provider ID: 117787
Board Certified Specialty: No
CALIFORNIA RETINA ASSOCS
835 3RD AVE STE A
CHULA VISTA, CA 91911-1352
Phone: (619) 425-7755

Fax: (619) 425-2138
After Hours Phone: (619)
425-7755

Provider Gender: Male
License number: A42670
NPI: 1912999400
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Russian, Spanish,
Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr, Scripps Memorial
Hospital Encinitas, Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

RAJSBAUM, MARTIN

Provider ID: 117787
Board Certified Specialty: No
CALIFORNIA RETINA ASSOCS
835 3RD AVE STE A
CHULA VISTA, CA 91911-1352
Phone: (619) 425-7755

Fax:
After Hours Phone: (619)
425-7755

Provider Gender: Male
License number: A42670
NPI: 1912999400
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Russian, Spanish,
Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr, Scripps Memorial
Hospital Encinitas, Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

RAJSBAUM, MARTIN, MD

Provider ID: 268749
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
835 3RD AVE STE A
CHULA VISTA, CA 91911-1352

Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619)
425-7755

Provider Gender: Male
License number: A42670
NPI: 1912999400
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Russian, Spanish,
Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr, Scripps Memorial
Hospital Encinitas, Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

SASSANI, PATRICK P

Provider ID: 130013
Board Certified Specialty: No
HEALTH EXCEL IPA INC
835 3RD AVE STE A
CHULA VISTA, CA 91911-1352
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619)
425-7755

Provider Gender: Male
License number: A150205
NPI: 1033411061
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Spanish, Tagalog

Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr, El Centro
Regional Medical Center, Sharp
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

SASSANI, PATRICK P , MD

Provider ID: 269076
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
835 3RD AVE STE A
CHULA VISTA, CA 91911-1352
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619)
425-7755

Provider Gender: Male
License number: A150205
NPI: 1033411061
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Spanish, Tagalog

Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr, El Centro
Regional Medical Center, Sharp
Memorial Hospital

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Email:
Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc

SCHER, BARRY M , MD
Provider ID: 268828
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 480 4TH AVE STE 201
 CHULA VISTA, CA 91910-4412
Phone: (619) 427-3355
Fax: (619) 427-0955
After Hours Phone: (619)
 427-3355
Provider Gender: Male
License number: G23827
NPI: 1235106899
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula
 Vista Med Ctr, Scripps Mercy
 Hospital Chula Vista, Scripps
 Mercy Hospital, Paradise Valley
 Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc

SCHER, BARRY M , MD
Provider ID: 268830
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 835 3RD AVE STE A
 CHULA VISTA, CA 91911-1352

Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619)
 425-7755
Provider Gender: Male
License number: G23827
NPI: 1235106899
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula
 Vista Med Ctr, Scripps Mercy
 Hospital Chula Vista, Scripps
 Mercy Hospital, Paradise Valley
 Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc

SKAF, AYHAM R , MD
Provider ID: 269074
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 835 3RD AVE STE A
 CHULA VISTA, CA 91911-1352
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619)
 425-7755
Provider Gender: Male
License number: A120584
NPI: 1285888628
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Arabic, Spanish
Cultural Competency: No
Hospital Affiliation: El Centro

Regional Medical Center, Sharp
 Memorial Hospital, Scripps
 Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc

SKAF, AYHAM R
Provider ID: 63195
Board Certified Specialty: No
 CALIFORNIA RETINA ASSOCS
 835 3RD AVE STE A
 CHULA VISTA, CA 91911-1352
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619)
 425-7755
Provider Gender: Male
License number: A120584
NPI: 1285888628
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Arabic, Spanish
Cultural Competency: No
Hospital Affiliation: El Centro
 Regional Medical Center, Sharp
 Memorial Hospital, Scripps
 Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

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D. Directorio de proveedores de atención especializada

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

SKAF, AYHAM R

Provider ID: 63195
Board Certified Specialty: No
CALIFORNIA RETINA ASSOCS
835 3RD AVE STE A
CHULA VISTA, CA 91911-1352
Phone: (619) 425-7755

Fax:
After Hours Phone: (619)
425-7755
Provider Gender: Male
License number: A120584
NPI: 1285888628
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Spanish
Cultural Competency: No
Hospital Affiliation: El Centro
Regional Medical Center, Sharp
Memorial Hospital, Scripps
Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

STAINER, GREGORY A

Provider ID: 269696
Board Certified Specialty: No
HEALTH EXCEL IPA INC
835 3RD AVE STE A
CHULA VISTA, CA 91911-1352

Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619)
425-7755
Provider Gender: Male
License number: G41135
NPI: 1295729465
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

STAINER, GREGORY A , MD

Provider ID: 272892
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
835 3RD AVE STE A
CHULA VISTA, CA 91911-1352
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619)
425-7755
Provider Gender: Male
License number: G41135
NPI: 1295729465
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital
Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

VADDOOTKER, SAUJANYA, MD

Provider ID: 268635
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
480 4TH AVE STE 201
CHULA VISTA, CA 91910-4412
Phone: (619) 427-3355
Fax: (619) 427-0955
After Hours Phone: (619)
427-3355
Provider Gender: Female
License number: A156489
NPI: 1295170678
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital Chula Vista, Scripps
Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

ZABANEH, ALEXANDER I

Provider ID: 265217

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 342 F ST
 CHULA VISTA, CA 91910-2625
Phone: (619) 422-1471
Fax: (619) 422-0450
After Hours Phone: (619) 422-1471
Provider Gender: Male
License number: A154697
NPI: 1346687233
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Paradise Valley Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ♿ *Accessibility:* P, EB, IB, E
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

OTOLARYNGOLOGY

BANTHIA, VISHAL
Provider ID: 283696
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 577 3RD AVE
 CHULA VISTA, CA 91910-5619
Phone: (619) 426-5181
Fax: (619) 426-0714
After Hours Phone: (619) 426-5181

Provider Gender: Male
License number: A86814
NPI: 1043396559
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Washington Hospital, Cedars Sinai Medical Center, Scripps Memorial Hospital, Sharp Memorial Hospital, Temecula Valley Hospital Inc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Health Excel Ipa Inc

JANSEN, CORNELIUS J , MD
Provider ID: 255731
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 577 3RD AVE
 CHULA VISTA, CA 91910-5619
Phone: (619) 426-5181
Fax: (619) 426-0714
After Hours Phone: (619) 426-5181
Provider Gender: Male
License number: G85048
NPI: 1285712380
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL): No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc

PATSIAS, ALEXIS, MD
Provider ID: 268806
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 765 MEDICAL CENTER CT STE 210
 CHULA VISTA, CA 91911-6600
Phone: (619) 482-0565
Fax: (619) 482-2775
After Hours Phone: (619) 482-0565
Provider Gender: Male
License number: A160436
NPI: 1326452855
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Sharp Chula Vista Med Ctr, Sharp Memorial Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc

PATSIAS, ALEXIS

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider ID: 278419
Board Certified Specialty: No
HEALTH EXCEL IPA INC
765 MEDICAL CENTER CT STE
210
CHULA VISTA, CA 91911-6600
Phone: (619) 482-0565
Fax: (619) 482-2775
After Hours Phone: (619)
482-0565
Provider Gender: Male
License number: A160436
NPI: 1326452855
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital, Sharp Chula Vista Med
 Ctr, Sharp Memorial Hospital,
 Scripps Mercy Hospital Chula
 Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc

SCHALCH LEPE, PAUL

Provider ID: 105766
Board Certified Specialty: No
EAR NOSE AND THROAT OF
SAN DIEGO A MED CORP
765 MEDICAL CENTER CT STE
210
CHULA VISTA, CA 91911-6600

Phone: (619) 482-0565
Fax:
After Hours Phone: (619)
482-0565
Provider Gender: Male
License number: A92839
NPI: 1558550053
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Arabic, German, Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
 Hospital, Alvarado Hospital Llc,
 Scripps Memorial Hospital,
 Scripps Mercy Hospital Chula
 Vista, Scripps Mercy Hospital,
 Sharp Chula Vista Med Ctr,
 Sharp Memorial Hospital, Sharp
 Coronado Hosp And Healthcare
 Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility: W
Hours: M-F 8AM-4:45PM, SA
 9AM-5PM
Website: www.ent-sd.com
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc, Imperial
 Health Holdings Medical
 Group-Sd

SCHALCH LEPE, PAUL

Provider ID: 105766
Board Certified Specialty: No
EAR NOSE AND THROAT OF
SAN DIEGO A MED CORP
765 MEDICAL CENTER CT STE
210
CHULA VISTA, CA 91911-6600

Phone: (619) 482-0565
Fax: (619) 482-2775
After Hours Phone: (619)
482-0565
Provider Gender: Male
License number: A92839
NPI: 1558550053
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Arabic, German, Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
 Hospital, Scripps Mercy Hospital,
 Sharp Memorial Hospital, Scripps
 Mercy Hospital Chula Vista,
 Scripps Memorial Hospital, Sharp
 Chula Vista Med Ctr, Alvarado
 Hospital Llc, Sharp Coronado
 Hosp And Healthcare Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc, Imperial
 Health Holdings Medical
 Group-Sd

SCHALCH LEPE, PAUL

Provider ID: 278432
Board Certified Specialty: No
HEALTH EXCEL IPA INC
765 MEDICAL CENTER CT STE
210
CHULA VISTA, CA 91911-6600
Phone: (619) 482-0565
Fax: (619) 482-2775
After Hours Phone: (619)
482-0565
Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: A92839
NPI: 1558550053
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, German, Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital, Sharp Memorial Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Sharp Chula Vista Med Ctr, Alvarado Hospital Llc, Sharp Coronado Hosp And Healthcare Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

WOO, LINDA N

Provider ID: 125039
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 321 E ST
 CHULA VISTA, CA 91910-2667
Phone: (619) 934-3260
Fax:
After Hours Phone: (619) 934-3260
Provider Gender: Female
License number: A121814
NPI: 1467720656
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese

Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

WOO, LINDA N

Provider ID: 213452
Board Certified Specialty: No
HEALTH EXCEL IPA INC
 321 E ST STE A
 CHULA VISTA, CA 91910-2667
Phone: (619) 934-3260
Fax: (619) 934-3268
After Hours Phone: (619) 934-3260
Provider Gender: Female
License number: A121814
NPI: 1467720656
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

PEDIATRICS

FLEMING, SARAH E

Provider ID: 104816
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 435 H ST
 CHULA VISTA, CA 91910-4307
Phone: (619) 691-7000
Fax:
After Hours Phone: (619) 691-7000
Provider Gender: Female
License number: A89838
NPI: 1679809826
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

TIZNADO, ERNESTO G , MD

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider ID: 269717
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1635 3RD AVE STE L
CHULA VISTA, CA 91911-5884
Phone: (619) 425-8901
Fax: (619) 425-8902
After Hours Phone: (619) 425-8901
Provider Gender: Male
License number: A45183
NPI: 1568495703
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Arrowhead Regional Medical Center, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, El Centro Regional Medical Center, Childrens Hosp And Resrch Ctr At Oakland, Parkview Community Hospital Medical Center, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

PHYSICAL MEDICINE / REHABILITATION

BULLOCK, ANDREW C
Provider ID: 257590
Board Certified Specialty: No
BLUE SHIELD PROMISE
HEALTH PLAN DIRECT

344 F ST STE 100
CHULA VISTA, CA 91910-2645
Phone: (619) 379-6579
Fax: (619) 501-3846
After Hours Phone: (619) 379-6579
Provider Gender: Male
License number: 20A6842
NPI: 1295743045
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Fataleka, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc

BULLOCK, ANDREW C
Provider ID: 268443
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
344 F ST STE 100
CHULA VISTA, CA 91910-2645
Phone: (619) 379-6579
Fax: (619) 501-3846
After Hours Phone: (619) 379-6579
Provider Gender: Male
License number: 20A6842
NPI: 1295743045
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Fataleka, Spanish
Cultural Competency: No

Hospital Affiliation: Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc

LUTFY, PATRICIA M
Provider ID: 110606
Board Certified Specialty: No
SYNOVATION MEDICAL GROUP
340 4TH AVE STE 19
CHULA VISTA, CA 91910-3898
Phone: (619) 761-5308
Fax:
After Hours Phone: (619) 761-5308
Provider Gender: Female
License number: A133725
NPI: 1497024061
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

LUTFY, PATRICIA M

Provider ID: 254629
Board Certified Specialty: Yes
HEALTH EXCEL IPA INC
 340 4TH AVE STE 19
 CHULA VISTA, CA 91910-3898
Phone: (619) 761-5308
Fax: (619) 591-1910
After Hours Phone: (619)
 761-5308
Provider Gender: Female
License number: A133725
NPI: 1497024061
Provider English Spoken: Yes
Provider Language(s) Spoken:
 French, Spanish
Cultural Competency: No

Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

RICHARDSON, HENRY A

Provider ID: 254571
Board Certified Specialty: No
HEALTH EXCEL IPA INC
 340 4TH AVE STE 19
 CHULA VISTA, CA 91910-3898
Phone: (619) 761-5308
Fax: (619) 325-1717
After Hours Phone: (619)
 761-5308
Provider Gender: Male
License number: A105294
NPI: 1407052459
Provider English Spoken: Yes
Provider Language(s) Spoken:

Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital, Scripps Mercy Hospital
 Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

PHYSICIANS ASSISTANT

ALICEA, RAUL C

Provider ID: 259766
Board Certified Specialty: No
HEALTH EXCEL IPA INC
 450 4TH AVE STE 215
 CHULA VISTA, CA 91910-4428
Phone: (619) 434-0204
Fax: (619) 337-0191
After Hours Phone: (619)
 434-0204
Provider Gender: Male
License number: PA54627
NPI: 1275057051

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/110
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,

Health Excel Ipa Inc

ALICEA, RAUL C

Provider ID: 259909
Board Certified Specialty: No
HEALTH EXCEL IPA INC
 429 BROADWAY
 CHULA VISTA, CA 91910-4320
Phone: (619) 434-0204
Fax: (619) 337-0191
After Hours Phone: (619)
 434-0204
Provider Gender: Male
License number: PA54627
NPI: 1275057051

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc

ALICEA, RAUL C

Provider ID: 268631
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 450 4TH AVE STE 215
 CHULA VISTA, CA 91910-4428
Phone: (619) 434-0204
Fax: (619) 337-0191
After Hours Phone: (619)
 434-0204
Provider Gender: Male
License number: PA54627
NPI: 1275057051
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken: Board Certified Specialty: No
Cultural Competency: No COMMUNITY CARE IPA LLC
Hospital Affiliation: 480 4TH AVE STE 501
Medi-Cal Open Panel: Yes CHULA VISTA, CA 91910-4414
Min/Max Age: 0/999 *Phone:* (619) 425-9510
American Sign Language (ASL): No *Fax:* (858) 455-7197
No *After Hours Phone:* (619)
♿ Accessibility: 425-9510
Hours: M-SA 9AM-5PM *Provider Gender:* Male
Website: *License number:* PA55864
Email: *NPI:* 1326524299
Medical Group(s): *Provider English Spoken:* Yes
IPA: Community Care Ipa Llc, *Provider Language(s) Spoken:*
 Health Excel Ipa Inc *Cultural Competency:* No
Hospital Affiliation: Scripps
 Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/99
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc

GUTH, CARA A

Provider ID: 282154
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 480 4TH AVE STE 501
 CHULA VISTA, CA 91910-4414
Phone: (619) 425-9510
Fax: (619) 425-0539
After Hours Phone: (619)
 425-9510
Provider Gender: Female
License number: PA56966
NPI: 1992177182
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/21
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

HOLM, TYLER A , NPA

Provider ID: 241021

Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 480 4TH AVE STE 501
 CHULA VISTA, CA 91910-4414
Phone: (619) 425-9510
Fax: (858) 455-7197
After Hours Phone: (619)
 425-9510
Provider Gender: Male
License number: PA55864
NPI: 1326524299
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/99
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

LA BERGE-INDA, PRISCILLA S

Provider ID: 259783
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 450 4TH AVE STE 215
 CHULA VISTA, CA 91910-4428
Phone: (619) 434-0204
Fax: (619) 337-0191
After Hours Phone: (619)
 434-0204
Provider Gender: Female
License number: PA54404
NPI: 1679008379
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Arabic, Russian, Spanish
Cultural Competency: No
Hospital Affiliation:

Medi-Cal Open Panel: Yes
Min/Max Age: 18/110
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc

LA BERGE-INDA, PRISCILLA S , NPA

Provider ID: 265072
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 450 4TH AVE STE 215
 CHULA VISTA, CA 91910-4428
Phone: (619) 434-0204
Fax: (619) 337-0191
After Hours Phone: (619)
 434-0204
Provider Gender: Female
License number: PA54404
NPI: 1679008379
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Arabic, Russian, Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/110
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc

MACASADIA, MARITES N

Provider ID: 268788

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
752 MEDICAL CENTER CT STE
210
CHULA VISTA, CA 91911-6660
Phone: (619) 656-0206
Fax: (619) 527-3226
After Hours Phone: (619)
656-0206

Provider Gender: Female
License number: PA15254
NPI: 1093743015
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MERCER, KELLY C

Provider ID: 257505
Board Certified Specialty: No
BLUE SHIELD PROMISE
HEALTH PLAN DIRECT
760 OTAY LAKES RD
CHULA VISTA, CA 91910-6915
Phone: (619) 821-2300
Fax:
After Hours Phone: (619)
821-2300
Provider Gender: Female
License number: PA21625
NPI: 1154609790
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic
Cultural Competency: No

Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health
Plan Direct, Health Excel Ipa Inc

REVELES, DIANA

Provider ID: 127984
Board Certified Specialty: No
FAMILY HLTH CTR SAN
DIEGO-RICE FAM HC
352 L ST
CHULA VISTA, CA 91911-1208
Phone: (619) 515-2325
Fax:
After Hours Phone: (619)
515-2325
Provider Gender: Female
License number: PA19306
NPI: 1548455405

Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Family Hlth Ctr
San Diego-Rice Fam Hc
IPA:

RYAN, ASHLEY N

Provider ID: 265192
Board Certified Specialty: No
HEALTH EXCEL IPA INC
480 4TH AVE STE 202
CHULA VISTA, CA 91910-4412
Phone: (619) 427-3361

Fax:
After Hours Phone: (619)
427-3361
Provider Gender: Female
License number: PA51877
NPI: 1689003956
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/999
American Sign Language (ASL):
No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

SILVER, NIKKI R

Provider ID: 214093
Board Certified Specialty: No
HEALTH EXCEL IPA INC
480 4TH AVE STE 501
CHULA VISTA, CA 91910-4414
Phone: (619) 425-9510
Fax: (858) 455-7197
After Hours Phone: (619)
425-9510
Provider Gender: Female
License number: PA55325
NPI: 1811439789
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista

Medi-Cal Open Panel: No
Min/Max Age: 18/999
American Sign Language (ASL): No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SILVER, NIKKI R , NPA

Provider ID: 242650
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 480 4TH AVE STE 501
 CHULA VISTA, CA 91910-4414

Phone: (619) 425-9510
Fax: (858) 455-7197
After Hours Phone: (619) 425-9510

Provider Gender: Female
License number: PA55325
NPI: 1811439789
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish

Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista

Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Community Care Ipa Llc

SOLAI, RADHA S , NPA

Provider ID: 247295
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 890 EASTLAKE PKWY STE 205
 CHULA VISTA, CA 91914-4521

Phone: (619) 482-0300
Fax:
After Hours Phone: (619) 482-0300

Provider Gender: Female
License number: PA54899
NPI: 1245759695
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Sharp Coronado Hosp And Healthcare Ctr

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

VARGAS, CHRISTOPHER B , NPA

Provider ID: 268744
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 2452 FENTON ST # C203
 CHULA VISTA, CA 91914-3599

Phone: (619) 600-5309
Fax: (619) 655-4700
After Hours Phone: (619) 600-5309

Provider Gender: Male

License number: PA55263
NPI: 1922505775
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish

Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Community Care Ipa Llc

PODIATRIST

CANABA, YVETTE

Provider ID: 268469
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 345 F ST STE 100
 CHULA VISTA, CA 91910-2632

Phone: (619) 427-3481
Fax: (619) 420-7807
After Hours Phone: (619) 427-3481

Provider Gender: Female
License number: DPM5496
NPI: 1821426388
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish

Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Sharp Chula Vista Med Ctr

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

♿ *Accessibility:*

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

CHISHOLM, JOHN A

Provider ID: 125043

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD

345 F ST STE 100

CHULA VISTA, CA 91910-2632

Phone: (619) 427-3481

Fax: (619) 420-7807

After Hours Phone: (619)
427-3481

Provider Gender: Male

License number: DPM3431

NPI: 1396740072

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Paradise
Valley Hospital, Scripps Mercy
Hospital Chula Vista, Scripps
Memorial Hospital, Scripps
Mercy Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ *Accessibility:* P, EB, IB, E, R,
T, W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

CHISHOLM, JOHN A

Provider ID: 214379

Board Certified Specialty: No

HEALTH EXCEL IPA INC

345 F ST STE 100

CHULA VISTA, CA 91910-2632

Phone: (619) 427-3481

Fax: (619) 420-7807

After Hours Phone: (619)
427-3481

Provider Gender: Male

License number: DPM3431

NPI: 1396740072

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Paradise
Valley Hospital, Scripps Mercy
Hospital Chula Vista, Scripps
Memorial Hospital, Scripps
Mercy Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ *Accessibility:* P, EB, IB, E, R,
T, W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

CHISHOLM, JOHN A

Provider ID: 268440

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

345 F ST STE 100

CHULA VISTA, CA 91910-2632

Phone: (619) 427-3481

Fax: (619) 420-7807

After Hours Phone: (619)
427-3481

Provider Gender: Male

License number: DPM3431

NPI: 1396740072

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Paradise
Valley Hospital, Scripps Mercy
Hospital Chula Vista, Scripps
Memorial Hospital, Scripps
Mercy Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ *Accessibility:* P, EB, IB, E, R,
T, W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

COLLINS, MICHAEL L

Provider ID: 108899

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD

480 4TH AVE STE 501

CHULA VISTA, CA 91910-4414

Phone: (619) 425-9510

Fax: (619) 425-0359

After Hours Phone: (619)

425-9510

Provider Gender: Male

License number: DPM5146

NPI: 1912294711

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps
Memorial Hospital, Scripps
Mercy Hospital, Scripps Mercy

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☒ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc, Imperial
 Health Holdings Medical
 Group-Sd

COLLINS, MICHAEL L
Provider ID: 212737
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 480 4TH AVE STE 501
 CHULA VISTA, CA 91910-4414
Phone: (619) 425-9510
Fax: (619) 425-0359
After Hours Phone: (619)
 425-9510
Provider Gender: Male
License number: DPM5146
NPI: 1912294711
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital, Scripps
 Mercy Hospital, Scripps Mercy
 Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☒ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc,

Health Excel Ipa Inc, Imperial
 Health Holdings Medical
 Group-Sd
DAVIDSON, JOHN A
Provider ID: 129545
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 345 F ST STE 100
 CHULA VISTA, CA 91910-2632
Phone: (619) 427-3481
Fax: (619) 420-7807
After Hours Phone: (619)
 427-3481
Provider Gender: Male
License number: DPM5418
NPI: 1689069874
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital, Scripps Mercy Hospital
 Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☒ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc

DAVIDSON, JOHN A
Provider ID: 214444
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 345 F ST STE 100
 CHULA VISTA, CA 91910-2632

Phone: (619) 427-3481
Fax: (619) 420-7807
After Hours Phone: (619)
 427-3481
Provider Gender: Male
License number: DPM5418
NPI: 1689069874
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital, Scripps Mercy Hospital
 Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☒ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc

LONGOBARDI, JAMES J
Provider ID: 257486
Board Certified Specialty: Yes
 BLUE SHIELD PROMISE
 HEALTH PLAN DIRECT
 450 4TH AVE STE 401
 CHULA VISTA, CA 91910-4430
Phone: (619) 425-5500
Fax: (619) 425-5589
After Hours Phone: (619)
 425-5500
Provider Gender: Male
License number: DPM3675
NPI: 1780664250
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy

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D. Directorio de proveedores de atención especializada

Hospital Chula Vista, Scripps
 Mercy Hospital, Sharp Chula
 Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health
 Plan Direct

PUCCINELLI, ALAYNA M

Provider ID: 121352
Board Certified Specialty: Yes
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 345 F ST STE 100
 CHULA VISTA, CA 91910-2632
Phone: (619) 427-3481
Fax: (619) 420-7807
After Hours Phone: (619)
 427-3481
Provider Gender: Female
License number: DPM5349
NPI: 1487072278
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Russian, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital Chula Vista, Scripps
 Memorial Hospital, Paradise
 Valley Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc, Imperial
 Health Holdings Medical
 Group-Sd
PUCCINELLI, ALAYNA M
Provider ID: 214412
Board Certified Specialty: Yes
 HEALTH EXCEL IPA INC
 345 F ST STE 100
 CHULA VISTA, CA 91910-2632
Phone: (619) 427-3481
Fax: (619) 420-7807
After Hours Phone: (619)
 427-3481

Provider Gender: Female
License number: DPM5349
NPI: 1487072278
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Russian, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital Chula Vista, Scripps
 Memorial Hospital, Paradise
 Valley Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No

☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc, Imperial
 Health Holdings Medical
 Group-Sd

PUCCINELLI, ALAYNA M , MD

Provider ID: 268461
Board Certified Specialty: Yes
 COMMUNITY CARE IPA LLC

345 F ST STE 100
 CHULA VISTA, CA 91910-2632
Phone: (619) 427-3481
Fax: (619) 420-7807
After Hours Phone: (619)
 427-3481
Provider Gender: Female
License number: DPM5349
NPI: 1487072278
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Russian, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital Chula Vista, Scripps
 Memorial Hospital, Paradise
 Valley Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No

☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc, Imperial
 Health Holdings Medical
 Group-Sd

SMITH, COLLIN S

Provider ID: 280320
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 855 3RD AVE STE 1100
 CHULA VISTA, CA 91911-1350
Phone: (619) 880-5057
Fax: (858) 485-1515
After Hours Phone: (619)
 880-5057
Provider Gender: Male
License number: DPM5268
NPI: 1801223896
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

XU, DIXON H

Provider ID: 272498
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 345 F ST STE 100
 CHULA VISTA, CA 91910-2632
Phone: (619) 427-3481
Fax: (619) 420-7807
After Hours Phone: (619) 427-3481
Provider Gender: Male
License number: DPM5596
NPI: 1598296600
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Sharp Memorial Hospital, Paradise Valley Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Community Care Ipa Llc, Health Excel Ipa Inc
XU, DIXON H
Provider ID: 277917
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 345 F ST STE 100
 CHULA VISTA, CA 91910-2632
Phone: (619) 427-3481
Fax: (619) 420-7807
After Hours Phone: (619) 427-3481

Provider Gender: Male
License number: DPM5596
NPI: 1598296600
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Sharp Memorial Hospital, Paradise Valley Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

PULMONARY DISEASES

LIRA, JOSE A

Provider ID: 262193
Board Certified Specialty: Yes
 IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 841 KUHN DR STE 200
 CHULA VISTA, CA 91914-4523

Phone: (619) 482-7301
Fax: (619) 482-7302
After Hours Phone: (619) 482-7301
Provider Gender: Male
License number: A33913
NPI: 1356319446
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

LOZANO, MARTHA E , MD

Provider ID: 269322
Board Certified Specialty: Yes
 COMMUNITY CARE IPA LLC
 841 KUHN DR STE 200
 CHULA VISTA, CA 91914-4523
Phone: (619) 363-4000
Fax: (619) 202-9400
After Hours Phone: (616) 363-4000
Provider Gender: Female
License number: A48551
NPI: 1609845627
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
 ☒ *Accessibility:* P, EB, IB, E, R, W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

LOZANO, MARTHA E

Provider ID: 82696
Board Certified Specialty: Yes
 IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 841 KUHN DR STE 200
 CHULA VISTA, CA 91914-4523
Phone: (619) 363-4000
Fax: (619) 202-9400
After Hours Phone: (616) 363-4000
Provider Gender: Female
License number: A48551
NPI: 1609845627
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☒ *Accessibility:* P, EB, IB, E, R, W
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

RADIATION ONCOLOGY

ADVANI, SUNIL J

Provider ID: 278427
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 959 LANE AVE
 CHULA VISTA, CA 91914-4528
Phone: (619) 502-7730
Fax: (619) 502-7740
After Hours Phone: (619) 502-7730
Provider Gender: Male
License number: A110025
NPI: 1669649844
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☒ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

COLEMAN, LORI A , MD

Provider ID: 206393
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 769 MEDICAL CENTER CT
 CHULA VISTA, CA 91911-6602

Phone: (619) 502-5851
Fax: (619) 502-5865
After Hours Phone: (619) 502-5851
Provider Gender: Female
License number: G78635
NPI: 1053348920
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus, Sharp Chula Vista Med Ctr, Sharp Memorial Hospital, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 19/100
American Sign Language (ASL): No
 ☒ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

DEWITT, KELLY D , MD

Provider ID: 220043
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 769 MEDICAL CENTER CT
 CHULA VISTA, CA 91911-6602
Phone: (619) 502-5851
Fax: (619) 502-5865
After Hours Phone: (619) 502-5851
Provider Gender: Female
License number: A74873
NPI: 1184668741
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Memorial Hospital, Palomar
Health Downtown Campus,
Palomar Medical Center, Sharp
Chula Vista Med Ctr, Grossmont
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 19/100
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

GREENE, DAVID E

Provider ID: 279980
Board Certified Specialty: No
HEALTH EXCEL IPA INC
881 KUHN DR STE 101
CHULA VISTA, CA 91914-3563
Phone: (619) 423-8200
Fax: (619) 423-8205
After Hours Phone: (619)
423-8200
Provider Gender: Male
License number: C54574
NPI: 1285600403
Provider English Spoken: Yes
Provider Language(s) Spoken:
German, Spanish
Cultural Competency: No
Hospital Affiliation: Sequoia
Hospital, Salinas Valley Memorial
Hosp
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Health Excel Ipa Inc
JABBARI, SIAVASH, MD
Provider ID: 204860
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
751 MEDICAL CENTER CT
CHULA VISTA, CA 91911-6617
Phone: (619) 502-5851
Fax:
After Hours Phone: (619)
502-5851
Provider Gender: Male
License number: A99269
NPI: 1720314107
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr, Grossmont
Hospital, Sharp Memorial
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

JABBARI, SIAVASH, MD

Provider ID: 268783
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
769 MEDICAL CENTER CT
CHULA VISTA, CA 91911-6602
Phone: (619) 502-5851
Fax: (619) 502-5865
After Hours Phone: (619)
502-5851
Provider Gender: Male

License number: A99269
NPI: 1720314107
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr, Grossmont
Hospital, Sharp Memorial
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MACEWAN, IAIN J

Provider ID: 205875
Board Certified Specialty: No
UCSD MEDICAL GROUP
959 LANE AVE STE B
CHULA VISTA, CA 91914-4528
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A129079
NPI: 1326300401
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr, Ucsd La Jolla
John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Rady Childrens Health Network, Ucsd Medical Group</p>	<p>COMMUNITY CARE IPA LLC 769 MEDICAL CENTER CT CHULA VISTA, CA 91911-6602 <i>Phone:</i> (619) 502-5851 <i>Fax:</i> (619) 502-5865 <i>After Hours Phone:</i> (619) 502-5851 <i>Provider Gender:</i> Female <i>License number:</i> A103733 <i>NPI:</i> 1912232513 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Kannada, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Sharp Memorial Hospital, Sharp Chula Vista Med Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 19/100 <i>American Sign Language (ASL):</i> No</p>	<p><i>Hospital Affiliation:</i> Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 18/999 <i>American Sign Language (ASL):</i> No</p>
<p>MANSY, GINA J <i>Provider ID:</i> 278423 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 959 LANE AVE CHULA VISTA, CA 91914-4528 <i>Phone:</i> (619) 502-7730 <i>Fax:</i> (619) 502-7740 <i>After Hours Phone:</i> (619) 502-7730 <i>Provider Gender:</i> Female <i>License number:</i> A65021 <i>NPI:</i> 1326046855 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Palomar Health Downtown Campus, Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Scripps Mercy Hospital Chula Vista <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No</p>	<p>♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc</p>	<p>♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Health Excel Ipa Inc</p>
<p>PEJAVAR, SUNANDA M , MD <i>Provider ID:</i> 221074 <i>Board Certified Specialty:</i> No</p>	<p>RAHN, DOUGLAS A <i>Provider ID:</i> 278539 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 959 LANE AVE CHULA VISTA, CA 91914-4528 <i>Phone:</i> (619) 502-7730 <i>Fax:</i> (619) 502-7740 <i>After Hours Phone:</i> (619) 502-7730 <i>Provider Gender:</i> Male <i>License number:</i> A115869 <i>NPI:</i> 1609018340 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No</p>	<p>SANGHVI, PARAG R <i>Provider ID:</i> 278538 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 959 LANE AVE CHULA VISTA, CA 91914-4528 <i>Phone:</i> (619) 502-7730 <i>Fax:</i> (619) 502-7740 <i>After Hours Phone:</i> (619) 502-7730 <i>Provider Gender:</i> Male <i>License number:</i> A105184 <i>NPI:</i> 1801005152 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Gujarati, Hindi, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Childrens Hosp And Resrch Ctr At Oakland, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No</p>
		<p>♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i></p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p><i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd, Rady Childrens Health Network</p>	<p>COMMUNITY CARE IPA LLC 769 MEDICAL CENTER CT CHULA VISTA, CA 91911-6602 <i>Phone:</i> (619) 502-5851 <i>Fax:</i> (619) 502-5865 <i>After Hours Phone:</i> (619) 502-5851 <i>Provider Gender:</i> Male <i>License number:</i> A86307 <i>NPI:</i> 1225186232 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Memorial Hospital, Palomar Health Downtown Campus, Sharp Chula Vista Med Ctr, Grossmont Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 19/100 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc</p>	<p><i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Sharp Memorial Hospital, Palomar Health Downtown Campus, Sharp Chula Vista Med Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 19/100 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc</p>
<p>UHL, BARRY M , MD <i>Provider ID:</i> 243527 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 769 MEDICAL CENTER CT CHULA VISTA, CA 91911-6602 <i>Phone:</i> (619) 502-5851 <i>Fax:</i> (619) 502-5865 <i>After Hours Phone:</i> (619) 502-5851 <i>Provider Gender:</i> Male <i>License number:</i> A71969 <i>NPI:</i> 1811936693 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Palomar Health Downtown Campus, Palomar Medical Center, Sharp Chula Vista Med Ctr, Sharp Memorial Hospital, Grossmont Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 19/100 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc</p>	<p>WEINSTEIN, GEOFFREY D , MD <i>Provider ID:</i> 200538 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 769 MEDICAL CENTER CT CHULA VISTA, CA 91911-6602 <i>Phone:</i> (619) 502-5851 <i>Fax:</i> (619) 502-5865 <i>After Hours Phone:</i> (619) 502-5851 <i>Provider Gender:</i> Male <i>License number:</i> A54109 <i>NPI:</i> 1841233947 <i>Provider English Spoken:</i> Yes</p>	<p>WHITE, EVAN C <i>Provider ID:</i> 278485 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 959 LANE AVE CHULA VISTA, CA 91914-4528 <i>Phone:</i> (619) 502-7730 <i>Fax:</i> (619) 502-7740 <i>After Hours Phone:</i> (619) 502-7730 <i>Provider Gender:</i> Male <i>License number:</i> A122204 <i>NPI:</i> 1063701407 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i></p>
<p>VOLPP, PAUL B , MD <i>Provider ID:</i> 221102 <i>Board Certified Specialty:</i> No</p>		

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D. Directorio de proveedores de atención especializada

Email:
Medical Group(s):
 IPA: Health Excel Ipa Inc

WOEL, ROSEMONDE F
Provider ID: 278532
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 959 LANE AVE
 CHULA VISTA, CA 91914-4528
Phone: (619) 502-7730
Fax: (619) 502-7740
After Hours Phone: (619) 502-7730
Provider Gender: Female
License number: C129799
NPI: 1538159694
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish
Cultural Competency: No
Hospital Affiliation: El Centro Regional Medical Center, Pioneers Memorial Hospital, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
 IPA: Health Excel Ipa Inc, Ucsd Medical Group

ZENTNER, PHILLIP G , MD
Provider ID: 204848
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 769 MEDICAL CENTER CT
 CHULA VISTA, CA 91911-6602

Phone: (619) 502-5851
Fax: (619) 502-5865
After Hours Phone: (619) 502-5851
Provider Gender: Male
License number: G83516
NPI: 1063452415
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Palomar Health Downtown Campus, Palomar Medical Center, Grossmont Hospital, Sharp Chula Vista Med Ctr, Mercy Medical Center Redding
Medi-Cal Open Panel: Yes
Min/Max Age: 19/100
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc

RADIOLOGY DIAGNOSTIC X-RAY

ALLEN, DERRICK R
Provider ID: 125999
Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 333 H ST STE 1095
 CHULA VISTA, CA 91910-5557
Phone: (858) 658-6500
Fax: (866) 558-4329
After Hours Phone: (858) 658-6500
Provider Gender: Male
License number: A69840

NPI: 1215982970
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc

ALLEN, DERRICK R , MD
Provider ID: 268362
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 333 H ST STE 1095
 CHULA VISTA, CA 91910-5557
Phone: (619) 409-9119
Fax: (866) 558-4329
After Hours Phone: (619) 409-9119
Provider Gender: Male
License number: A69840
NPI: 1215982970
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Community Care Ipa Llc

ANDERSON, GREGORY S

Provider ID: 125987
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
333 H ST STE 1095
CHULA VISTA, CA 91910-5557
Phone: (619) 409-9119
Fax:
After Hours Phone: (619) 409-9119
Provider Gender: Male
License number: A90018
NPI: 1841467099
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BAKER, LORI L

Provider ID: 125996
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
333 H ST STE 1095
CHULA VISTA, CA 91910-5557

Phone: (619) 409-9119
Fax: (619) 409-9109
After Hours Phone: (619) 409-9119
Provider Gender: Female
License number: G62517
NPI: 1063465219
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Medical Ctr At Ucsf, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BORSO, MAYA G

Provider ID: 126010
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
333 H ST STE 1095
CHULA VISTA, CA 91910-5557
Phone: (619) 409-9119
Fax: (619) 409-9109
After Hours Phone: (619) 409-9119
Provider Gender: Female
License number: A97134
NPI: 1548473507
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Green Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital

Chula Vista, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BUCKLEY, DAVID W

Provider ID: 243267
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
333 H ST STE 1095
CHULA VISTA, CA 91910-5557
Phone: (858) 658-6500
Fax: (866) 558-4329
After Hours Phone: (858) 658-6500
Provider Gender: Male
License number: G57383
NPI: 1982657060
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

CHOU, ERIC T

Provider ID: 126017

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC
333 H ST STE 1095
CHULA VISTA, CA 91910-5557
Phone: (619) 409-4848
Fax: (619) 409-4849
After Hours Phone: (619)
409-4848
Provider Gender: Male
License number: A96095
NPI: 1689627838
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

COOPER, JAMES A

Provider ID: 126044
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC
333 H ST STE 1095
CHULA VISTA, CA 91910-5557
Phone: (619) 409-9119
Fax: (619) 409-9109
After Hours Phone: (619)
409-9119
Provider Gender: Male
License number: A62473
NPI: 1497708622
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Pomerado
Hospital, Scripps Mercy Hospital,
Scripps Mercy Hospital Chula
Vista, East Los Angeles Doctors
Hsp, Memorial Hosp Of Gardena
Inc, Riverside Community Hosp,
Palmdale Regional Medical
Center, Barstow Community
Hospital, Kindred Hospital South
Bay, Loma Linda University Med
Ctr Murrieta
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

DOEMENY, JOHN M

Provider ID: 126050
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC
333 H ST STE 1095
CHULA VISTA, CA 91910-5557
Phone: (619) 409-9119
Fax: (619) 409-9109
After Hours Phone: (619)
409-9119
Provider Gender: Male
License number: G50925
NPI: 1841243912
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None

American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

FIROOZANIA, NILOFAR

Provider ID: 126175
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC
333 H ST STE 1095
CHULA VISTA, CA 91910-5557
Phone: (619) 409-9119
Fax:
After Hours Phone: (619)
409-9119
Provider Gender: Female
License number: A109806
NPI: 1962521419
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado
Hospital Llc, Redlands
Community Hosp, Barstow
Community Hospital, Kindred
Hospital Riverside, Victor Valley
Global Med Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FRANKE, MARK A

Provider ID: 126056

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC
333 H ST STE 1095
CHULA VISTA, CA 91910-5557
Phone: (619) 409-9119
Fax:
After Hours Phone: (619)
409-9119
Provider Gender: Male
License number: A118792
NPI: 1114246329
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Santa Monica
Ucla Med Ctr, Ronald Reagan
Ucla Med Ctr, Alvarado Hospital
Llc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

HARMAN, SCOTT A

Provider ID: 126070
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC
333 H ST STE 1095
CHULA VISTA, CA 91910-5557
Phone: (858) 658-6500
Fax: (619) 409-9109
After Hours Phone: (858)
658-6500
Provider Gender: Male
License number: G57284
NPI: 1124071311
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado
Hospital Llc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

IHS RADIOLOGY MEDICAL GROUP INC,

Provider ID: 200460
Board Certified Specialty:
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
333 H ST STE 1095
CHULA VISTA, CA 91910-5557
Phone: (619) 409-9119
Fax: (619) 409-9109
After Hours Phone: (619)
409-9119
Provider Gender:
License number:
NPI: 1497148456
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

JOHNSON, JOHN O

Provider ID: 126082
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC
333 H ST STE 1095
CHULA VISTA, CA 91910-5557
Phone: (619) 409-9119
Fax: (619) 409-9109
After Hours Phone: (619)
409-9119
Provider Gender: Male
License number: G59632
NPI: 1073565792
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LIZERBRAM, ERIC K

Provider ID: 126094
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC
333 H ST STE 1095
CHULA VISTA, CA 91910-5557
Phone: (619) 409-9119
Fax: (619) 409-9109
After Hours Phone: (619)
409-9119
Provider Gender: Male
License number: G74959

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<i>NPI:</i> 1598718926 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>	<i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc MOFFIT, BRIAN J <i>Provider ID:</i> 126121 <i>Board Certified Specialty:</i> No IHS RADIOLOGY MEDICAL GROUP INC 333 H ST STE 1095 CHULA VISTA, CA 91910-5557 <i>Phone:</i> (619) 409-9119 <i>Fax:</i> (619) 409-9109 <i>After Hours Phone:</i> (619) 409-9119 <i>Provider Gender:</i> Male <i>License number:</i> G51551 <i>NPI:</i> 1508817305 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc	<i>Phone:</i> (858) 658-6500 <i>Fax:</i> <i>After Hours Phone:</i> (858) 658-6500 <i>Provider Gender:</i> Male <i>License number:</i> A120064 <i>NPI:</i> 1972709087 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Santa Monica Ucla Med Ctr, Alvarado Hospital Llc, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Scripps Green Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>
LUBISICH, JOHN P <i>Provider ID:</i> 126100 <i>Board Certified Specialty:</i> No IHS RADIOLOGY MEDICAL GROUP INC 333 H ST STE 1095 CHULA VISTA, CA 91910-5557 <i>Phone:</i> (858) 658-6500 <i>Fax:</i> (619) 409-9109 <i>After Hours Phone:</i> (858) 658-6500 <i>Provider Gender:</i> Male <i>License number:</i> G77575 <i>NPI:</i> 1194863902 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Alvarado Hospital Llc, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM	OSHAUGHNESSY, LOUISE S <i>Provider ID:</i> 126133 <i>Board Certified Specialty:</i> No IHS RADIOLOGY MEDICAL GROUP INC 333 H ST STE 1095 CHULA VISTA, CA 91910-5557 <i>Phone:</i> (858) 658-6500 <i>Fax:</i> (619) 409-9109 <i>After Hours Phone:</i> (858) 658-6500 <i>Provider Gender:</i> Female <i>License number:</i> G48800 <i>NPI:</i> 1285685925 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i>	
OLOUGHLIN, BRIAN J <i>Provider ID:</i> 126127 <i>Board Certified Specialty:</i> No IHS RADIOLOGY MEDICAL GROUP INC 333 H ST STE 1095 CHULA VISTA, CA 91910-5557		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SCHECHTER, MARK S

Provider ID: 126139
Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 333 H ST STE 1095
 CHULA VISTA, CA 91910-5557
Phone: (619) 409-9119
Fax: (619) 409-9109
After Hours Phone: (619) 409-9119
Provider Gender: Male
License number: G42390
NPI: 1942253018
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, El Centro Regional Medical Center, Selma Community Hospital, Adventist Medical Center, Adventist Med Ctr Reedley, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA:
SCHWARTZBERG, ROSS E
Provider ID: 126146
Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 333 H ST STE 1095
 CHULA VISTA, CA 91910-5557
Phone: (619) 409-9119
Fax: (619) 409-9109
After Hours Phone: (619) 409-9119

Provider Gender: Male
License number: G72997
NPI: 1215976766
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SNYDER, WILLIAM C

Provider ID: 126153
Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 333 H ST STE 1095
 CHULA VISTA, CA 91910-5557
Phone: (858) 658-6500
Fax: (866) 558-4329
After Hours Phone: (858) 658-6500

Provider Gender: Male
License number: A65059
NPI: 1477505162
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SPOTO, GARY P

Provider ID: 126159
Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 333 H ST STE 1095
 CHULA VISTA, CA 91910-5557
Phone: (619) 409-9119
Fax: (619) 409-9109
After Hours Phone: (619) 409-9119
Provider Gender: Male
License number: G58131
NPI: 1659332062
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas, Scripps Green Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>No ☯ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>	<p>IHS RADIOLOGY MEDICAL GROUP INC 333 H ST STE 1095 CHULA VISTA, CA 91910-5557 <i>Phone:</i> (619) 409-9119 <i>Fax:</i> (619) 409-9109 <i>After Hours Phone:</i> (619) 409-9119</p>	<p><i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No</p>
<p>SUN, ALEX W <i>Provider ID:</i> 268634 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 435 H ST # 1 CHULA VISTA, CA 91910-4307 <i>Phone:</i> (619) 543-2218 <i>Fax:</i> <i>After Hours Phone:</i> (619) 543-2218 <i>Provider Gender:</i> Male <i>License number:</i> A133334 <i>NPI:</i> 1538502331 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr, Scripps Green Hospital, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Memorial Hospital Encinitas, Grossmont Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No</p>	<p><i>Provider Gender:</i> Female <i>License number:</i> A69607 <i>NPI:</i> 1629029335 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Vibra Hospital Of San Diego <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No</p>	<p>☯ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>
<p>☯ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc</p>	<p>TOBIN, MICHAEL L <i>Provider ID:</i> 126218 <i>Board Certified Specialty:</i> No IHS RADIOLOGY MEDICAL GROUP INC 333 H ST STE 1095 CHULA VISTA, CA 91910-5557 <i>Phone:</i> (858) 658-6500 <i>Fax:</i> (619) 409-9109 <i>After Hours Phone:</i> (858) 658-6500 <i>Provider Gender:</i> Male <i>License number:</i> A45908 <i>NPI:</i> 1730132150 <i>Provider English Spoken:</i> Yes</p>	<p>TSUKADA, GLENN H <i>Provider ID:</i> 126203 <i>Board Certified Specialty:</i> No IHS RADIOLOGY MEDICAL GROUP INC 333 H ST STE 1095 CHULA VISTA, CA 91910-5557 <i>Phone:</i> (619) 409-9119 <i>Fax:</i> (619) 409-9109 <i>After Hours Phone:</i> (619) 409-9119 <i>Provider Gender:</i> Male <i>License number:</i> A60235 <i>NPI:</i> 1710938394 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Pomerado Hospital, Alvarado Hospital Llc, Scripps Memorial Hospital, Grossmont Hospital, Scripps Mercy Hospital, Ucsd Medical Ctr, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Scripps Green Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i></p>
<p>TENA, ROWENA G <i>Provider ID:</i> 126165 <i>Board Certified Specialty:</i> No</p>		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>	<p>TIEFENBRUN, JONATHAN, MD <i>Provider ID:</i> 66135 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 340 4TH AVE STE 4 CHULA VISTA, CA 91910-3885 <i>Phone:</i> (619) 427-1144 <i>Fax:</i> (619) 427-1185 <i>After Hours Phone:</i> (619) 427-1144 <i>Provider Gender:</i> Male <i>License number:</i> G85951 <i>NPI:</i> 1265437727 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> French, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> P, EB, IB, E, R, W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc</p>	<p><i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc</p>
<p>ZINK BRODY, GORDON C <i>Provider ID:</i> 126196 <i>Board Certified Specialty:</i> No IHS RADIOLOGY MEDICAL GROUP INC 333 H ST STE 1095 CHULA VISTA, CA 91910-5557 <i>Phone:</i> (619) 409-9119 <i>Fax:</i> (619) 409-9109 <i>After Hours Phone:</i> (619) 409-9119 <i>Provider Gender:</i> Male <i>License number:</i> G68636 <i>NPI:</i> 1689610362 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Alvarado Hospital Llc, Oak Valley Dist Hosp, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Scripps Green Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>	<p>FRANKE, MARK A <i>Provider ID:</i> 269639 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 333 H ST STE 1095 CHULA VISTA, CA 91910-5557 <i>Phone:</i> (858) 658-6500 <i>Fax:</i> (866) 558-4329 <i>After Hours Phone:</i> (858) 658-6500 <i>Provider Gender:</i> Male <i>License number:</i> A118792 <i>NPI:</i> 1114246329 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Santa Monica Ucla Med Ctr, Ronald Reagan Ucla Med Ctr, Alvarado Hospital Llc <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i></p>	
RADIOLOGY		
<p>RADIOLOGY DIAGNOSTIC</p>	<p>DOEMENY, JOHN M <i>Provider ID:</i> 269755 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 333 H ST STE 1095 CHULA VISTA, CA 91910-5557 <i>Phone:</i> (858) 658-6500 <i>Fax:</i> (866) 558-4329 <i>After Hours Phone:</i> (858) 658-6500 <i>Provider Gender:</i> Male <i>License number:</i> G50925 <i>NPI:</i> 1841243912</p>	

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D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Community Care Ipa Llc

HAWLEY, DANIEL B

Provider ID: 268857
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
751 MEDICAL CENTER CT
CHULA VISTA, CA 91911-6617
Phone: (619) 502-5851

Fax:
After Hours Phone: (619)
502-5851

Provider Gender: Male
License number: A114748
NPI: 1841260353

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc

LUBISICH, JOHN P

Provider ID: 244952
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
333 H ST STE 1095
CHULA VISTA, CA 91910-5557
Phone: (858) 658-6500

Fax: (866) 558-4329
After Hours Phone: (858)
658-6500

Provider Gender: Male
License number: G77575
NPI: 1194863902

Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado
Hospital Llc, Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MOFFIT, BRIAN J

Provider ID: 269533
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
333 H ST STE 1095
CHULA VISTA, CA 91910-5557
Phone: (858) 658-6500

Fax: (866) 558-4329
After Hours Phone: (858)
658-6500

Provider Gender: Male
License number: G51551
NPI: 1508817305
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish

Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:

Medical Group(s):
IPA: Community Care Ipa Llc

TENA, ROWENA G , MD

Provider ID: 269829
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
333 H ST STE 1095
CHULA VISTA, CA 91910-5557
Phone: (858) 658-6500

Fax: (866) 558-4329
After Hours Phone: (858)
658-6500

Provider Gender: Female
License number: A69607
NPI: 1629029335

Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista, Vibra Hospital Of
San Diego

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

REGISTERED PHYSICAL THERAPIST

ANDERSON, ALEXANDRA

Provider ID: 265963
Board Certified Specialty: No
HEALTH EXCEL IPA INC
480 4TH AVE STE 501
CHULA VISTA, CA 91910-4414

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D. Directorio de proveedores de atención especializada

Phone: (619) 425-9510
Fax:
After Hours Phone: (619)
425-9510
Provider Gender: Female
License number: PT297661
NPI: 1346870706
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

BOLOMEY, TALITA

Provider ID: 215686
Board Certified Specialty: No
HEALTH EXCEL IPA INC
1020 TIERRA DEL REY # A1
CHULA VISTA, CA 91910-7886
Phone: (858) 874-0582
Fax: (858) 751-0901
After Hours Phone: (858)
874-0582
Provider Gender: Female
License number: PT33811
NPI: 1932309200
Provider English Spoken: Yes
Provider Language(s) Spoken:
Portuguese, Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc
BUSH, NATHANAEL J
Provider ID: 215173
Board Certified Specialty: No
HEALTH EXCEL IPA INC
1020 TIERRA DEL REY # A1
CHULA VISTA, CA 91910-7886
Phone: (619) 585-7104
Fax: (619) 585-7106
After Hours Phone: (619)
585-7104
Provider Gender: Male
License number: PT295464
NPI: 1679048904
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

CHANG, ROBERT S
Provider ID: 130041
Board Certified Specialty: No
SAN DIEGO SPINE AND
SPORT INC
1020 TIERRA DEL REY # A1
CHULA VISTA, CA 91910-7886
Phone: (619) 585-7104
Fax:
After Hours Phone: (619)
585-7104
Provider Gender: Male
License number: PT291836
NPI: 1033669650
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 7AM-6PM, SA
7AM-2PM

BUSH, NATHANAEL J
Provider ID: 268896
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1020 TIERRA DEL REY # A1
CHULA VISTA, CA 91910-7886
Phone: (619) 585-7104
Fax: (619) 585-7106
After Hours Phone: (619)
585-7104

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Website:
www.spineandsport.com
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

CHANG, ROBERT S

Provider ID: 215176
Board Certified Specialty: No
HEALTH EXCEL IPA INC
1020 TIERRA DEL REY # A1
CHULA VISTA, CA 91910-7886
Phone: (619) 585-7104
Fax: (619) 585-7106
After Hours Phone: (619)
585-7104
Provider Gender: Male
License number: PT291836
NPI: 1033669650
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

CHANG, ROBERT S

Provider ID: 268910
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1020 TIERRA DEL REY # A1
CHULA VISTA, CA 91910-7886

Phone: (619) 585-7104
Fax: (619) 585-7106
After Hours Phone: (619)
585-7104
Provider Gender: Male
License number: PT291836
NPI: 1033669650
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

DAGOSTINO, JACQUELINE R

Provider ID: 243632
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913-1895
Phone: (619) 482-3000
Fax:
After Hours Phone: (619)
482-3000
Provider Gender: Female
License number: PT295756
NPI: 1710457379
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

DICENSO, PHILIP M

Provider ID: 215190
Board Certified Specialty: No
HEALTH EXCEL IPA INC
1020 TIERRA DEL REY # A1
CHULA VISTA, CA 91910-7886
Phone: (619) 585-7104
Fax: (619) 585-7106
After Hours Phone: (619)
585-7104
Provider Gender: Male
License number: PT295601
NPI: 1710477468
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

DICENSO, PHILIP M

Provider ID: 268947
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1020 TIERRA DEL REY # A1
CHULA VISTA, CA 91910-7886
Phone: (619) 585-7104
Fax: (619) 585-7106
After Hours Phone: (619)
585-7104

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Male
License number: PT295601
NPI: 1710477468
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

DONES, GINA

Provider ID: 268856
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1020 TIERRA DEL REY # A-1
CHULA VISTA, CA 91910-7886
Phone: (619) 585-7104
Fax: (619) 585-7106
After Hours Phone: (619)
585-7104
Provider Gender: Female
License number: PT39455
NPI: 1316299696
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Community Care Ipa Llc
GEORGE, JENNIFER A
Provider ID: 129014
Board Certified Specialty: No
CHULA VISTA FAMILY HLTH
CTR
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2500

Fax:
After Hours Phone: (619)
515-2500
Provider Gender: Female
License number: PT294245
NPI: 1215402177
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
T, ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Chula Vista
Family Hlth Ctr
IPA:

HASTINGS, NATASHA L

Provider ID: 268895
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1020 TIERRA DEL REY # A1
CHULA VISTA, CA 91910-7886
Phone: (619) 585-7104
Fax:
After Hours Phone: (619)
585-7104
Provider Gender: Female

License number: PT291371
NPI: 1326395914
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

INTROCASO, BRIANNA L

Provider ID: 268948
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1020 TIERRA DEL REY # A1
CHULA VISTA, CA 91910-7886
Phone: (619) 585-7104
Fax: (619) 585-7106
After Hours Phone: (619)
585-7104
Provider Gender: Female
License number: PT293801
NPI: 1194235218
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

LANGWORTHY, MATTHEW

Provider ID: 268866
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1020 TIERRA DEL REY # A1
CHULA VISTA, CA 91910-7886
Phone: (619) 585-7104

Fax:
After Hours Phone: (619)
585-7104

Provider Gender: Male
License number: PT294466
NPI: 1750872768

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

Cultural Competency: No
Hospital Affiliation:

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL):
No

Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MARSOLINI, KAYLEIGH A

Provider ID: 268949
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1020 TIERRA DEL REY # A-1
CHULA VISTA, CA 91910-7886
Phone: (619) 585-7104

Fax: (619) 585-7106
After Hours Phone: (619)
585-7104

Provider Gender: Female
License number: PT294481
NPI: 1053810267

Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL):
No

Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MORIGEAU, SAMANTHA A

Provider ID: 269051
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1020 TIERRA DEL REY # A1
CHULA VISTA, CA 91910-7886
Phone: (619) 585-7104

Fax:
After Hours Phone: (619)
585-7104

Provider Gender: Female
License number: PT42287
NPI: 1760859268

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL):
No

Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc

OLIVEROS, YUNNUEN

Provider ID: 268905
Board Certified Specialty: No
COMMUNITY CARE IPA LLC

1020 TIERRA DEL REY # A1
CHULA VISTA, CA 91910-7886
Phone: (619) 585-7104

Fax:
After Hours Phone: (619)
585-7104

Provider Gender: Female
License number: PT294386
NPI: 1295234987

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

Cultural Competency: No
Hospital Affiliation:

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL):
No

Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

RYDINSKI, MILES C

Provider ID: 268902
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1020 TIERRA DEL REY # A1
CHULA VISTA, CA 91910-7886
Phone: (619) 585-7104

Fax:
After Hours Phone: (619)
585-7104

Provider Gender: Male
License number: PT295612
NPI: 1215426861

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation:
Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
American Sign Language (ASL):

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D. Directorio de proveedores de atención especializada

No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SANTAMARIA, JENNIFER E

Provider ID: 243544
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 1392 E PALOMAR ST STE 503
 CHULA VISTA, CA 91913-1895
Phone: (619) 482-3000

Fax:
After Hours Phone: (619)
 482-3000
Provider Gender: Female
License number: PT296313
NPI: 1063978203

Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No

☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SHEFFIELD, TIFFANY

Provider ID: 255402
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 1392 E PALOMAR ST STE 503
 CHULA VISTA, CA 91913-1895

Phone: (619) 482-3000
Fax: (619) 482-3001
After Hours Phone: (619)
 482-3000
Provider Gender: Female
License number: PT296953
NPI: 1134774342

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No

☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SPARKS, TODD M

Provider ID: 129142
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 1392 E PALOMAR ST STE 503
 CHULA VISTA, CA 91913-1895
Phone: (619) 482-3000

Fax:
After Hours Phone: (619)
 482-3000
Provider Gender: Male
License number: PT30298
NPI: 1265481139

Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No

☯ *Accessibility:*

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

RHEUMATOLOGY

AL NAHLAWI, BASMA

Provider ID: 284476
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 296 H ST STE 304
 CHULA VISTA, CA 91910-4779
Phone: (760) 736-8091

Fax: (760) 736-8092
After Hours Phone: (760)
 736-8091
Provider Gender: Female
License number: A115924
NPI: 1144455262

Provider English Spoken: Yes
Provider Language(s) Spoken:
 Arabic
Cultural Competency: No
Hospital Affiliation: Palomar
 Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
 No

☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

CHITKARA, PUJA, MD

Provider ID: 204158
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 765 MEDICAL CENTER CT STE
 216
 CHULA VISTA, CA 91911-6600

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 623-3000
 Fax: (619) 623-3001
 After Hours Phone: (619) 623-3000

Provider Gender: Female
 License number: A97619
 NPI: 1871718189

Provider English Spoken: Yes
 Provider Language(s) Spoken: Hindi, Russian, Spanish, Tagalog
 Cultural Competency: No

Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital

Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999

American Sign Language (ASL): No

Accessibility: Hours: M-SA 9AM-5PM

Website:
 Email:

Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

CHITKARA, PUJA

Provider ID: 262358
 Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 765 MEDICAL CENTER CT STE 216
 CHULA VISTA, CA 91911-6600

Phone: (619) 623-3000
 Fax: (619) 623-3001
 After Hours Phone: (619) 623-3000

Provider Gender: Female
 License number: A97619
 NPI: 1871718189
 Provider English Spoken: Yes

Provider Language(s) Spoken: Hindi, Russian, Spanish, Tagalog
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital Chula Vista Med Ctr, Scripps Mercy Hospital

Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No

Accessibility: Hours: M-SA 9AM-5PM
 Website:
 Email:

Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

CHWA, JEFFREY K

Provider ID: 129959
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 765 MEDICAL CENTER CT STE 216
 CHULA VISTA, CA 91911-6600

Phone: (619) 623-3000
 Fax: (619) 623-3001
 After Hours Phone: (619) 623-3000

Provider Gender: Male
 License number: 20A14736
 NPI: 1285989236
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Green Hospital

Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL): No

Accessibility: Hours: M-SA 9AM-5PM
 Website:
 Email:

Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc

CHWA, JEFFREY K , MD

Provider ID: 268780
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 765 MEDICAL CENTER CT STE 216
 CHULA VISTA, CA 91911-6600

Phone: (619) 623-3000
 Fax: (619) 623-3001
 After Hours Phone: (619) 623-3000

Provider Gender: Male
 License number: 20A14736
 NPI: 1285989236
 Provider English Spoken: Yes

Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Scripps Green Hospital, Sharp Chula Vista Med Ctr

Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No

Accessibility: Hours: M-SA 9AM-5PM
 Website:
 Email:

Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc

KOTHA, AKTHER J

Provider ID: 53697
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 374 H ST STE 103

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

CHULA VISTA, CA 91910-5547
Phone: (619) 205-0120
Fax: (619) 229-1109
After Hours Phone: (619) 205-0120
Provider Gender: Female
License number: A45440
NPI: 1780609503
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Hindi, Spanish, Telugu, Urdu
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MABAQUIAO, ARTHUR R
Provider ID: 279413
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 296 H ST STE 304
 CHULA VISTA, CA 91910-4779
Phone: (619) 334-4869
Fax: (619) 334-4940
After Hours Phone: (619) 334-4869
Provider Gender: Male
License number: A61769
NPI: 1730271933
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

PAZIRANDEH, MAHMOOD, MD
Provider ID: 268796
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 1310 3RD AVE STE B3
 CHULA VISTA, CA 91911-4371
Phone: (619) 827-0276
Fax: (619) 827-0297
After Hours Phone: (619) 827-0276
Provider Gender: Male
License number: C52328
NPI: 1134109390
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Russian, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc

REDDY, DANA A
Provider ID: 262363
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD
 272 CHURCH AVE STE 1
 CHULA VISTA, CA 91910-2718
Phone: (619) 427-1721
Fax: (619) 427-1235
After Hours Phone: (619) 427-1721
Provider Gender: Female
License number: A115598
NPI: 1144538778
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital, Sharp Memorial Hospital, Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings Medical Group-Sd

SURGERY GENERAL VASCULAR

SALLOUM, ALEXANDER C , MD
Provider ID: 268764
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 1111 BROADWAY STE 305
 CHULA VISTA, CA 91911-2700
Phone: (619) 567-7007
Fax: (619) 567-7775
After Hours Phone: (619) 567-7007

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Male
License number: A89300
NPI: 1124176151
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Paradise Valley Hospital, Palomar Medical Center, Pomerado Hospital, Palomar Health Downtown Campus
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SURGERY GENERAL

ARCOVEDO, RODOLFO
Provider ID: 217834
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
786 3RD AVE STE B
CHULA VISTA, CA 91910-5826
Phone: (619) 425-0797
Fax: (619) 425-0596
After Hours Phone: (619) 425-0797
Provider Gender: Male
License number: C51718
NPI: 1225018880
Provider English Spoken: Yes
Provider Language(s) Spoken: German, Spanish, Tagalog
Cultural Competency: No

Hospital Affiliation: Sharp Chula Vista Med Ctr, Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital Chula Vista, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

ARCOVEDO, RODOLFO
Provider ID: 217836
Board Certified Specialty: No
HEALTH EXCEL IPA INC
786 3RD AVE STE B
CHULA VISTA, CA 91910-5826
Phone: (619) 425-0797
Fax: (619) 425-0596
After Hours Phone: (619) 425-0797
Provider Gender: Male
License number: C51718
NPI: 1225018880
Provider English Spoken: Yes
Provider Language(s) Spoken: German, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital Chula Vista, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

BARRERA, HUGO H
Provider ID: 27172
Board Certified Specialty: No
COAST SURGICAL GROUP
786 3RD AVE STE B
CHULA VISTA, CA 91910-5826
Phone: (619) 425-0797
Fax: (619) 425-0596
After Hours Phone: (619) 425-0797

Provider Gender: Male
License number: G79280
NPI: 1043299100
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Coronado Hosp And Healthcare Ctr, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

BARRERA, HUGO H
Provider ID: 27172

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
COAST SURGICAL GROUP
786 3RD AVE STE B
CHULA VISTA, CA 91910-5826
Phone: (619) 425-0797
Fax: (619) 425-0596
After Hours Phone: (619) 425-0797
Provider Gender: Male
License number: G79280
NPI: 1043299100
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Coronado Hosp And Healthcare Ctr, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

HSU, ANDREW S

Provider ID: 53785
Board Certified Specialty: No
SOUTH BAY SURGICAL ASSOCS MED GRP
480 4TH AVE STE 404
CHULA VISTA, CA 91910-4413
Phone: (619) 425-7470
Fax:
After Hours Phone: (619) 425-7470
Provider Gender: Male

License number: A108956
NPI: 1083817399
Provider English Spoken: Yes
Provider Language(s) Spoken: Mandarin, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M,W,TH 8AM-5PM, TU,F 8AM-4PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

HSU, ANDREW S , MD

Provider ID: 53785
Board Certified Specialty: Yes
SOUTH BAY SURGICAL ASSOCS MED GRP
480 4TH AVE STE 404
CHULA VISTA, CA 91910-4413
Phone: (619) 425-4559
Fax: (619) 425-7472
After Hours Phone: (619) 425-4559
Provider Gender: Male
License number: A108956
NPI: 1083817399
Provider English Spoken: Yes
Provider Language(s) Spoken: Mandarin, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

HSU, BRADFORD T

Provider ID: 53792
Board Certified Specialty: No
SOUTH BAY SURGICAL ASSOCS MED GRP
480 4TH AVE STE 404
CHULA VISTA, CA 91910-4413
Phone: (619) 425-7470
Fax: (619) 425-7472
After Hours Phone: (619) 425-7470
Provider Gender: Male
License number: A86179
NPI: 1912968389
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Paradise Valley Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M,W,TH 8AM-5PM, TU,F 8AM-4PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

HSU, BRADFORD T , MD

Provider ID: 53792

Board Certified Specialty: No

SOUTH BAY SURGICAL

ASSOCS MED GRP

480 4TH AVE STE 404

CHULA VISTA, CA 91910-4413

Phone: (619) 425-4559

Fax: (619) 425-7472

After Hours Phone: (619)

425-4559

Provider Gender: Male

License number: A86179

NPI: 1912968389

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Chula

Vista Med Ctr, Scripps Mercy

Hospital Chula Vista, Scripps

Mercy Hospital, Paradise Valley

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

SPITZER, BLAKE A

Provider ID: 244850

Board Certified Specialty: No

HEALTH EXCEL IPA INC

786 3RD AVE STE B

CHULA VISTA, CA 91910-5826

Phone: (619) 425-0797

Fax: (619) 425-0596

After Hours Phone: (619)

425-0797

Provider Gender: Male

License number: A158371

NPI: 1316350085

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Chula

Vista Med Ctr, Scripps Mercy

Hospital, Paradise Valley

Hospital, Sharp Coronado Hosp

And Healthcare Ctr, Scripps

Mercy Hospital Chula Vista

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

SUMMERS, STEPHEN T

Provider ID: 27708

Board Certified Specialty: No

COAST SURGICAL GROUP

786 3RD AVE STE B

CHULA VISTA, CA 91910-5826

Phone: (619) 425-0797

Fax: (619) 425-0596

After Hours Phone: (619)

425-0797

Provider Gender: Male

License number: G70943

NPI: 1174502223

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Tagalog

Cultural Competency: No

Hospital Affiliation: Sharp Chula

Vista Med Ctr, Scripps Mercy

Hospital Chula Vista, Sharp

Coronado Hosp And Healthcare

Ctr, Paradise Valley Hospital,

Scripps Mercy Hospital, Sharp

Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc,

Imperial Health Holdings Medical

Group-Sd

SUMMERS, STEPHEN T

Provider ID: 27708

Board Certified Specialty: No

COAST SURGICAL GROUP

786 3RD AVE STE B

CHULA VISTA, CA 91910-5826

Phone: (619) 425-0797

Fax: (619) 425-0596

After Hours Phone: (619)

425-0797

Provider Gender: Male

License number: G70943

NPI: 1174502223

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Tagalog

Cultural Competency: No

Hospital Affiliation: Sharp Chula

Vista Med Ctr, Scripps Mercy

Hospital Chula Vista, Sharp

Coronado Hosp And Healthcare

Ctr, Paradise Valley Hospital,

Scripps Mercy Hospital, Sharp

Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc,
Imperial Health Holdings Medical
Group-Sd

YANG, YIFAN

Provider ID: 262296

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD

786 3RD AVE STE B
CHULA VISTA, CA 91910-5826

Phone: (619) 425-0797

Fax: (619) 827-0400

After Hours Phone: (619)

425-0797

Provider Gender: Male

License number: A109921

NPI: 1114188539

Provider English Spoken: Yes

Provider Language(s) Spoken:

Chinese, Mandarin

Cultural Competency: No

Hospital Affiliation: Sharp Chula

Vista Med Ctr, Sharp Coronado

Hosp And Healthcare Ctr,

Scripps Mercy Hospital Chula

Vista, Sharp Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc,
Imperial Health Holdings Medical
Group-Sd

YANG, YIFAN

Provider ID: 265267

Board Certified Specialty: No

HEALTH EXCEL IPA INC

786 3RD AVE STE B

CHULA VISTA, CA 91910-5826

Phone: (619) 425-0797

Fax: (619) 827-0400

After Hours Phone: (619)

425-0797

Provider Gender: Male

License number: A109921

NPI: 1114188539

Provider English Spoken: Yes

Provider Language(s) Spoken:

Chinese, Mandarin

Cultural Competency: No

Hospital Affiliation: Sharp Chula

Vista Med Ctr, Sharp Coronado

Hosp And Healthcare Ctr,

Scripps Mercy Hospital Chula

Vista, Sharp Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc,
Imperial Health Holdings Medical
Group-Sd

YANG, YIFAN

Provider ID: 83019

Board Certified Specialty: No

COAST SURGICAL GROUP

786 3RD AVE

CHULA VISTA, CA 91910-5826

Phone: (619) 425-0797

Fax: (619) 425-0596

After Hours Phone: (619)

425-0797

Provider Gender: Male

License number: A109921

NPI: 1114188539

Provider English Spoken: Yes

Provider Language(s) Spoken:

Chinese, Mandarin

Cultural Competency: No

Hospital Affiliation: Sharp Chula

Vista Med Ctr, Sharp Coronado

Hosp And Healthcare Ctr,

Scripps Mercy Hospital Chula

Vista, Sharp Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc,
Imperial Health Holdings Medical
Group-Sd

YANG, YIFAN

Provider ID: 83019

Board Certified Specialty: No

COAST SURGICAL GROUP

786 3RD AVE

CHULA VISTA, CA 91910-5826

Phone: (619) 425-0797

Fax: (619) 425-0596

After Hours Phone: (619)

425-0797

Provider Gender: Male

License number: A109921

NPI: 1114188539

Provider English Spoken: Yes

Provider Language(s) Spoken:

Chinese, Mandarin

Cultural Competency: No

Hospital Affiliation: Sharp Chula

Vista Med Ctr, Sharp Coronado

Hosp And Healthcare Ctr,

Scripps Mercy Hospital Chula

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Vista, Sharp Memorial Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Health Excel Ipa Inc,
 Imperial Health Holdings Medical
 Group-Sd

YU, NICHOLAS R

Provider ID: 100762
 Board Certified Specialty: No
 SOUTH BAY SURGICAL
 ASSOCS MED GRP
 480 4TH AVE STE 404
 CHULA VISTA, CA 91910-4413
 Phone: (619) 425-7470
 Fax:
 After Hours Phone: (619)
 425-7470
 Provider Gender: Male
 License number: A136120
 NPI: 1710149950
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Korean, Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp Chula
 Vista Med Ctr, Scripps Mercy
 Hospital Chula Vista, Scripps
 Mercy Hospital
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: W
 Hours: M,W,TH 8AM-5PM, TU,F
 8AM-4PM, SA 9AM-5PM
 Website:
 Email:

Medical Group(s):
 IPA: Community Care Ipa Llc
YU, NICHOLAS R, MD
 Provider ID: 100762
 Board Certified Specialty: Yes
 SOUTH BAY SURGICAL
 ASSOCS MED GRP
 480 4TH AVE STE 404
 CHULA VISTA, CA 91910-4413
 Phone: (619) 425-5184
 Fax: (619) 425-7472
 After Hours Phone: (619)
 425-5184
 Provider Gender: Male
 License number: A136120
 NPI: 1710149950
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Korean, Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp Chula
 Vista Med Ctr, Scripps Mercy
 Hospital Chula Vista, Scripps
 Mercy Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

SURGERY ORTHOPEDIC

BAGHERI, ALI, MD

Provider ID: 117911
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 480 4TH AVE STE 501
 CHULA VISTA, CA 91910-4414

Phone: (619) 425-9510
 Fax: (619) 425-0539
 After Hours Phone: (619)
 425-9510
 Provider Gender: Male
 License number: A123272
 NPI: 1760632947
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Farsi, Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps
 Memorial Hospital, Scripps
 Mercy Hospital Chula Vista
 Medi-Cal Open Panel: No
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Imperial Health Holdings
 Medical Group-Sd

BAGHERI, ALI

Provider ID: 117911
 Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 480 4TH AVE STE 501
 CHULA VISTA, CA 91910-4414
 Phone: (619) 425-9510
 Fax: (619) 425-0539
 After Hours Phone: (619)
 425-9510
 Provider Gender: Male
 License number: A123272
 NPI: 1760632947
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Farsi, Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Memorial Hospital, Scripps
Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings
Medical Group-Sd

KIMBALL, MICHAEL P

Provider ID: 262112
Board Certified Specialty: Yes
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
480 4TH AVE STE 501
CHULA VISTA, CA 91910-4414
Phone: (858) 455-6460
Fax: (619) 425-0539
After Hours Phone: (858)
455-6460
Provider Gender: Male
License number: G76060
NPI: 1588648653
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Scripps
Mercy Hospital Chula Vista,
Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd
KIMBALL, MICHAEL P , MD
Provider ID: 268619
Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC
480 4TH AVE STE 501
CHULA VISTA, CA 91910-4414
Phone: (858) 455-6460
Fax: (619) 425-0539
After Hours Phone: (858)
455-6460

Provider Gender: Male
License number: G76060
NPI: 1588648653
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Scripps
Mercy Hospital Chula Vista,
Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

ROSENFELD, ALAN L

Provider ID: 212874
Board Certified Specialty: Yes
HEALTH EXCEL IPA INC
480 4TH AVE STE 501

CHULA VISTA, CA 91910-4414
Phone: (619) 425-9510
Fax: (619) 425-0539
After Hours Phone: (619)
425-9510
Provider Gender: Male
License number: G75293
NPI: 1588648968
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital Chula Vista, Scripps
Memorial Hospital, Paradise
Valley Hospital, Sharp Chula
Vista Med Ctr, Scripps Mercy
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

ROSENFELD, ALAN L , MD

Provider ID: 242937
Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC
480 4TH AVE STE 501
CHULA VISTA, CA 91910-4414
Phone: (619) 425-9510
Fax: (619) 425-0539
After Hours Phone: (619)
425-9510
Provider Gender: Male
License number: G75293
NPI: 1588648968

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p><i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Paradise Valley Hospital, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p> <p>ROSENFELD, ALAN L , MD <i>Provider ID:</i> 242939 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 480 4TH AVE STE 509 CHULA VISTA, CA 91910-4414 <i>Phone:</i> (619) 425-9510 <i>Fax:</i> <i>After Hours Phone:</i> (619) 425-9510 <i>Provider Gender:</i> Male <i>License number:</i> G75293 <i>NPI:</i> 1588648968 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Paradise Valley Hospital, Sharp Chula</p>	<p>Vista Med Ctr, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p> <p>ROSENFELD, ALAN L <i>Provider ID:</i> 262176 <i>Board Certified Specialty:</i> Yes IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 480 4TH AVE STE 501 CHULA VISTA, CA 91910-4414 <i>Phone:</i> (619) 425-9510 <i>Fax:</i> (619) 425-0539 <i>After Hours Phone:</i> (619) 425-9510 <i>Provider Gender:</i> Male <i>License number:</i> G75293 <i>NPI:</i> 1588648968 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Paradise Valley Hospital, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i></p>	<p><i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p> <p>TAYYAB, NEIL A <i>Provider ID:</i> 213621 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 480 4TH AVE STE 501 CHULA VISTA, CA 91910-4414 <i>Phone:</i> (619) 425-9510 <i>Fax:</i> (619) 425-0539 <i>After Hours Phone:</i> (619) 425-9510 <i>Provider Gender:</i> Male <i>License number:</i> A94408 <i>NPI:</i> 1831149970 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista, Sharp Memorial Hospital, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p> <p>TAYYAB, NEIL A</p>
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D. Directorio de proveedores de atención especializada

Provider ID: 265082
Board Certified Specialty: No
HEALTH EXCEL IPA INC
786 3RD AVE STE B
CHULA VISTA, CA 91910-5826
Phone: (619) 425-0797
Fax:
After Hours Phone: (619)
425-0797
Provider Gender: Male
License number: A94408
NPI: 1831149970
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital Chula Vista, Scripps
Memorial Hospital, Sharp
Memorial Hospital, Scripps
Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

TAYYAB, NEIL A , MD

Provider ID: 268616
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
480 4TH AVE STE 501
CHULA VISTA, CA 91910-4414
Phone: (619) 425-9510
Fax: (619) 425-0539
After Hours Phone: (619)
425-9510
Provider Gender: Male

License number: A94408
NPI: 1831149970
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital Chula Vista, Scripps
Memorial Hospital, Sharp
Memorial Hospital, Scripps
Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

TAYYAB, NEIL A

Provider ID: 66253
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
480 4TH AVE STE 501
CHULA VISTA, CA 91910-4414
Phone: (619) 425-9510
Fax: (619) 425-0539
After Hours Phone: (619)
425-9510
Provider Gender: Male
License number: A94408
NPI: 1831149970
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Scripps
Mercy Hospital Chula Vista,
Sharp Memorial Hospital, Scripps

Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

SURGERY THORACIC

HUANG, MARK W

Provider ID: 27348
Board Certified Specialty: No
OPERATION SAMAHAN INC
765 MEDICAL CENTER CT STE
216
CHULA VISTA, CA 91911-6600
Phone: (619) 421-1111
Fax: (619) 421-1504
After Hours Phone: (619)
421-1111
Provider Gender: Male
License number: A74711
NPI: 1730185760
Provider English Spoken: Yes
Provider Language(s) Spoken:
Chinese, Mandarin
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr, Grossmont
Hospital, Paradise Valley
Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM

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D. Directorio de proveedores de atención especializada

<p><i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>	<p>750 MEDICAL CENTER CT STE 14 CHULA VISTA, CA 91911-6634 <i>Phone:</i> (619) 230-0400 <i>Fax:</i> (858) 429-7936 <i>After Hours Phone:</i> (619) 230-0400 <i>Provider Gender:</i> Female <i>License number:</i> A131270 <i>NPI:</i> 1689081275 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr, Alvarado Hospital Llc, Grossmont Hospital, Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 16/105 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc</p>	<p><i>NPI:</i> 1689081275 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr, Alvarado Hospital Llc, Grossmont Hospital, Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 16/105 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc</p>
<p>HUANG, MARK W <i>Provider ID:</i> 27348 <i>Board Certified Specialty:</i> No CVTS MEDICAL GROUP INC 765 MEDICAL CENTER CT STE 216 CHULA VISTA, CA 91911-6600 <i>Phone:</i> (619) 421-1111 <i>Fax:</i> (619) 421-1504 <i>After Hours Phone:</i> (619) 421-1111 <i>Provider Gender:</i> Male <i>License number:</i> A74711 <i>NPI:</i> 1730185760 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Chinese, Mandarin <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr, Grossmont Hospital, Paradise Valley Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>		
<p>SEVILLA, CLAUDIA <i>Provider ID:</i> 283157 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 750 MEDICAL CENTER CT STE 14 CHULA VISTA, CA 91911-6634 <i>Phone:</i> (619) 230-0400 <i>Fax:</i> (858) 429-7936 <i>After Hours Phone:</i> (619) 230-0400 <i>Provider Gender:</i> Female <i>License number:</i> A131270</p>		
<p>VAPNEK, EVAN M <i>Provider ID:</i> 265219 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 786 3RD AVE STE B CHULA VISTA, CA 91910-5826 <i>Phone:</i> (619) 425-0797 <i>Fax:</i> (619) 425-0596 <i>After Hours Phone:</i> (619) 425-0797 <i>Provider Gender:</i> Male <i>License number:</i> G75357 <i>NPI:</i> 1811003411 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Sharp Coronado Hosp And Healthcare Ctr, Sharp Memorial Hospital <i>Medi-Cal Open Panel:</i> Yes</p>		
<p style="text-align: center;">UROLOGY</p>		
<p>SEVILLA, CLAUDIA <i>Provider ID:</i> 279166 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC</p>		

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D. Directorio de proveedores de atención especializada

Min/Max Age: 18/105
 American Sign Language (ASL):
 No

♿ Accessibility:
 Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc

CORONADO

ALLERGY IMMUNOLOGY

COHEN, GARY A

Provider ID: 206022
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 230 PROSPECT PL STE 340D
 CORONADO, CA 92118-1993
 Phone: (858) 458-0940
 Fax: (858) 458-3688
 After Hours Phone: (858)
 458-0940
 Provider Gender: Male
 License number: G43070
 NPI: 1346424462
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Sharp
 Memorial Hospital, Sharp
 Coronado Hosp And Healthcare
 Ctr, Rady Childrens Hospital San
 Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:

Medical Group(s):
 IPA: Rady Childrens Health
 Network

FAMILY PRACTICE

SWEET, PATRICK H

Provider ID: 270722
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 131 ORANGE AVE # 101
 CORONADO, CA 92118-1408
 Phone: (619) 964-9649
 Fax: (619) 996-2014
 After Hours Phone: (619)
 964-9649
 Provider Gender: Male
 License number: A101827
 NPI: 1457407702
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Hoag Hospital
 Irvine, Scripps Mercy Hospital
 Chula Vista, Grossmont Hospital,
 Scripps Memorial Hospital,
 Desert Regional Med Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

GASTROENTEROLOGY

HASSANEIN, TAREK I

Provider ID: 276939
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 131 ORANGE AVE # 101B

CORONADO, CA 92118-1408
 Phone: (619) 522-0399
 Fax: (619) 522-0375

After Hours Phone: (619)
 522-0399

Provider Gender: Male

License number: A54452

NPI: 1801854450

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, French, German,

Spanish, Urdu

Cultural Competency: No

Hospital Affiliation: Parkview

Community Hospital Medical

Center, Sharp Coronado Hosp

And Healthcare Ctr, Sharp Chula

Vista Med Ctr, Saddleback

Memorial Med Ctr, Scripps Mercy

Hospital Chula Vista, Riverside

Community Hosp, Childrens

Hospital At Mission, Grossmont

Hospital, Hoag Hospital Irvine,

Doctors Hosp Of West Covina

Inc

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc

LAJIN, MICHAEL, MD

Provider ID: 269837

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

230 PROSPECT PL # 220

CORONADO, CA 92118-1978

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D. Directorio de proveedores de atención especializada

Phone: (619) 460-4055
 Fax:
 After Hours Phone: (619) 460-4055
 Provider Gender: Male
 License number: C53475
 NPI: 1467411702
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Arabic, German, Japanese, Spanish
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital, Sharp Coronado Hosp And Healthcare Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

HEARING AID DEALER / SUPPLIER

DAVIS, KELLE L , MD
 Provider ID: 268655
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 801 ORANGE AVE
 CORONADO, CA 92118-2663
 Phone: (619) 437-8154
 Fax: (310) 989-3092
 After Hours Phone: (619) 437-8154
 Provider Gender: Female
 License number: HA6083
 NPI: 1902853344
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No

Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc

INTERNAL MEDICINE

DAVIS, JASON T , MD
 Provider ID: 270966
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 230 PROSPECT PL STE 340B
 CORONADO, CA 92118-1991
 Phone: (619) 299-2350
 Fax: (619) 297-8379
 After Hours Phone: (619) 299-2350
 Provider Gender: Male
 License number: A100799
 NPI: 1295911469
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Sharp Coronado Hosp And Healthcare Ctr, Sharp Memorial Hospital, Kindred Hospital San Diego, Scripps Mercy Hospital, Vibra Hospital Of San Diego, Grossmont Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:

Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

HAMMES, JOHN S
 Provider ID: 214242
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 230 PROSPECT PL STE 340B
 CORONADO, CA 92118-1991
 Phone: (619) 299-2350
 Fax: (619) 297-8379
 After Hours Phone: (619) 299-2350
 Provider Gender: Male
 License number: G84351
 NPI: 1891766994
 Provider English Spoken: Yes
 Provider Language(s) Spoken: French, Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Sharp Coronado Hosp And Healthcare Ctr, Kindred Hospital San Diego, Vibra Hospital Of San Diego, Scripps Mercy Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/120
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

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D. Directorio de proveedores de atención especializada

OLIVER, DEANNA L

Provider ID: 277052
Board Certified Specialty: No
HEALTH EXCEL IPA INC
 131 ORANGE AVE # 101
 CORONADO, CA 92118-1408
Phone: (619) 522-0399
Fax: (619) 522-0375
After Hours Phone: (619) 522-0399
Provider Gender: Female
License number: A139921
NPI: 1750725362
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital Chula Vista, Adventist Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 17/100
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

NEPHROLOGY

DAVIS, JASON T

Provider ID: 83879
Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC
 230 PROSPECT PL STE 340B
 CORONADO, CA 92118-1991

Phone: (619) 299-2350
Fax: (619) 297-8379
After Hours Phone: (619) 299-2350
Provider Gender: Male
License number: A100799
NPI: 1295911469
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Sharp Coronado Hosp And Healthcare Ctr, Sharp Memorial Hospital, Kindred Hospital San Diego, Scripps Mercy Hospital, Vibra Hospital Of San Diego, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

HAMMES, JOHN S

Provider ID: 262326
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 230 PROSPECT PL STE 340B
 CORONADO, CA 92118-1991
Phone: (619) 299-2350
Fax: (619) 297-8379
After Hours Phone: (619) 299-2350
Provider Gender: Male

License number: G84351
NPI: 1891766994
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Sharp Coronado Hosp And Healthcare Ctr, Kindred Hospital San Diego, Vibra Hospital Of San Diego, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

OBSTETRICS / GYNECOLOGY

SEFA-BOAKYE, KOFI D

Provider ID: 209740
Board Certified Specialty: No
HEALTH EXCEL IPA INC
 230 PROSPECT PL STE 210
 CORONADO, CA 92118-1980
Phone: (619) 435-0041
Fax: (619) 435-1206
After Hours Phone: (619) 435-0041
Provider Gender: Male
License number: G59670
NPI: 1902993660
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Sharp Chula Vista Med Ctr, Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 12/110
American Sign Language (ASL): No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc, Rady Childrens Health Network

PEDIATRIC ALLERGY / IMMUNOLOGY

COHEN, GARY A

Provider ID: 242806

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

230 PROSPECT PL # 220
CORONADO, CA 92118-1978

Phone: (858) 458-0940

Fax: (858) 458-3688

After Hours Phone: (858)
458-0940

Provider Gender: Male

License number: G43070

NPI: 1346424462

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Sharp

Coronado Hosp And Healthcare

Ctr, Rady Childrens Hospital San

Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

UROLOGY

ROBERTS, JAMES L

Provider ID: 257532

Board Certified Specialty: No

BLUE SHIELD PROMISE

HEALTH PLAN DIRECT

230 PROSPECT PL # 300

CORONADO, CA 92118-1978

Phone: (619) 299-0670

Fax: (858) 429-7929

After Hours Phone: (619)

299-0670

Provider Gender: Male

License number: G59945

NPI: 1508972191

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Sharp

Coronado Hosp And Healthcare

Ctr, Scripps Mercy Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Blue Shield Promise Health

Plan Direct, Community Care Ipa

Llc, Health Excel Ipa Inc

ROBERTS, JAMES L

Provider ID: 261706

Board Certified Specialty: Yes

HEALTH EXCEL IPA INC

230 PROSPECT PL STE 210

CORONADO, CA 92118-1980

Phone: (619) 299-0670

Fax:

After Hours Phone: (619)

299-0670

Provider Gender: Male

License number: G59945

NPI: 1508972191

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Sharp

Coronado Hosp And Healthcare

Ctr, Scripps Mercy Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Blue Shield Promise Health

Plan Direct, Community Care Ipa

Llc, Health Excel Ipa Inc

EL CAJON

CERTIFIED NURSE PRACTITIONER

PARK, SUN MIN

Provider ID: 277908

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

2125 CITRACADO PKWY, STE 100
EL CAJON, CA 92022
Phone: (760) 480-8770
Fax: (760) 480-8811
After Hours Phone: (760) 480-8770
Provider Gender: Female
License number: NP20538
NPI: 1376678250
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

OPHTHALMOLOGY

SAMUEL, MICHAEL A , MD
Provider ID: 268595
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
255 W MADISON AVE # 1
EL CAJON, CA 92020
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800)
898-2020
Provider Gender: Male
License number: A83237
NPI: 1730175670
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Huntington
Memorial Hospital, Desert
Regional Med Ctr, Eisenhower
Medical Ctr, Pioneers Memorial
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

ESCONDIDO

PHYSICIANS ASSISTANT

CLARK, YVONNE L
Provider ID: 260065
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
477 CITRACADO PKWY # 206
ESCONDIDO, CA 92025
Phone: (760) 755-7600
Fax: (760) 294-9274
After Hours Phone: (760)
755-7600
Provider Gender: Female
License number: PA20447
NPI: 1629302476
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

EL CAJON

CARDIOLOGY

KAFRI, HASSAN, MD
Provider ID: 209019
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
328 HIGHLAND AVE # 200
EL CAJON, CA 92020-5207
Phone: (619) 930-9404
Fax: (619) 930-9426
After Hours Phone: (619)
930-9404
Provider Gender: Male
License number: A96002
NPI: 1730258401
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Farsi, German, Russian,
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista, Grossmont Hospital,
Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

KAFRI, HASSAN

Provider ID: 240321
Board Certified Specialty: No
HEALTH EXCEL IPA INC
 328 HIGHLAND AVE # 200
 EL CAJON, CA 92020-5207
Phone: (619) 930-9404
Fax: (619) 930-9426
After Hours Phone: (619) 930-9404
Provider Gender: Male
License number: A96002
NPI: 1730258401
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Farsi, German, Russian, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Grossmont Hospital, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

NAGHI, JESSE J

Provider ID: 283621
Board Certified Specialty: No
HEALTH EXCEL IPA INC
 1380 EL CAJON BLVD STE 100
 EL CAJON, CA 92020-5760
Phone: (619) 867-0557
Fax:
After Hours Phone: (619) 867-0557

Provider Gender: Male
License number: A110094
NPI: 1386896736
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Bulgarian, Russian, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Grossmont Hospital, Sharp Memorial Hospital, Alvarado Hospital Llc, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

PONCE, SONIA G

Provider ID: 268703
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 328 HIGHLAND AVE # 200
 EL CAJON, CA 92020-5207
Phone: (619) 930-9404
Fax: (619) 930-9426
After Hours Phone: (619) 930-9404
Provider Gender: Female
License number: A145008
NPI: 1164659033
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps

Memorial Hospital, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

SHARF, ALBERT J , MD

Provider ID: 269167
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 1240 BROADWAY STE 210
 EL CAJON, CA 92021-4947
Phone: (619) 470-7700
Fax: (619) 900-4589
After Hours Phone: (619) 470-7700
Provider Gender: Male
License number: G72122
NPI: 1649349820
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Scripps Mercy Hospital, Alvarado Hospital Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

ZAVARO, SUHAIL H

Provider ID: 241921
Board Certified Specialty: No
HEALTH EXCEL IPA INC
300 S PIERCE ST # 102
EL CAJON, CA 92020-4124
Phone: (619) 668-4700
Fax: (619) 668-0049
After Hours Phone: (619)
668-4700
Provider Gender: Male
License number: A46162
NPI: 1730258195
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Alvarado Hospital Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
Accessibility: P, EB, IB, E, R,
W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

CARDIOVASCULAR DISEASE

BARVALIA, MIHIR M

Provider ID: 283704
Board Certified Specialty: No
HEALTH EXCEL IPA INC
1380 EL CAJON BLVD STE 100
EL CAJON, CA 92020-5760

Phone: (619) 867-0557
Fax: (619) 867-0558
After Hours Phone: (619)
867-0557
Provider Gender: Male
License number: A156332
NPI: 1568723922
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic
Cultural Competency: No
Hospital Affiliation: St Bernardine
Med Ctr, Community Hosp Of
San Bernardino, San Antonio
Comm Hosp, Scripps Memorial
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

CARLSON, STEVEN K

Provider ID: 248317
Board Certified Specialty: No
HEALTH EXCEL IPA INC
1625 E MAIN ST STE 201
EL CAJON, CA 92021-5244
Phone: (619) 486-6512
Fax: (619) 616-2104
After Hours Phone: (619)
486-6512
Provider Gender: Male
License number: A109957
NPI: 1467602946
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Garfield

Medical Center, Santa Monica
Ucla Med Ctr, Ronald Reagan
Ucla Med Ctr, Scripps Mercy
Hospital, Sharp Chula Vista Med
Ctr, Sharp Memorial Hospital,
Alvarado Hospital Llc, Grossmont
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

FERNANDEZ, GENARO

Provider ID: 283609
Board Certified Specialty: No
HEALTH EXCEL IPA INC
1380 EL CAJON BLVD STE 100
EL CAJON, CA 92020-5760
Phone: (619) 867-0557
Fax:
After Hours Phone: (619)
867-0557
Provider Gender: Male
License number: A122302
NPI: 1073768891
Provider English Spoken: Yes
Provider Language(s) Spoken:
French, Italian, Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Sharp Chula Vista Med
Ctr, Alvarado Hosp Med Ctr,
Scripps Memorial Hospital, Sharp
Memorial Hospital, Scripps
Mercy Hospital, Scripps Mercy
Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc	EL CAJON, CA 92021-5244 <i>Phone:</i> (619) 486-6512 <i>Fax:</i> (619) 486-6470 <i>After Hours Phone:</i> (619) 486-6512 <i>Provider Gender:</i> Male <i>License number:</i> A125669 <i>NPI:</i> 1831393289 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Swahili <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 18/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc	Ctr, Sharp Memorial Hospital, Alvarado Hospital Llc, Grossmont Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 16/120 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc
HOURLANI, RAYAN R <i>Provider ID:</i> 241994 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 300 S PIERCE ST # 102 EL CAJON, CA 92020-4124 <i>Phone:</i> (619) 668-4700 <i>Fax:</i> (619) 668-0049 <i>After Hours Phone:</i> (619) 668-4700 <i>Provider Gender:</i> Male <i>License number:</i> A119614 <i>NPI:</i> 1265638811 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic, Farsi, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Alvarado Hospital Llc, Grossmont Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 18/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> P, EB, IB, E, R <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Health Excel Ipa Inc	MOUSSAVIAN, MEHRAN <i>Provider ID:</i> 248176 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 1625 E MAIN ST STE 201 EL CAJON, CA 92021-5244 <i>Phone:</i> (619) 486-6512 <i>Fax:</i> (619) 486-6470 <i>After Hours Phone:</i> (619) 486-6512 <i>Provider Gender:</i> Male <i>License number:</i> 20A7241 <i>NPI:</i> 1689788234 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr, Tri City Medical	NARAYANAN, MEENA R <i>Provider ID:</i> 248192 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 1625 E MAIN ST STE 201 EL CAJON, CA 92021-5244 <i>Phone:</i> (619) 486-6512 <i>Fax:</i> (619) 486-6470 <i>After Hours Phone:</i> (619) 486-6512 <i>Provider Gender:</i> Female <i>License number:</i> A113448 <i>NPI:</i> 1508170697 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Memorial Hospital, Sharp Chula Vista Med Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 18/99 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc,
MOHAMEDALI, BURHAN <i>Provider ID:</i> 248119 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 1625 E MAIN ST STE 201		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Health Excel Ipa Inc

PONCE, SONIA G

Provider ID: 212810
Board Certified Specialty: No
HEALTH EXCEL IPA INC
 328 HIGHLAND AVE # 200
 EL CAJON, CA 92020-5207
Phone: (619) 930-9404
Fax: (619) 930-9426
After Hours Phone: (619) 930-9404
Provider Gender: Female
License number: A145008
NPI: 1164659033
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

SHEREV, DIMITRI A

Provider ID: 283640
Board Certified Specialty: No
HEALTH EXCEL IPA INC
 1380 EL CAJON BLVD STE 100
 EL CAJON, CA 92020-5760
Phone: (619) 867-0557
Fax:
After Hours Phone: (619) 867-0557

Provider Gender: Male
License number: A70917
NPI: 1154323996
Provider English Spoken: Yes
Provider Language(s) Spoken: Bulgarian, Malayalam, Russian, Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Alvarado Community Hospital, Sharp Memorial Hospital, Scripps Memorial Hospital, Alvarado Hospital Llc, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

SHETABI, KAMBIZ

Provider ID: 278855
Board Certified Specialty: No
HEALTH EXCEL IPA INC
 1625 E MAIN ST STE 201
 EL CAJON, CA 92021-5244
Phone: (619) 486-6512
Fax: (619) 486-6470
After Hours Phone: (619) 486-6512
Provider Gender: Male
License number: A126187
NPI: 1972827806
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula

Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/99
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

CERTIFIED NURSE PRACTITIONER

BRANNEN, MANDY M , NPA

Provider ID: 241600
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 215 W MADISON AVE
 EL CAJON, CA 92020-3405
Phone: (619) 401-6236
Fax:
After Hours Phone: (619) 401-6236
Provider Gender: Female
License number: NP95007286
NPI: 1891205159
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

CHUDACEK, JANET M , MD

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider ID: 241626
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
215 W MADISON AVE
EL CAJON, CA 92020-3405
Phone: (760) 737-6960
Fax:
After Hours Phone: (760)
737-6960
Provider Gender: Female
License number: NP95008776
NPI: 1932606118
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

GRIMM, HANA R

Provider ID: 261035
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
250 E CHASE AVE # 108
EL CAJON, CA 92020-6305
Phone: (619) 442-2560
Fax: (619) 442-7836
After Hours Phone: (619)
442-2560
Provider Gender: Female
License number: NP22474
NPI: 1831463751
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:

Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

JOHNSON, KIMBERLY A

Provider ID: 283636
Board Certified Specialty: No
HEALTH EXCEL IPA INC
328 HIGHLAND AVE # 200
EL CAJON, CA 92020-5207
Phone: (619) 930-9404
Fax: (619) 930-9426
After Hours Phone: (619)
930-9404
Provider Gender: Female
License number: NP95010364
NPI: 1477024370
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

KING, PAILAI I

Provider ID: 104067
Board Certified Specialty: No
ZAVARO CARDIOVASCULAR
INST A MED CORP

300 S PIERCE ST # 102
EL CAJON, CA 92020-4124
Phone: (619) 668-4700
Fax:
After Hours Phone: (619)
668-4700
Provider Gender: Female
License number: NP23405
NPI: 1497187090
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: P, EB, IB, E, R,
W
Hours: M-F 8AM-4:30PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LEE, PATRICIA Y

Provider ID: 283570
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
844 JACKMAN ST
EL CAJON, CA 92020-3053
Phone: (619) 442-2560
Fax: (619) 442-7836
After Hours Phone: (619)
442-2560
Provider Gender: Female
License number: NP23807
NPI: 1710309695
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

LEONARD, BEVERLY S

Provider ID: 115081
Board Certified Specialty: No
CHASE AVENUE FAMILY HEALTH CTRS INC
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax:
After Hours Phone: (619) 515-2499
Provider Gender: Female
License number: NP10943
NPI: 1285772392
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Chase Avenue Family Health Ctrs Inc
IPA:

LUCKETT, DE COURCY E

Provider ID: 259740
Board Certified Specialty: No

HEALTH EXCEL IPA INC
1580 N 2ND ST
EL CAJON, CA 92021-3447
Phone: (619) 447-2425
Fax: (619) 487-0538
After Hours Phone: (619) 447-2425
Provider Gender: Female
License number: NP95000435
NPI: 1023410578
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/199
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

MANGENE, CYNTHIA L

Provider ID: 25690
Board Certified Specialty: No
VISTA COMMUNITY CLNC
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax:
After Hours Phone: (619) 515-2499
Provider Gender: Female
License number: NP6782
NPI: 1548292626
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Chase Avenue Family Health Ctrs Inc
IPA:

Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Chase Avenue Family Health Ctrs Inc
IPA:

MANGENE, CYNTHIA L

Provider ID: 25690
Board Certified Specialty: No
CHASE AVENUE FAMILY HEALTH CTRS INC
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax:
After Hours Phone: (619) 515-2499
Provider Gender: Female
License number: NP6782
NPI: 1548292626
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Chase Avenue Family Health Ctrs Inc
IPA:

OCHOA, ERLINDA A

Provider ID: 116673
Board Certified Specialty: No
LA MAESTRA CHC EL CAJON

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

BROADWAY
 1032 BROADWAY
 EL CAJON, CA 92021-7416
 Phone: (619) 795-5991
 Fax:
 After Hours Phone: (619)
 795-5991
 Provider Gender: Female
 License number: NP4430
 NPI: 1346437464
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: W
 Hours: M-F 8:30AM-5:30PM, SA
 9AM-5PM
 Website: www.lamaestra.org
 Email:
 Medical Group(s): La Maestra
 Chc El Cajon Broadway
 IPA:

PHAM, MARY-LYSIANNE V
 Provider ID: 276921
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 1351 BROADWAY
 EL CAJON, CA 92021-5811
 Phone: (619) 383-6703
 Fax: (619) 567-2455
 After Hours Phone: (619)
 383-6703
 Provider Gender: Female
 License number: NP95008968
 NPI: 1699263269
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally

Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Health Excel Ipa Inc

PIRTLE, KEYSHONE D
 Provider ID: 284244
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 5442 SYCUAN RD
 EL CAJON, CA 92019-1816
 Phone: (619) 445-0707
 Fax: (619) 445-9764
 After Hours Phone: (619)
 445-0707
 Provider Gender: Male
 License number: NP95247697
 NPI: 1417567827
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

RELLA, KARLAANNE
 Provider ID: 283534
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK

844 JACKMAN ST
 EL CAJON, CA 92020-3053
 Phone: (619) 442-2560
 Fax: (619) 442-7836
 After Hours Phone: (619)
 442-2560
 Provider Gender: Female
 License number: NP95014174
 NPI: 1598027450
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

RENZAS, JENNIFER
 Provider ID: 282097
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 165 S 1ST ST
 EL CAJON, CA 92019-4795
 Phone: (619) 312-0347
 Fax: (619) 749-5480
 After Hours Phone: (619)
 312-0347
 Provider Gender: Female
 License number: NP95016776
 NPI: 1225512759
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Health Excel Ipa Inc	<i>Phone:</i> (619) 383-6703 <i>Fax:</i> (619) 567-2455 <i>After Hours Phone:</i> (619) 383-6703 <i>Provider Gender:</i> Female <i>License number:</i> NP95000692 <i>NPI:</i> 1962725382 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 15/101 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Health Excel Ipa Inc	<i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medical Group(s):</i> Chase Avenue Family Health Ctrs Inc <i>IPA:</i> VILLANUEVA DE GUTIE, BERENICE <i>Provider ID:</i> 115614 <i>Board Certified Specialty:</i> No LA MAESTRA FAMILY CLINIC INC 165 S 1ST ST EL CAJON, CA 92019-4795 <i>Phone:</i> (619) 312-0347 <i>Fax:</i> <i>After Hours Phone:</i> (619) 312-0347 <i>Provider Gender:</i> Female <i>License number:</i> NP95002188 <i>NPI:</i> 1952795536 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> www.lamaestra.org <i>Email:</i> <i>Medical Group(s):</i> La Maestra Family Clinic Inc <i>IPA:</i> Health Excel Ipa Inc
RENZAS, JENNIFER <i>Provider ID:</i> 282098 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 1032 BROADWAY EL CAJON, CA 92021-7416 <i>Phone:</i> (619) 795-5991 <i>Fax:</i> (619) 795-5992 <i>After Hours Phone:</i> (619) 795-5991 <i>Provider Gender:</i> Female <i>License number:</i> NP95016776 <i>NPI:</i> 1225512759 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 18/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Health Excel Ipa Inc	SWAN, MELANIE A <i>Provider ID:</i> 89923 <i>Board Certified Specialty:</i> No CHASE AVENUE FAMILY HEALTH CTRS INC 1111 W CHASE AVE EL CAJON, CA 92020-5710 <i>Phone:</i> (619) 515-2499 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2499 <i>Provider Gender:</i> Female <i>License number:</i> NP95000818 <i>NPI:</i> 1871934414 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> ME	WILLIAMS, BREAUNA A <i>Provider ID:</i> 115128 <i>Board Certified Specialty:</i> No LA MAESTRA FAMILY CLINIC INC 165 S 1ST ST EL CAJON, CA 92019-4795
SIRLEAF, MASSANU A <i>Provider ID:</i> 275458 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 1351 BROADWAY EL CAJON, CA 92021-5811		

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D. Directorio de proveedores de atención especializada

Phone: (619) 312-0347
 Fax: 312-0347
 After Hours Phone: (619) 312-0347
 Provider Gender: Female
 License number: NP95001840
 NPI: 1063884864
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website: www.lamaestra.org
 Email:
 Medical Group(s): La Maestra Family Clinic Inc
 IPA:

DERMATOLOGY

BROGAN, JACQUELINE L , MD
 Provider ID: 265251
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 292 AVOCADO AVE
 EL CAJON, CA 92020-4604
 Phone: (619) 579-5115
 Fax: (619) 267-4385
 After Hours Phone: (619) 579-5115
 Provider Gender: Female
 License number: A160890
 NPI: 1801273479
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc
CELANO, NICHOLAS J
 Provider ID: 102191
 Board Certified Specialty: No
 WILLIAM F RESH MD SKIN AND SKIN CANCER MED GRP
 292 AVOCADO AVE
 EL CAJON, CA 92020-4604
 Phone: (619) 579-5115
 Fax: (619) 749-6174
 After Hours Phone: (619) 579-5115
 Provider Gender: Male
 License number: A120411
 NPI: 1457662264

Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

CELANO, NICHOLAS J

Provider ID: 102191
 Board Certified Specialty: No
 WILLIAM F RESH MD SKIN AND SKIN CANCER MED GRP
 292 AVOCADO AVE
 EL CAJON, CA 92020-4604
 Phone: (619) 579-5115
 Fax:
 After Hours Phone: (619) 579-5115
 Provider Gender: Male
 License number: A120411
 NPI: 1457662264
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 8:30AM-4:30PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

CELANO, NICHOLAS J
 Provider ID: 102191
 Board Certified Specialty: No
 WILLIAM F RESH MD SKIN AND SKIN CANCER MED GRP
 292 AVOCADO AVE
 EL CAJON, CA 92020-4604
 Phone: (619) 579-5115
 Fax: (619) 749-6174
 After Hours Phone: (619) 579-5115

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Male
License number: A120411
NPI: 1457662264
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18

American Sign Language (ASL): No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

CELANO, NICHOLAS J , MD

Provider ID: 269114
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 292 AVOCADO AVE
 EL CAJON, CA 92020-4604
Phone: (619) 579-5115
Fax: (619) 749-6174
After Hours Phone: (619) 579-5115

Provider Gender: Male
License number: A120411
NPI: 1457662264
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):

No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

CHIANG, JENNIFER Y

Provider ID: 107659
Board Certified Specialty: No
 WILLIAM F RESH MD SKIN AND SKIN CANCER MED GRP
 292 AVOCADO AVE
 EL CAJON, CA 92020-4604
Phone: (619) 579-5115
Fax: (619) 267-4835
After Hours Phone: (619) 579-5115

Provider Gender: Female
License number: A120528
NPI: 1457656738
Provider English Spoken: Yes
Provider Language(s) Spoken: Chinese, Mandarin, Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

CHIANG, JENNIFER Y

Provider ID: 107659
Board Certified Specialty: No
 WILLIAM F RESH MD SKIN AND SKIN CANCER MED GRP
 292 AVOCADO AVE
 EL CAJON, CA 92020-4604
Phone: (619) 579-5115
Fax: (619) 267-4835
After Hours Phone: (619) 579-5115

Provider Gender: Female
License number: A120528
NPI: 1457656738
Provider English Spoken: Yes
Provider Language(s) Spoken: Chinese, Mandarin, Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

CHIANG, JENNIFER Y

Provider ID: 107659
Board Certified Specialty: No
 WILLIAM F RESH MD SKIN AND SKIN CANCER MED GRP
 292 AVOCADO AVE
 EL CAJON, CA 92020-4604
Phone: (619) 579-5115
Fax: (619) 749-6174
After Hours Phone: (619) 579-5115
Provider Gender: Female
License number: A120528

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1457656738

Provider English Spoken: Yes

Provider Language(s) Spoken:
Chinese, Mandarin, Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-F 8:30AM-4:30PM, SA
9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

CHIANG, JENNIFER Y , MD

Provider ID: 269156

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
292 AVOCADO AVE
EL CAJON, CA 92020-4604

Phone: (619) 579-5115

Fax: (619) 267-4835

After Hours Phone: (619)
579-5115

Provider Gender: Female

License number: A120528

NPI: 1457656738

Provider English Spoken: Yes

Provider Language(s) Spoken:
Chinese, Mandarin, Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

CROWLEY, CHRISTOPHER S , MD

Provider ID: 269669

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
292 AVOCADO AVE
EL CAJON, CA 92020-4604

Phone: (619) 579-5115

Fax: (619) 749-6174

After Hours Phone: (619)
579-5115

Provider Gender: Male

License number: A134188

NPI: 1962836783

Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla
John Sally Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

KASSAB, GHADA K , MD

Provider ID: 129190

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
330 S MAGNOLIA AVE
EL CAJON, CA 92020-5290

Phone: (858) 273-2726

Fax: (858) 273-2725

After Hours Phone: (858)
273-2726

Provider Gender: Female

License number: A114457

NPI: 1023278504

Provider English Spoken: Yes

Provider Language(s) Spoken:
Arabic, Spanish

Cultural Competency: No

Hospital Affiliation: Sharp
Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

KASSAB, GHADA K

Provider ID: 245636

Board Certified Specialty: No
HEALTH EXCEL IPA INC
330 S MAGNOLIA AVE
EL CAJON, CA 92020-5290

Phone: (858) 273-2726

Fax: (858) 273-2725

After Hours Phone: (858)
273-2726

Provider Gender: Female

License number: A114457

NPI: 1023278504

Provider English Spoken: Yes

Provider Language(s) Spoken:
Arabic, Spanish

Cultural Competency: No

Hospital Affiliation: Sharp
Memorial Hospital

Medi-Cal Open Panel: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

RESH, WILLIAM F

Provider ID: 127511
Board Certified Specialty: No
HEALTH EXCEL IPA INC
292 AVOCADO AVE
EL CAJON, CA 92020-4604
Phone: (619) 579-5115
Fax: (619) 267-4835
After Hours Phone: (619)
579-5115
Provider Gender: Male
License number: C34661
NPI: 1154309862
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

RESH, WILLIAM F , MD
Provider ID: 269099
Board Certified Specialty: No

COMMUNITY CARE IPA LLC
292 AVOCADO AVE
EL CAJON, CA 92020-4604
Phone: (619) 579-5115
Fax: (619) 267-4835
After Hours Phone: (619)
579-5115
Provider Gender: Male
License number: C34661
NPI: 1154309862
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

RESH, WILLIAM F

Provider ID: 38883
Board Certified Specialty: No
WILLIAM F RESH MD SKIN
AND SKIN CANCER MED GRP
292 AVOCADO AVE
EL CAJON, CA 92020-4604
Phone: (619) 579-5115
Fax: (619) 267-4835
After Hours Phone: (619)
579-5115
Provider Gender: Male
License number: C34661
NPI: 1154309862
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

RESH, WILLIAM F

Provider ID: 38883
Board Certified Specialty: No
WILLIAM F RESH MD SKIN
AND SKIN CANCER MED GRP
292 AVOCADO AVE
EL CAJON, CA 92020-4604
Phone: (619) 579-5115
Fax: (619) 749-6174
After Hours Phone: (619)
579-5115
Provider Gender: Male
License number: C34661
NPI: 1154309862
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8:30AM-4:30PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Health Holdings Medical
Group-Sd

SATEESH, BROOKE R

Provider ID: 269153
Board Certified Specialty: No
HEALTH EXCEL IPA INC
292 AVOCADO AVE
EL CAJON, CA 92020-4604
Phone: (619) 579-5115
Fax: (619) 267-4835
After Hours Phone: (619)
579-5115
Provider Gender: Female
License number: A109670
NPI: 1164565339
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista, Paradise Valley
Hospital, Sharp Coronado Hosp
And Healthcare Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

SATEESH, BROOKE R , MD

Provider ID: 269154
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
292 AVOCADO AVE
EL CAJON, CA 92020-4604

Phone: (619) 579-5115
Fax: (619) 267-4835
After Hours Phone: (619)
579-5115
Provider Gender: Female
License number: A109670
NPI: 1164565339
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista, Paradise Valley
Hospital, Sharp Coronado Hosp
And Healthcare Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

SATEESH, BROOKE R

Provider ID: 83559
Board Certified Specialty: No
WILLIAM F RESH MD SKIN
AND SKIN CANCER MED GRP
292 AVOCADO AVE
EL CAJON, CA 92020-4604
Phone: (619) 579-5115
Fax: (619) 267-4835
After Hours Phone: (619)
579-5115
Provider Gender: Female
License number: A109670
NPI: 1164565339
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista, Paradise Valley
Hospital, Sharp Coronado Hosp
And Healthcare Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

SATEESH, BROOKE R

Provider ID: 83559
Board Certified Specialty: No
WILLIAM F RESH MD SKIN
AND SKIN CANCER MED GRP
292 AVOCADO AVE
EL CAJON, CA 92020-4604
Phone: (619) 579-5115
Fax: (619) 749-6174
After Hours Phone: (619)
579-5115
Provider Gender: Female
License number: A109670
NPI: 1164565339
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital Chula Vista, Paradise
Valley Hospital, Sharp Coronado
Hosp And Healthcare Ctr,
Scripps Mercy Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>No <i>Accessibility:</i> W <i>Hours:</i> M-F 8:30AM-4:30PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>	<p>UEBELHOER, NATHAN S <i>Provider ID:</i> 125012 <i>Board Certified Specialty:</i> No WILLIAM F RESH MD SKIN AND SKIN CANCER MED GRP 292 AVOCADO AVE EL CAJON, CA 92020-4604 <i>Phone:</i> (619) 579-5115 <i>Fax:</i> (619) 749-6174 <i>After Hours Phone:</i> (619) 579-5115 <i>Provider Gender:</i> Male <i>License number:</i> 20A9328 <i>NPI:</i> 1659344513 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Naval Medical Ctr Sd Rbe <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No</p>	<p><i>Phone:</i> (619) 515-2498 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2498 <i>Provider Gender:</i> Male <i>License number:</i> 20A15471 <i>NPI:</i> 1649699968 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-F 8:30AM-5:30PM, SA 9AM-5PM <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medical Group(s):</i> Family Hlth Ctr San Diego-El Cajon IPA:</p>
<p>UEBELHOER, NATHAN S <i>Provider ID:</i> 125012 <i>Board Certified Specialty:</i> No WILLIAM F RESH MD SKIN AND SKIN CANCER MED GRP 292 AVOCADO AVE EL CAJON, CA 92020-4604 <i>Phone:</i> (619) 579-5115 <i>Fax:</i> <i>After Hours Phone:</i> (619) 579-5115 <i>Provider Gender:</i> Male <i>License number:</i> 20A9328 <i>NPI:</i> 1659344513 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Naval Medical Ctr Sd Rbe <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No</p>	<p><i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>	<p>AL ANI, NAJWAN N <i>Provider ID:</i> 122626 <i>Board Certified Specialty:</i> No FAMILY HLTH CTR SAN DIEGO-EL CAJON 525 E MAIN ST EL CAJON, CA 92020-4007 <i>Phone:</i> (619) 515-2498 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2498 <i>Provider Gender:</i> Female <i>License number:</i> A144974 <i>NPI:</i> 1275948473 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes</p>
<hr/> <p>FAMILY PRACTICE</p> <hr/>		
<p><i>Accessibility:</i> W <i>Hours:</i> M-F 8:30AM-4:30PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>	<p>ABDALLAH, ALI H <i>Provider ID:</i> 120060 <i>Board Certified Specialty:</i> No FAMILY HLTH CTR SAN DIEGO-EL CAJON 525 E MAIN ST EL CAJON, CA 92020-4007</p>	

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D. Directorio de proveedores de atención especializada

Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Family Hlth Ctr San Diego-El Cajon
IPA:

BROWN, BRANDON S

Provider ID: 127590
Board Certified Specialty: No
FAMILY HLTH CTR SAN DIEGO-EL CAJON
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619) 515-2498
Provider Gender: Male
License number: A148499
NPI: 1013399559
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Family Hlth Ctr San Diego-El Cajon
IPA:

CORMAN, DANIEL M

Provider ID: 128275
Board Certified Specialty: No
FAMILY HLTH CTR SAN DIEGO-EL CAJON
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:

After Hours Phone: (619) 515-2498
Provider Gender: Male
License number: 20A13060
NPI: 1629339593
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Family Hlth Ctr San Diego-El Cajon
IPA:

GORDON, CHRISTOPHER J

Provider ID: 110772
Board Certified Specialty: No
FAMILY HLTH CTR SAN DIEGO-EL CAJON
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619) 515-2498
Provider Gender: Male
License number: A83390
NPI: 1477711521

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Family Hlth Ctr San Diego-El Cajon
IPA:

HASTANAN, CAROL L

Provider ID: 98429
Board Certified Specialty: No
CHASE AVENUE FAMILY HEALTH CTRS INC
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax:
After Hours Phone: (619) 515-2499
Provider Gender: Female
License number: A110192
NPI: 1861648461
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Chase Avenue Family Health Ctrs Inc

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D. Directorio de proveedores de atención especializada

LIN, SHUANG
Provider ID: 122471
Board Certified Specialty: No
CHASE AVENUE FAMILY
HEALTH CTRS INC
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax:
After Hours Phone: (619)
515-2499
Provider Gender: Female
License number: A138887
NPI: 1689093684
Provider English Spoken: Yes
Provider Language(s) Spoken:
Mandarin
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Chase Avenue
Family Health Ctrs Inc
IPA:

NIAZI, HARRIS O
Provider ID: 122797
Board Certified Specialty: No
FAMILY HLTH CTR SAN
DIEGO-EL CAJON
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619)
515-2498
Provider Gender: Male

License number: A146111
NPI: 1174905871
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Family Hlth Ctr
San Diego-El Cajon
IPA:

SHAFT, ALEXANDER D
Provider ID: 285501
Board Certified Specialty: No
HEALTH EXCEL IPA INC
463 N MAGNOLIA AVE
EL CAJON, CA 92020-3606
Phone: (619) 522-0399
Fax: (619) 749-3295
After Hours Phone: (619)
522-0399
Provider Gender: Male
License number: A153556
NPI: 1063876688
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 17/100
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Health Excel Ipa Inc
THIERMANN, PAIGE A
Provider ID: 62295
Board Certified Specialty: No
NEIGHBORHOOD
HEALTHCARE EL CAJON
855 E MADISON AVE
EL CAJON, CA 92020-3819
Phone: (619) 440-2751
Fax:
After Hours Phone: (619)
440-2751
Provider Gender: Female
License number: A114779
NPI: 1134411432
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Kurdish, Spanish, Syriac
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website: www.ihpsocal.org
Email:
Medical Group(s): Neighborhood
Healthcare El Cajon
IPA:

GASTROENTEROLOGY

CUBAS, IVAN P
Provider ID: 120211
Board Certified Specialty: No
DIGESTIVE DISEASE ASSOCS
INC
2732 NAVAJO RD STE 201
EL CAJON, CA 92020-2149

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>Phone: (619) 266-3332 Fax: After Hours Phone: (619) 266-3332 Provider Gender: Male License number: C55825 NPI: 1447464912 Provider English Spoken: Yes Provider Language(s) Spoken: Portuguese, Spanish Cultural Competency: No Hospital Affiliation: Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Sharp Chula Vista Med Ctr Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-F 9AM-5PM, SA 9AM-5PM Website: www.3dcinc.com Email: Medical Group(s): IPA: Imperial Health Holdings Medical Group-Sd</p> <p>CUBAS, IVAN P Provider ID: 120211 Board Certified Specialty: No DIGESTIVE DISEASE ASSOCS INC 2732 NAVAJO RD STE 201 EL CAJON, CA 92020-2149 Phone: (619) 266-3332 Fax: (619) 266-6000 After Hours Phone: (619) 266-3332 Provider Gender: Male License number: C55825 NPI: 1447464912 Provider English Spoken: Yes Provider Language(s) Spoken:</p>	<p>Portuguese, Spanish Cultural Competency: No Hospital Affiliation: Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Sharp Chula Vista Med Ctr Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Imperial Health Holdings Medical Group-Sd</p> <p>DESTA, TADDESE T Provider ID: 262287 Board Certified Specialty: No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 2732 NAVAJO RD STE 201 EL CAJON, CA 92020-2149 Phone: (619) 266-3332 Fax: (619) 266-6000 After Hours Phone: (619) 266-3332 Provider Gender: Male License number: A49164 NPI: 1346326246 Provider English Spoken: Yes Provider Language(s) Spoken: Amharic, Arabic, Spanish Cultural Competency: No Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Paradise Valley Hospital, Scripps Mercy Hospital Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL):</p>	<p>No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Imperial Health Holdings Medical Group-Sd</p> <p>GISH, ROBERT G Provider ID: 279967 Board Certified Specialty: No HEALTH EXCEL IPA INC 1032 BROADWAY EL CAJON, CA 92021-7416 Phone: (619) 795-5991 Fax: (619) 795-5992 After Hours Phone: (619) 795-5991 Provider Gender: Male License number: G45632 NPI: 1548281322 Provider English Spoken: Yes Provider Language(s) Spoken: Dutch, French, Spanish, Vietnamese Cultural Competency: No Hospital Affiliation: Providence Santa Rosa Memorial Hospital, California Pacific Med Ctr Ca Campus Hosp, Ucsd Medical Ctr, Stanford Health Care, California Pacific Med Ctr, Selma Community Hospital, Adventist Medical Center, Adventist Med Ctr Reedley, Loma Linda University Comm Med Ctr, Regional Medical Ctr Of San Jose Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM</p>
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D. Directorio de proveedores de atención especializada

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

GISH, ROBERT G

Provider ID: 279968

Board Certified Specialty: No
HEALTH EXCEL IPA INC

165 S 1ST ST

EL CAJON, CA 92019-4795

Phone: (619) 312-0347

Fax: (619) 749-5480

After Hours Phone: (619)

312-0347

Provider Gender: Male

License number: G45632

NPI: 1548281322

Provider English Spoken: Yes

Provider Language(s) Spoken:

Dutch, French, Spanish,

Vietnamese

Cultural Competency: No

Hospital Affiliation: Providence

Santa Rosa Memorial Hospital,

California Pacific Med Ctr Ca

Campus Hosp, Ucsd Medical Ctr,

Stanford Health Care, California

Pacific Med Ctr, Selma

Community Hospital, Adventist

Medical Center, Adventist Med

Ctr Reedley, Loma Linda

University Comm Med Ctr,

Regional Medical Ctr Of San

Jose

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

HASSANEIN, TAREK I , MD

Provider ID: 269556

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

463 N MAGNOLIA AVE

EL CAJON, CA 92020-3606

Phone: (619) 522-0399

Fax:

After Hours Phone: (619)

522-0399

Provider Gender: Male

License number: A54452

NPI: 1801854450

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, French, German,

Spanish, Urdu

Cultural Competency: No

Hospital Affiliation: Parkview

Community Hospital Medical

Center, Sharp Coronado Hosp

And Healthcare Ctr, Sharp Chula

Vista Med Ctr, Saddleback

Memorial Med Ctr, Scripps Mercy

Hospital Chula Vista, Riverside

Community Hosp, Childrens

Hospital At Mission, Grossmont

Hospital, Hoag Hospital Irvine,

Doctors Hosp Of West Covina

Inc

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc

HASSANEIN, TAREK I

Provider ID: 276938

Board Certified Specialty: No

HEALTH EXCEL IPA INC

463 N MAGNOLIA AVE

EL CAJON, CA 92020-3606

Phone: (619) 522-0399

Fax:

After Hours Phone: (619)

522-0399

Provider Gender: Male

License number: A54452

NPI: 1801854450

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, French, German,

Spanish, Urdu

Cultural Competency: No

Hospital Affiliation: Parkview

Community Hospital Medical

Center, Sharp Coronado Hosp

And Healthcare Ctr, Sharp Chula

Vista Med Ctr, Saddleback

Memorial Med Ctr, Scripps Mercy

Hospital Chula Vista, Riverside

Community Hosp, Childrens

Hospital At Mission, Grossmont

Hospital, Hoag Hospital Irvine,

Doctors Hosp Of West Covina

Inc

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc

IMPERIAL, JOANNE C , MD

Provider ID: 268979

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

465 N MAGNOLIA AVE

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

EL CAJON, CA 92020-3606
Phone: (619) 359-8380
Fax: (619) 359-8360
After Hours Phone: (619) 359-8380
Provider Gender: Female
License number: G44420
NPI: 1225101884
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish
Cultural Competency: No
Hospital Affiliation: Lucile Salter Packard Childrens Hosp
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SCHAEFFER, CYNTHIA L
Provider ID: 120290
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 2732 NAVAJO RD STE 201
 EL CAJON, CA 92020-2149
Phone: (619) 266-3332
Fax: (619) 266-6000
After Hours Phone: (619) 266-3332
Provider Gender: Female
License number: A91771
NPI: 1740352293
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital, Scripps Mercy

Hospital Chula Vista, Scripps Memorial Hospital, Scripps Mercy Hospital, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings Medical Group-Sd

HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE M , MD
Provider ID: 268692
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 1767 E MAIN ST
 EL CAJON, CA 92021-5219
Phone: (619) 440-6516
Fax: (619) 440-6547
After Hours Phone: (619) 440-6516
Provider Gender: Female
License number: HA7100
NPI: 1063558856
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Community Care Ipa Llc, Health Excel Ipa Inc

DANDURAND, JOHN M
Provider ID: 252964
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 1767 E MAIN ST
 EL CAJON, CA 92021-5219
Phone: (619) 440-6516
Fax: (619) 440-6547
After Hours Phone: (619) 440-6516
Provider Gender: Male
License number: HA2056
NPI: 1497901680
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

DANDURAND, JOHN M , MD
Provider ID: 269780
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 1767 E MAIN ST
 EL CAJON, CA 92021-5219
Phone: (619) 440-6516
Fax: (619) 440-6547
After Hours Phone: (619) 440-6516
Provider Gender: Male
License number: HA2056
NPI: 1497901680

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D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

DAVIS, KELLE L

Provider ID: 253148
Board Certified Specialty: No
HEALTH EXCEL IPA INC
1767 E MAIN ST
EL CAJON, CA 92021-5219
Phone: (619) 440-6516
Fax: (619) 440-6547
After Hours Phone: (619)
440-6516
Provider Gender: Female
License number: HA6083
NPI: 1902853344
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

DAVIS, KELLE L , MD
Provider ID: 268650
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1767 E MAIN ST
EL CAJON, CA 92021-5219
Phone: (619) 440-6516
Fax: (619) 440-6547
After Hours Phone: (619)
440-6516
Provider Gender: Female
License number: HA6083
NPI: 1902853344
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

INTERNAL MEDICINE

DUONG, MAI T
Provider ID: 114973
Board Certified Specialty: No
FAMILY HLTH CTR SAN
DIEGO-EL CAJON
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619)
515-2498
Provider Gender: Female
License number: A127798

NPI: 1629339304
Provider English Spoken: Yes
Provider Language(s) Spoken:
Vietnamese
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Family Hlth Ctr
San Diego-El Cajon
IPA:

GORGES, RANDA A

Provider ID: 122495
Board Certified Specialty: No
FAMILY HLTH CTR SAN
DIEGO-EL CAJON
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619)
515-2498
Provider Gender: Female
License number: A138815
NPI: 1285079509
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

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D. Directorio de proveedores de atención especializada

Website: www.fhcsd.org

Email:

Medical Group(s): Family Hlth Ctr
San Diego-El Cajon

IPA:

OLIVER, DEANNA L

Provider ID: 277054

Board Certified Specialty: No
HEALTH EXCEL IPA INC

463 N MAGNOLIA AVE
EL CAJON, CA 92020-3606

Phone: (619) 900-6958

Fax: (619) 522-0390

After Hours Phone: (619)

900-6958

Provider Gender: Female

License number: A139921

NPI: 1750725362

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Chula
Vista Med Ctr, Sharp Coronado
Hosp And Healthcare Ctr, Chula
Vista Comm Hosp

Medi-Cal Open Panel: Yes

Min/Max Age: 17/100

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

PARIKH, MILIND D

Provider ID: 252860

Board Certified Specialty: No
HEALTH EXCEL IPA INC

1625 E MAIN ST STE 201
EL CAJON, CA 92021-5244

Phone: (619) 486-6512

Fax: (619) 486-6470

After Hours Phone: (619)
486-6512

Provider Gender: Male

License number: 20A13745

NPI: 1194161406

Provider English Spoken: Yes

Provider Language(s) Spoken:
Gujarati, Hindi, Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Chula
Vista Med Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 16/99

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

SIHOTA, GURPREET

Provider ID: 121259

Board Certified Specialty: No
CHASE AVENUE FAMILY
HEALTH CTRS INC

1111 W CHASE AVE
EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax:

After Hours Phone: (619)

515-2499

Provider Gender: Female

License number: 20A13700

NPI: 1659715852

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Chase Avenue
Family Health Ctrs Inc

IPA:

INTERVENTIONAL CARDIOLOGY

OMRAN, JAD

Provider ID: 241942

Board Certified Specialty: No
HEALTH EXCEL IPA INC

300 S PIERCE ST # 102
EL CAJON, CA 92020-4124

Phone: (619) 668-4700

Fax: (619) 668-0049

After Hours Phone: (619)
668-4700

Provider Gender: Male

License number: A144651

NPI: 1366720211

Provider English Spoken: Yes

Provider Language(s) Spoken:
Arabic

Cultural Competency: No

Hospital Affiliation: Sharp
Memorial Hospital, Grossmont
Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

MATERNAL AND FETAL

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

MEDICINE	Phone: (619) 795-5991 Fax: (619) 795-5992	Provider English Spoken: Yes Provider Language(s) Spoken:
<p>FAKSH, ARIJ Provider ID: 278441 Board Certified Specialty: No HEALTH EXCEL IPA INC 165 S 1ST ST EL CAJON, CA 92019-4795 Phone: (619) 312-0347 Fax: (619) 749-5480 After Hours Phone: (619) 312-0347 Provider Gender: Female License number: 20A14222 NPI: 1912166737 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Sharp Memorial Hospital, Tri City Medical Ctr, Scripps Mercy Hospital, Scripps Green Hospital, Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista Medi-Cal Open Panel: Yes Min/Max Age: 12/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Health Excel Ipa Inc</p>	<p>After Hours Phone: (619) 795-5991 Provider Gender: Female License number: 20A14222 NPI: 1912166737 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Sharp Memorial Hospital, Tri City Medical Ctr, Scripps Mercy Hospital, Scripps Green Hospital, Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista Medi-Cal Open Panel: Yes Min/Max Age: 12/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Health Excel Ipa Inc</p>	<p>Spanish Cultural Competency: No Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM Website: www.fhcsd.org Email: Medical Group(s): Family Hlth Ctr San Diego-El Cajon IPA:</p>
<p>FAKSH, ARIJ Provider ID: 278442 Board Certified Specialty: No HEALTH EXCEL IPA INC 1032 BROADWAY EL CAJON, CA 92021-7416</p>	<p>OBSTETRICS / GYNECOLOGY</p> <p>ALIMONOS, LYSISTRATI A Provider ID: 114824 Board Certified Specialty: No FAMILY HLTH CTR SAN DIEGO-EL CAJON 525 E MAIN ST EL CAJON, CA 92020-4007 Phone: (619) 515-2498 Fax: After Hours Phone: (619) 515-2498 Provider Gender: Female License number: 20A14919 NPI: 1619397031</p>	<p>BUECHNER, CHARLENE A Provider ID: 127433 Board Certified Specialty: No FAMILY HLTH CTR SAN DIEGO-EL CAJON 525 E MAIN ST EL CAJON, CA 92020-4007 Phone: (619) 515-2498 Fax: After Hours Phone: (619) 515-2498 Provider Gender: Female License number: A68463 NPI: 1376663831 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Sharp Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Sharp Mary Birch Hosp For Women And Newborns Medi-Cal Open Panel: Yes Min/Max Age: None</p>

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D. Directorio de proveedores de atención especializada

<p><i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-F 8:30AM-5:30PM, SA 9AM-5PM <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medical Group(s):</i> Family Hlth Ctr San Diego-El Cajon <i>IPA:</i></p> <p>BUKOWSKI, KYLE C <i>Provider ID:</i> 269037 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 1685 E MAIN ST STE 301 EL CAJON, CA 92021-5292 <i>Phone:</i> (310) 825-9945 <i>Fax:</i> <i>After Hours Phone:</i> (310) 825-9945 <i>Provider Gender:</i> Male <i>License number:</i> A133994 <i>NPI:</i> 1912249004 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ronald Reagan UCLA Med Ctr, Santa Monica UCLA Med Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 16/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc</p> <p>CARTER, KHALIL J <i>Provider ID:</i> 127377 <i>Board Certified Specialty:</i> No FAMILY HLTH CTR SAN</p>	<p>DIEGO-EL CAJON 525 E MAIN ST EL CAJON, CA 92020-4007 <i>Phone:</i> (619) 515-2498 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2498 <i>Provider Gender:</i> Male <i>License number:</i> A113001 <i>NPI:</i> 1225231582 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-F 8:30AM-5:30PM, SA 9AM-5PM <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medical Group(s):</i> Family Hlth Ctr San Diego-El Cajon <i>IPA:</i></p> <p>CERVANTES, SANDRA M <i>Provider ID:</i> 114871 <i>Board Certified Specialty:</i> No FAMILY HLTH CTR SAN DIEGO-EL CAJON 525 E MAIN ST EL CAJON, CA 92020-4007 <i>Phone:</i> (619) 515-2498 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2498 <i>Provider Gender:</i> Female <i>License number:</i> A118095 <i>NPI:</i> 1073701041 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i></p>	<p>Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-F 8:30AM-5:30PM, SA 9AM-5PM <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medical Group(s):</i> Family Hlth Ctr San Diego-El Cajon <i>IPA:</i></p> <p>FOLCH TORRES-AGUIAR, BEATRIZ M <i>Provider ID:</i> 120511 <i>Board Certified Specialty:</i> No FAMILY HLTH CTR SAN DIEGO-EL CAJON 525 E MAIN ST EL CAJON, CA 92020-4007 <i>Phone:</i> (619) 515-2498 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2498 <i>Provider Gender:</i> Female <i>License number:</i> A148014 <i>NPI:</i> 1457794752 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Yue Chinese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Grossmont Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> </p>
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D. Directorio de proveedores de atención especializada

Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Family Hlth Ctr

San Diego-El Cajon

IPA:

KHAN, ALIYA I

Provider ID: 109641

Board Certified Specialty: No
LA MAESTRA CHC EL CAJON
BROADWAY

1032 BROADWAY

EL CAJON, CA 92021-7416

Phone: (619) 795-5991

Fax:

After Hours Phone: (619)

795-5991

Provider Gender: Female

License number: G50634

NPI: 1285687350

Provider English Spoken: Yes

Provider Language(s) Spoken:

Hindi, Urdu

Cultural Competency: No

Hospital Affiliation: Grossmont
Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

Website: www.lamaestra.org

Email:

Medical Group(s): La Maestra

Chc El Cajon Broadway

IPA:

LIPSCHITZ, LISA S

Provider ID: 115429

Board Certified Specialty: No
FAMILY HLTH CTR SAN

DIEGO-EL CAJON

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2498

Fax:

After Hours Phone: (619)

515-2498

Provider Gender: Female

License number: A72005

NPI: 1649208711

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital, Grossmont Hospital,

Sharp Coronado Hosp And

Healthcare Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Family Hlth Ctr

San Diego-El Cajon

IPA:

LOEFFLER, ALLISON M

Provider ID: 115562

Board Certified Specialty: No
FAMILY HLTH CTR SAN
DIEGO-EL CAJON

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2498

Fax:

After Hours Phone: (619)

515-2498

Provider Gender: Female

License number: A116680

NPI: 1700073962

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital, Scripps Mercy Hospital,

Scripps Mercy Hospital Chula

Vista

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Family Hlth Ctr

San Diego-El Cajon

IPA:

MELLENDEZ BERRIOS, IARA DEL M

Provider ID: 115040

Board Certified Specialty: No
FAMILY HLTH CTR SAN
DIEGO-EL CAJON

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2498

Fax:

After Hours Phone: (619)

515-2498

Provider Gender: Female

License number: A114181

NPI: 1740514249

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital, Scripps Mercy Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

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D. Directorio de proveedores de atención especializada

<p>No ☯ <i>Accessibility:</i> <i>Hours:</i> M-F 8:30AM-5:30PM, SA 9AM-5PM <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medical Group(s):</i> Family Hlth Ctr San Diego-El Cajon <i>IPA:</i></p>	<p><i>Provider ID:</i> 47832 <i>Board Certified Specialty:</i> No PLANNED PARENTHOOD OF THE PACIFIC SOUTHWEST 165 S 1ST ST EL CAJON, CA 92019-4795 <i>Phone:</i> (619) 779-7900 <i>Fax:</i> (619) 749-5480 <i>After Hours Phone:</i> (619) 779-7900 <i>Provider Gender:</i> Male <i>License number:</i> C38171 <i>NPI:</i> 1710089941 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> French, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Memorial Hospital, Scripps Mercy Hospital, Sharp Mary Birch Hosp For Women And Newborns <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc</p>	<p><i>Provider Gender:</i> Male <i>License number:</i> A154298 <i>NPI:</i> 1710316450 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> <i>Hours:</i> M-F 8:30AM-5:30PM, SA 9AM-5PM <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medical Group(s):</i> Family Hlth Ctr San Diego-El Cajon <i>IPA:</i></p>
<p>PRIVER, DAVID M <i>Provider ID:</i> 47832 <i>Board Certified Specialty:</i> No SAN DIEGO AMERICAN INDIAN HEALTH CENTER 165 S 1ST ST EL CAJON, CA 92019-4795 <i>Phone:</i> (619) 779-7900 <i>Fax:</i> (619) 749-5480 <i>After Hours Phone:</i> (619) 779-7900 <i>Provider Gender:</i> Male <i>License number:</i> C38171 <i>NPI:</i> 1710089941 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> French, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Memorial Hospital, Scripps Mercy Hospital, Sharp Mary Birch Hosp For Women And Newborns <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc</p>	<p>RODRIGUEZ JEREZ, ROBERTO D <i>Provider ID:</i> 130083 <i>Board Certified Specialty:</i> No FAMILY HLTH CTR SAN DIEGO-EL CAJON 525 E MAIN ST EL CAJON, CA 92020-4007 <i>Phone:</i> (619) 515-2498 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2498</p>	<p>TAJРАН, DEENA S <i>Provider ID:</i> 204960 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 291 E LEXINGTON AVE # AC EL CAJON, CA 92020-4536 <i>Phone:</i> (858) 578-9600 <i>Fax:</i> (858) 578-9065 <i>After Hours Phone:</i> (858) 578-9600 <i>Provider Gender:</i> Female <i>License number:</i> A55154 <i>NPI:</i> 1891757217 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital, Sharp Memorial Hospital, Sharp Mary Birch Hosp For Women And</p>
<p>PRIVER, DAVID M</p>		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>Newborns <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 16/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Health Excel Ipa Inc</p>	<p>San Diego-El Cajon <i>IPA:</i> ZIEG, ALAN J <i>Provider ID:</i> 114825 <i>Board Certified Specialty:</i> No FAMILY HLTH CTR SAN DIEGO-EL CAJON 525 E MAIN ST EL CAJON, CA 92020-4007 <i>Phone:</i> (619) 515-2498 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2498 <i>Provider Gender:</i> Male <i>License number:</i> G78814 <i>NPI:</i> 1699790634 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital Chula Vista <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-F 8:30AM-5:30PM, SA 9AM-5PM <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medical Group(s):</i> Family Hlth Ctr San Diego-El Cajon <i>IPA:</i> Health Excel Ipa Inc</p>	<p>525 E MAIN ST EL CAJON, CA 92020-4007 <i>Phone:</i> (619) 515-2498 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2498 <i>Provider Gender:</i> Male <i>License number:</i> A107093 <i>NPI:</i> 1588825129 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital, Sharp Memorial Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-F 8:30AM-5:30PM, SA 9AM-5PM <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medical Group(s):</i> Family Hlth Ctr San Diego-El Cajon <i>IPA:</i> Health Excel Ipa Inc</p>
<p>WINESBURG, JENNIFER J <i>Provider ID:</i> 114806 <i>Board Certified Specialty:</i> No FAMILY HLTH CTR SAN DIEGO-EL CAJON 525 E MAIN ST EL CAJON, CA 92020-4007 <i>Phone:</i> (619) 515-2498 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2498 <i>Provider Gender:</i> Female <i>License number:</i> 20A11535 <i>NPI:</i> 1811162456 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital, Desert Regional Med Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-F 8:30AM-5:30PM, SA 9AM-5PM <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medical Group(s):</i> Family Hlth Ctr</p>	<p>BINDER, NICHOLAS R , MD <i>Provider ID:</i> 268752 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 450 FLETCHER PKWY STE 112 EL CAJON, CA 92020-2520 <i>Phone:</i> (619) 440-5400 <i>Fax:</i> <i>After Hours Phone:</i> (619) 440-5400 <i>Provider Gender:</i> Male <i>License number:</i> A124698 <i>NPI:</i> 1306076716 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No</p>	
OPHTHALMOLOGY		
<p>ALBORZIAN, SHERVIN <i>Provider ID:</i> 114628 <i>Board Certified Specialty:</i> No FAMILY HLTH CTR SAN DIEGO-EL CAJON</p>		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Scripps Memorial Hospital, Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

BINDER, NICHOLAS R

Provider ID: 285923

Board Certified Specialty: No

HEALTH EXCEL IPA INC
450 FLETCHER PKWY STE 112
EL CAJON, CA 92020-2520

Phone: (619) 440-5400

Fax:

After Hours Phone: (619) 440-5400

Provider Gender: Male

License number: A124698

NPI: 1306076716

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps Memorial Hospital, Grossmont Hospital

Medi-Cal Open Panel: No

Min/Max Age: 5/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

BOECKMANN, JESSICA M

Provider ID: 214427

Board Certified Specialty: No

HEALTH EXCEL IPA INC
450 FLETCHER PKWY
EL CAJON, CA 92020-2595

Phone: (619) 440-5400

Fax: (619) 440-0239

After Hours Phone: (619) 440-5400

Provider Gender: Female

License number: A124361

NPI: 1629210679

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, Armenian, Cantonese, French, Mandarin, Spanish, Tagalog, Vietnamese

Cultural Competency: No

Hospital Affiliation: Anaheim Regional Medical Ctr, St Mary Medical Center Long Beach

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

HSU, CHRISTOPHER H

Provider ID: 279228

Board Certified Specialty: No

HEALTH EXCEL IPA INC
225 W MADISON AVE STE 1
EL CAJON, CA 92020-3454

Phone: (800) 898-2020

Fax: (844) 897-3788

After Hours Phone: (800) 898-2020

Provider Gender: Male

License number: A65973

NPI: 1336167618

Provider English Spoken: Yes

Provider Language(s) Spoken:

Chinese, Mandarin, Spanish, Taiwanese

Cultural Competency: No

Hospital Affiliation: Sharp Memorial Hospital, Alvarado Hospital Llc, Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 6/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

LEARN, RICHARD N

Provider ID: 279243

Board Certified Specialty: Yes

HEALTH EXCEL IPA INC
225 W MADISON AVE STE 1
EL CAJON, CA 92020-3454

Phone: (800) 898-2020

Fax: (844) 897-3788

After Hours Phone: (800) 898-2020

Provider Gender: Male

License number: A19818

NPI: 1801804653

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Grossmont Hospital

Medi-Cal Open Panel: Yes

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: 6/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

MCGRAW, JOSEPH P , MD

Provider ID: 269703

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

450 FLETCHER PKWY STE 112

EL CAJON, CA 92020-2520

Phone: (800) 898-2020

Fax: (844) 897-3788

After Hours Phone: (800)

898-2020

Provider Gender: Male

License number: A155228

NPI: 1588624852

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc

MILLER, DOUGLAS G

Provider ID: 244937

Board Certified Specialty: No

HEALTH EXCEL IPA INC

450 FLETCHER PKWY STE 112

EL CAJON, CA 92020-2520

Phone: (800) 898-2020

Fax: (844) 897-3788

After Hours Phone: (800)

898-2020

Provider Gender: Male

License number: G52627

NPI: 1982636031

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Tagalog, Vietnamese

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc, Imperial

Health Holdings Medical

Group-Sd

MILLER, DOUGLAS G

Provider ID: 262441

Board Certified Specialty: No

IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD

450 FLETCHER PKWY STE 112

EL CAJON, CA 92020-2520

Phone: (800) 898-2020

Fax: (844) 897-3788

After Hours Phone: (800)

898-2020

Provider Gender: Male

License number: G52627

NPI: 1982636031

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Tagalog, Vietnamese

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc, Imperial

Health Holdings Medical

Group-Sd

MILLER, DOUGLAS G , MD

Provider ID: 68144

Board Certified Specialty: No

WEST COAST EYE CARE

ASSOCS MED GRP

450 FLETCHER PKWY STE 112

EL CAJON, CA 92020-2520

Phone: (800) 898-2020

Fax: (844) 897-3788

After Hours Phone: (800)

898-2020

Provider Gender: Male

License number: G52627

NPI: 1982636031

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Tagalog, Vietnamese

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc, Imperial

Health Holdings Medical

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D. Directorio de proveedores de atención especializada

Group-Sd

MORRISON-REYES, JOSHUA

A

Provider ID: 107940

Board Certified Specialty: No

WEST COAST EYE CARE

ASSOCS MED GRP

450 FLETCHER PKWY STE 112

EL CAJON, CA 92020-2520

Phone: (619) 440-5400

Fax: (619) 697-2410

After Hours Phone: (619)

440-5400

Provider Gender: Male

License number: A125435

NPI: 1235366782

Provider English Spoken: Yes

Provider Language(s) Spoken:

Armenian, Cantonese, Chinese,

Indonesian, Mandarin, Spanish,

Tagalog, Vietnamese

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital, Scripps Memorial

Hospital, Sharp Memorial

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♻️ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc, Imperial

Health Holdings Medical

Group-Sd

PATEL, GITANE

Provider ID: 244862

Board Certified Specialty: No

HEALTH EXCEL IPA INC

450 FLETCHER PKWY STE 112

EL CAJON, CA 92020-2520

Phone: (800) 898-2020

Fax: (844) 897-3788

After Hours Phone: (800)

898-2020

Provider Gender: Male

License number: A108603

NPI: 1710171434

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, Gujarati, Spanish,

Tagalog, Vietnamese

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital, Paradise Valley

Hospital, Scripps Memorial

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♻️ *Accessibility:* P, EB, IB, E, R, T

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc, Imperial

Health Holdings Medical

Group-Sd

PATEL, GITANE

Provider ID: 262318

Board Certified Specialty: No

IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD

450 FLETCHER PKWY STE 112

EL CAJON, CA 92020-2520

Phone: (800) 898-2020

Fax: (844) 897-3788

After Hours Phone: (800)

898-2020

Provider Gender: Male

License number: A108603

NPI: 1710171434

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, Gujarati, Spanish,

Tagalog, Vietnamese

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital, Paradise Valley

Hospital, Scripps Memorial

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♻️ *Accessibility:* P, EB, IB, E, R, T

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc, Imperial

Health Holdings Medical

Group-Sd

PATEL, GITANE, MD

Provider ID: 268740

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

450 FLETCHER PKWY STE 112

EL CAJON, CA 92020-2520

Phone: (800) 898-2020

Fax: (844) 897-3788

After Hours Phone: (800)

898-2020

Provider Gender: Male

License number: A108603

NPI: 1710171434

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, Gujarati, Spanish,

Tagalog, Vietnamese

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital, Paradise Valley

Hospital, Scripps Memorial

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> P, EB, IB, E, R, T <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>	<p><i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p> <p>PATEL, SARJAN H <i>Provider ID:</i> 262403 <i>Board Certified Specialty:</i> No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 450 FLETCHER PKWY STE 112 EL CAJON, CA 92020-2520 <i>Phone:</i> (800) 898-2020 <i>Fax:</i> (844) 897-3788 <i>After Hours Phone:</i> (800) 898-2020 <i>Provider Gender:</i> Male <i>License number:</i> A114976 <i>NPI:</i> 1316199326 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Gujarati, Hindi, Spanish, Tagalog, Vietnamese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Alvarado Hospital Llc, Grossmont Hospital, Scripps Memorial Hospital, Paradise Valley Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> P, EB, IB, E, R, T <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>	<p><i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 450 FLETCHER PKWY STE 112 EL CAJON, CA 92020-2520 <i>Phone:</i> (800) 898-2020 <i>Fax:</i> (844) 897-3788 <i>After Hours Phone:</i> (800) 898-2020 <i>Provider Gender:</i> Male <i>License number:</i> A114976 <i>NPI:</i> 1316199326 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Gujarati, Hindi, Spanish, Tagalog, Vietnamese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Alvarado Hospital Llc, Grossmont Hospital, Scripps Memorial Hospital, Paradise Valley Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> P, EB, IB, E, R, T <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>
<p>PATEL, SARJAN H <i>Provider ID:</i> 244916 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 450 FLETCHER PKWY STE 112 EL CAJON, CA 92020-2520 <i>Phone:</i> (800) 898-2020 <i>Fax:</i> (844) 897-3788 <i>After Hours Phone:</i> (800) 898-2020 <i>Provider Gender:</i> Male <i>License number:</i> A114976 <i>NPI:</i> 1316199326 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Gujarati, Hindi, Spanish, Tagalog, Vietnamese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Alvarado Hospital Llc, Grossmont Hospital, Scripps Memorial Hospital, Paradise Valley Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> P, EB, IB, E, R, T <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i></p>	<p>PATEL, SARJAN H , MD <i>Provider ID:</i> 268799</p>	<p>PRABHU, SUJATA P <i>Provider ID:</i> 244911 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 450 FLETCHER PKWY STE 112 EL CAJON, CA 92020-2520 <i>Phone:</i> (800) 898-2020 <i>Fax:</i> (844) 897-3788 <i>After Hours Phone:</i> (800) 898-2020 <i>Provider Gender:</i> Female</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: A115965
NPI: 1982872552
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog, Telugu, Vietnamese
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital, Alvarado Community Hospital, Scripps Memorial Hospital, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s): IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

PRABHU, SUJATA P

Provider ID: 262390
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 450 FLETCHER PKWY STE 112 EL CAJON, CA 92020-2520
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800) 898-2020
Provider Gender: Female
License number: A115965
NPI: 1982872552
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog, Telugu, Vietnamese
Cultural Competency: No

Hospital Affiliation: Paradise Valley Hospital, Alvarado Community Hospital, Scripps Memorial Hospital, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s): IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

PRABHU, SUJATA P , MD

Provider ID: 268917
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 450 FLETCHER PKWY STE 112 EL CAJON, CA 92020-2520
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800) 898-2020
Provider Gender: Female
License number: A115965
NPI: 1982872552
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog, Telugu, Vietnamese
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital, Alvarado Community Hospital, Scripps Memorial Hospital, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):

No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s): IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

PEDIATRICS

KODSI, ALICIA M

Provider ID: 120082
Board Certified Specialty: No
 FAMILY HLTH CTR SAN DIEGO-EL CAJON
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619) 515-2498
Provider Gender: Female
License number: A147976
NPI: 1932514353
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Family Hlth Ctr San Diego-El Cajon
IPA:

LYNN, JOHN G

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D. Directorio de proveedores de atención especializada

Provider ID: 24744
Board Certified Specialty: No
NEIGHBORHOOD
HEALTHCARE EL CAJON
855 E MADISON AVE
EL CAJON, CA 92020-3819
Phone: (760) 742-2782
Fax:
After Hours Phone: (760)
742-2782
Provider Gender: Male
License number: A87637
NPI: 1891729968
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website: www.ihpsocal.org
Email:
Medical Group(s): Neighborhood
Healthcare El Cajon
IPA:

PHYSICIANS ASSISTANT

ALICEA, RAUL C
Provider ID: 259910
Board Certified Specialty: No
HEALTH EXCEL IPA INC
328 HIGHLAND AVE # 200
EL CAJON, CA 92020-5207
Phone: (619) 930-9404
Fax: (619) 930-9426
After Hours Phone: (619)
930-9404
Provider Gender: Male
License number: PA54627

NPI: 1275057051
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

ALYAS, ALISIA
Provider ID: 279972
Board Certified Specialty: No
HEALTH EXCEL IPA INC
165 S 1ST ST
EL CAJON, CA 92019-4795
Phone: (619) 312-0347
Fax: (619) 749-5480
After Hours Phone: (619)
312-0347
Provider Gender: Female
License number: PA58466
NPI: 1437768017
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

ALYAS, ALISIA
Provider ID: 279975
Board Certified Specialty: No
HEALTH EXCEL IPA INC
1032 BROADWAY
EL CAJON, CA 92021-7416
Phone: (619) 795-5991
Fax: (619) 795-5992
After Hours Phone: (619)
795-5991
Provider Gender: Female
License number: PA58466
NPI: 1437768017
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

**LA BERGE-INDA, PRISCILLA S
, NPA**
Provider ID: 265073
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
328 HIGHLAND AVE # 200
EL CAJON, CA 92020-5207
Phone: (619) 930-9404
Fax: (619) 930-9426
After Hours Phone: (619)
930-9404
Provider Gender: Female
License number: PA54404
NPI: 1679008379
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Arabic, Russian, Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/110
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

LAPINA, LORI L
Provider ID: 77854
Board Certified Specialty: No
CHASE AVENUE FAMILY
HEALTH CTRS INC
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499

Fax:
After Hours Phone: (619)
515-2499
Provider Gender: Female
License number: PA23231
NPI: 1245670413
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Chase Avenue
Family Health Ctrs Inc
IPA:

MERCER, KELLY C
Provider ID: 278475
Board Certified Specialty: No
HEALTH EXCEL IPA INC
1032 BROADWAY
EL CAJON, CA 92021-7416
Phone: (619) 795-5991
Fax: (619) 795-5992
After Hours Phone: (888)
216-8982
Provider Gender: Female
License number: PA21625
NPI: 1154609790
Provider English Spoken: Yes
Provider Language(s) Spoken:

Arabic
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health
Plan Direct, Health Excel Ipa Inc

MERCER, KELLY C
Provider ID: 278477
Board Certified Specialty: No
HEALTH EXCEL IPA INC
165 S 1ST ST
EL CAJON, CA 92019-4795
Phone: (619) 312-0347
Fax: (619) 749-5480
After Hours Phone: (619)
312-0347
Provider Gender: Female
License number: PA21625
NPI: 1154609790
Provider English Spoken: Yes

Provider Language(s) Spoken:
Arabic
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health
Plan Direct, Health Excel Ipa Inc

PATEL, SHREYA M
Provider ID: 48965
Board Certified Specialty: No
CHASE AVENUE FAMILY
HEALTH CTRS INC
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax:
After Hours Phone: (619)
515-2499
Provider Gender: Female
License number: PA18719
NPI: 1447468137
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Chase Avenue
Family Health Ctrs Inc

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D. Directorio de proveedores de atención especializada

<p>IPA:</p> <p>TURNER, ERIC M <i>Provider ID:</i> 121894 <i>Board Certified Specialty:</i> No CHASE AVENUE FAMILY HEALTH CTRS INC 1111 W CHASE AVE EL CAJON, CA 92020-5710 <i>Phone:</i> (619) 515-2499 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2499 <i>Provider Gender:</i> Male <i>License number:</i> PA55067 <i>NPI:</i> 1669756128 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> www.fhcscd.org <i>Email:</i> <i>Medical Group(s):</i> Chase Avenue Family Health Ctrs Inc IPA:</p>	<p><i>License number:</i> DPM2895 <i>NPI:</i> 1215087770 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> German, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc</p> <p>VALLONE, MELCHIOR P <i>Provider ID:</i> 204673 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 5442 SYCUAN RD EL CAJON, CA 92019-1816 <i>Phone:</i> (619) 445-0707 <i>Fax:</i> (619) 445-9764 <i>After Hours Phone:</i> (619) 445-0707 <i>Provider Gender:</i> Male <i>License number:</i> DPM2201 <i>NPI:</i> 1093998965 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> P, EB, IB, E, R, T, W</p>	<p><i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc</p> <hr/> <p style="text-align: center;">REGISTERED PHYSICAL THERAPIST</p> <hr/> <p>DESROSIERS, GARRETT R <i>Provider ID:</i> 285937 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 1154 E MAIN ST STE 106 EL CAJON, CA 92021-7169 <i>Phone:</i> (619) 486-6448 <i>Fax:</i> (619) 486-6459 <i>After Hours Phone:</i> (619) 486-6448 <i>Provider Gender:</i> Male <i>License number:</i> PT291404 <i>NPI:</i> 1679921084 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Health Excel Ipa Inc</p> <p>MILLER, RICHARD J <i>Provider ID:</i> 269763 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 1625 E MAIN ST STE 100 EL CAJON, CA 92021-5240</p>
<p>PODIATRIST</p>		
<p>FARMER, STEVEN G <i>Provider ID:</i> 268976 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 855 E MADISON AVE EL CAJON, CA 92020-3819 <i>Phone:</i> (619) 440-2751 <i>Fax:</i> (858) 633-4692 <i>After Hours Phone:</i> (619) 440-2751 <i>Provider Gender:</i> Male</p>		

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D. Directorio de proveedores de atención especializada

Phone: (619) 376-1082

Fax:

After Hours Phone: (619)
376-1082

Provider Gender: Male

License number: PT22474

NPI: 1255638979

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

SANTIAGO, ALICIA L

Provider ID: 269688

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

1625 E MAIN ST STE 104
EL CAJON, CA 92021-5223

Phone: (619) 873-2160

Fax: (619) 873-2168

After Hours Phone: (619)

873-2160

Provider Gender: Female

License number: PT292418

NPI: 1497297964

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

RHEUMATOLOGY

MABAQUIAO, ARTHUR R

Provider ID: 279411

Board Certified Specialty: No

HEALTH EXCEL IPA INC

300 S PIERCE ST # 203
EL CAJON, CA 92020-4124

Phone: (619) 334-4869

Fax: (619) 334-4940

After Hours Phone: (619)

334-4869

Provider Gender: Male

License number: A61769

NPI: 1730271933

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

SURGERY GENERAL

AVULOV, VADIM

Provider ID: 125016

Board Certified Specialty: Yes

IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD

671 S MOLLISON AVE
EL CAJON, CA 92020-6682

Phone: (619) 386-6637

Fax: (619) 825-3406

After Hours Phone: (619)
386-6637

Provider Gender: Male

License number: 20A13344

NPI: 1700121472

Provider English Spoken: Yes

Provider Language(s) Spoken:

Russian

Cultural Competency: No

Hospital Affiliation: Alvarado

Hospital Llc, Paradise Valley
Hospital, Sharp Coronado Hosp

And Healthcare Ctr, Grossmont
Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Imperial Health Holdings
Medical Group-Sd

AVULOV, VADIM

Provider ID: 262163

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD

1580 N 2ND ST
EL CAJON, CA 92021-3447

Phone: (619) 396-6637

Fax: (619) 825-3406

After Hours Phone: (619)

396-6637

Provider Gender: Male

License number: 20A13344

NPI: 1700121472

Provider English Spoken: Yes

Provider Language(s) Spoken:

Russian

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc, Paradise Valley Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings Medical Group-Sd

ENCINITAS

ALLERGY IMMUNOLOGY

LAUBACH, SUSAN S
Provider ID: 53685
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
477 N EL CAMINO REAL STE D302
ENCINITAS, CA 92024-1374
Phone: (760) 944-6377
Fax: (760) 755-7699
After Hours Phone: (760) 944-6377
Provider Gender: Female
License number: A114061
NPI: 1366656209
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Childrens Hosp And Resrch Ctr

At Oakland
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

WELCH, MICHAEL J
Provider ID: 206202
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
477 N EL CAMINO REAL STE D302
ENCINITAS, CA 92024-1374
Phone: (858) 966-6377
Fax: (760) 944-3927
After Hours Phone: (858) 966-6377
Provider Gender: Male
License number: G34844
NPI: 1699794222
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/99
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

ANESTHESIOLOGY PAIN MANAGEMENT

FISHER, CASEY J
Provider ID: 269185
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
326 ENCINITAS BLVD STE 100
ENCINITAS, CA 92024-8703
Phone: (619) 825-8511
Fax: (858) 726-6291
After Hours Phone: (619) 825-8511
Provider Gender: Male
License number: A118592
NPI: 1275780686
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Sharp Memorial Hospital, Scripps Mercy Hospital, Pomerado Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

CARDIAC ELECTROPHYSIOLOGY

HAMZEI, ALI R
Provider ID: 272339
Board Certified Specialty: No
HEALTH EXCEL IPA INC

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

320 SANTA FE DR STE 204
ENCINITAS, CA 92024-5179

Phone: (760) 944-7300

Fax: (858) 824-2910

After Hours Phone: (760)
944-7300

Provider Gender: Male

License number: A62682

NPI: 1376511188

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Scripps

Memorial Hospital Encinitas

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

NARAYAN, HARI K

Provider ID: 239115

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

477 N EL CAMINO REAL STE
D302

ENCINITAS, CA 92024-1374

Phone: (760) 944-5545

Fax: (760) 944-3927

After Hours Phone: (760)

944-5545

Provider Gender: Male

License number: A144821

NPI: 1376705707

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

CARDIOVASCULAR DISEASE

AVALOS, ROY T

Provider ID: 257178

Board Certified Specialty: No

HEALTH EXCEL IPA INC

320 SANTA FE DR STE 204

ENCINITAS, CA 92024-5179

Phone: (760) 944-7300

Fax: (760) 633-3949

After Hours Phone: (760)

944-7300

Provider Gender: Male

License number: A68893

NPI: 1154399632

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Scripps

Memorial Hospital Encinitas

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

BACKMAN, JOHN R

Provider ID: 265195

Board Certified Specialty: No

HEALTH EXCEL IPA INC

320 SANTA FE DR STE 204

ENCINITAS, CA 92024-5179

Phone: (760) 944-7300

Fax: (760) 633-3949

After Hours Phone: (760)

944-7300

Provider Gender: Male

License number: G29156

CARDIOLOGY

HOFFMAYER, KURT S

Provider ID: 118218

Board Certified Specialty: No

UCSD MEDICAL GROUP

477 N EL CAMINO REAL # B300

ENCINITAS, CA 92024-1328

Phone: (760) 634-8273

Fax:

After Hours Phone: (760)

634-8273

Provider Gender: Male

License number: A98256

NPI: 1841322195

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1215905831
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital Chula Vista, Scripps
Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

BULIBEK, BATYRJAN K
Provider ID: 265216
Board Certified Specialty: No
HEALTH EXCEL IPA INC
320 SANTA FE DR STE 204
ENCINITAS, CA 92024-5179
Phone: (760) 944-7300
Fax: (760) 633-3949
After Hours Phone: (760)
944-7300
Provider Gender: Male
License number: A148198
NPI: 1033369947

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Scripps
Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Health Excel Ipa Inc
CARTER, STEPHANIE
Provider ID: 280074
Board Certified Specialty: No
HEALTH EXCEL IPA INC
700 GARDEN VIEW CT STE 204
ENCINITAS, CA 92024-2478
Phone: (760) 452-6334
Fax: (760) 634-9755
After Hours Phone: (760)
452-6334
Provider Gender: Female
License number: C171841
NPI: 1497997407

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

CARTER, STEPHANIE
Provider ID: 280075
Board Certified Specialty: No
HEALTH EXCEL IPA INC
354 SANTA FE DR
ENCINITAS, CA 92024-5142
Phone: (760) 452-6334
Fax: (760) 634-9755
After Hours Phone: (760)
452-6334
Provider Gender: Female
License number: C171841
NPI: 1497997407
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

FELD, GREGORY K
Provider ID: 64680
Board Certified Specialty: No
UCSD MEDICAL GROUP
477 N EL CAMINO REAL # B300
ENCINITAS, CA 92024-1328
Phone: (760) 634-8273
Fax: (619) 543-7418
After Hours Phone: (760)
634-8273
Provider Gender: Male
License number: G37258
NPI: 1720003924
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

JACOBY, RICHARD M

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider ID: 257039
Board Certified Specialty: Yes
HEALTH EXCEL IPA INC
700 GARDEN VIEW CT STE 204
ENCINITAS, CA 92024-2478
Phone: (760) 452-6334
Fax: (760) 634-9755
After Hours Phone: (760)
452-6334
Provider Gender: Male
License number: G161416
NPI: 1053353029
Provider English Spoken: Yes
Provider Language(s) Spoken:
French
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

KULHANEK, JAN
Provider ID: 265265
Board Certified Specialty: No
HEALTH EXCEL IPA INC
320 SANTA FE DR STE 204
ENCINITAS, CA 92024-5179
Phone: (760) 944-7300
Fax: (760) 633-3949
After Hours Phone: (760)
944-7300
Provider Gender: Male
License number: A102299
NPI: 1316908775
Provider English Spoken: Yes
Provider Language(s) Spoken:
Czech

Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Scripps
Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

MCGINTY, PATRICK M
Provider ID: 265220
Board Certified Specialty: No
HEALTH EXCEL IPA INC
320 SANTA FE DR STE 204
ENCINITAS, CA 92024-5179
Phone: (760) 944-7300
Fax: (760) 634-6564
After Hours Phone: (760)
944-7300
Provider Gender: Male
License number: A94682
NPI: 1912127358
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Uc Davis
Medical Ctr, Scripps Memorial
Hospital Encinitas, Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

MEHBOOB, SALMAN
Provider ID: 257032
Board Certified Specialty: No
HEALTH EXCEL IPA INC
700 GARDEN VIEW CT STE 204
ENCINITAS, CA 92024-2478
Phone: (760) 452-6334
Fax: (760) 634-9755
After Hours Phone: (760)
452-6334
Provider Gender: Male
License number: A119955
NPI: 1497841795
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Urdu
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Scripps
Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

RASCH, DAMIAN R
Provider ID: 265224
Board Certified Specialty: No
HEALTH EXCEL IPA INC
320 SANTA FE DR STE 204
ENCINITAS, CA 92024-5179
Phone: (760) 944-7300
Fax: (760) 633-3947
After Hours Phone: (760)
944-7300
Provider Gender: Male
License number: 20A14015
NPI: 1295977122

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

TAUB, PAM R

Provider ID: 64683
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 477 N EL CAMINO REAL # B300
 ENCINITAS, CA 92024-1328
Phone: (760) 634-8273
Fax:
After Hours Phone: (760) 634-8273
Provider Gender: Female
License number: A89612
NPI: 1346355161
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Ucsd Medical Group

CERTIFIED NURSE PRACTITIONER

ANDREW, SHIRLEY A

Provider ID: 284889
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 326 SANTA FE DR STE 105
 ENCINITAS, CA 92024-5157
Phone: (760) 452-3340
Fax: (760) 452-3344
After Hours Phone: (760) 452-3340
Provider Gender: Female
License number: NP95017459
NPI: 1528731403
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 17/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

BINAVI, HOWNAZ Z , NPA

Provider ID: 265370
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 477 N EL CAMINO REAL STE D308
 ENCINITAS, CA 92024-1370
Phone: (760) 436-2300
Fax: (760) 436-5482
After Hours Phone: (760) 436-2300

Provider Gender: Female
License number: NP95010956
NPI: 1083276273
Provider English Spoken: Yes
Provider Language(s) Spoken: Kurdish, Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

BINAVI, HOWNAZ Z

Provider ID: 272947
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 477 N EL CAMINO REAL STE D308
 ENCINITAS, CA 92024-1370
Phone: (760) 436-2300
Fax: (760) 436-5482
After Hours Phone: (760) 436-2300
Provider Gender: Female
License number: NP95010956
NPI: 1083276273
Provider English Spoken: Yes
Provider Language(s) Spoken: Kurdish, Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

BUCKLEY, PATRICIA J

Provider ID: 279060
Board Certified Specialty: No
HEALTH EXCEL IPA INC
326 SANTA FE DR STE 105
ENCINITAS, CA 92024-5157
Phone: (760) 452-3340
Fax: (760) 452-3344
After Hours Phone: (760)
452-3340
Provider Gender: Female
License number: NP95015705
NPI: 1700470200
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 17/120
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

COYLE, JENNIFER M

Provider ID: 279276
Board Certified Specialty: No
HEALTH EXCEL IPA INC
326 SANTA FE DR STE 105
ENCINITAS, CA 92024-5157
Phone: (760) 452-3340
Fax: (760) 452-3344
After Hours Phone: (760)
452-3340

Provider Gender: Female
License number: NP95006591
NPI: 1538689310
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 16/120
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

ELAMPARO, KAYE L , NPA

Provider ID: 258927
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
477 N EL CAMINO REAL STE
D200
ENCINITAS, CA 92024-1375
Phone: (760) 452-3340
Fax: (760) 452-3344
After Hours Phone: (760)
452-3340
Provider Gender: Female
License number: NP20795
NPI: 1851673610
Provider English Spoken: Yes
Provider Language(s) Spoken:
Korean, Tagalog
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr, Scripps Mercy
Hospital Chula Vista, Scripps
Memorial Hospital, Scripps
Memorial Hospital Encinitas,
Scripps Green Hospital, Scripps
Mercy Hospital, Alvarado Hosp

Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

FAIQ, JAMILA, NPA

Provider ID: 254824
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
477 N EL CAMINO REAL STE
D200
ENCINITAS, CA 92024-1375
Phone: (760) 452-3340
Fax:
After Hours Phone: (760)
452-3340
Provider Gender: Female
License number: NP95004759
NPI: 1518414366
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 16/120
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

FIELDS, KATHRYN S

Provider ID: 260850

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 477 N EL CAMINO REAL STE D302
 ENCINITAS, CA 92024-1374
Phone: (858) 966-6789
Fax: (760) 944-3927
After Hours Phone: (858) 966-6789
Provider Gender: Female
License number: NP20720
NPI: 1679867782
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FRANZ, CORTNEY D , NPA
Provider ID: 253241
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 477 N EL CAMINO REAL STE D200
 ENCINITAS, CA 92024-1375
Phone: (760) 452-3340
Fax: (760) 452-3344
After Hours Phone: (760) 452-3340
Provider Gender: Female
License number: NP95004258
NPI: 1174077507
Provider English Spoken: Yes
Provider Language(s) Spoken:

Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 16/120
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

HEAD, KRISTIN N
Provider ID: 126782
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 477 N EL CAMINO REAL ENCINITAS, CA 92024-1328
Phone: (760) 944-5545
Fax:
After Hours Phone: (760) 944-5545
Provider Gender: Female
License number: NP20264
NPI: 1699078923
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Rady Childrens Health Network
HEAD, KRISTIN N
Provider ID: 268657
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 477 N EL CAMINO REAL STE D302
 ENCINITAS, CA 92024-1374
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760) 944-5545
Provider Gender: Female
License number: NP20264
NPI: 1699078923
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

HOOPER, BONNIE J
Provider ID: 269843
Board Certified Specialty: No
HEALTH EXCEL IPA INC
 477 N EL CAMINO REAL STE D308
 ENCINITAS, CA 92024-1370

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (760) 436-2300
Fax: (760) 436-5482
After Hours Phone: (760) 436-2300
Provider Gender: Female
License number: NP6495
NPI: 1821062878
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

HOOPER, BONNIE J , NPA
Provider ID: 275253
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
477 N EL CAMINO REAL STE
D308
ENCINITAS, CA 92024-1370
Phone: (760) 436-2300
Fax: (760) 436-5482
After Hours Phone: (760) 436-2300
Provider Gender: Female
License number: NP6495
NPI: 1821062878
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

HUYNH, MELVYN G
Provider ID: 271794
Board Certified Specialty: No
HEALTH EXCEL IPA INC
662 ENCINITAS BLVD STE 220
ENCINITAS, CA 92024-6791
Phone: (833) 446-6363
Fax: (760) 633-7879
After Hours Phone: (833) 446-6363
Provider Gender: Female
License number: NP95002765
NPI: 1225495294
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital Chula Vista, Scripps
Mercy Hospital
Medi-Cal Open Panel: No
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KORMANIK, PATRICIA A
Provider ID: 282071
Board Certified Specialty: No
UCSD MEDICAL GROUP
1200 GARDEN VIEW RD STE
200
ENCINITAS, CA 92024-2475

Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NP9707
NPI: 1093895047
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LEVY, SHARON B
Provider ID: 262167
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
477 N EL CAMINO REAL STE
D302
ENCINITAS, CA 92024-1374
Phone: (760) 944-5545
Fax:
After Hours Phone: (760) 944-5545
Provider Gender: Female
License number: NP95003383
NPI: 1316396807
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/99

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

American Sign Language (ASL): 326 SANTA FE DR STE 105
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MWAURA, WAIRIMU R , NPA

Provider ID: 269680
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
477 N EL CAMINO REAL STE
D200
ENCINITAS, CA 92024-1375
Phone: (760) 452-3340
Fax: (760) 452-3344
After Hours Phone: (760)
452-3340
Provider Gender: Female
License number: NP95009639
NPI: 1598320996
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

MWAURA, WAIRIMU R

Provider ID: 280180
Board Certified Specialty: No
HEALTH EXCEL IPA INC

326 SANTA FE DR STE 105
ENCINITAS, CA 92024-5157
Phone: (760) 452-3340
Fax: (760) 452-3344
After Hours Phone: (760)
452-3340
Provider Gender: Female
License number: NP95009639
NPI: 1598320996
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

NIZHEBORSKY, OKSANA

Provider ID: 259621
Board Certified Specialty: No
HEALTH EXCEL IPA INC
320 SANTA FE DR STE 107C
ENCINITAS, CA 92024-5139
Phone: (760) 230-8994
Fax: (760) 944-1309
After Hours Phone: (760)
230-8994
Provider Gender: Female
License number: NP95001042
NPI: 1417336827
Provider English Spoken: Yes
Provider Language(s) Spoken:
Russian
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas

Medi-Cal Open Panel: Yes
Min/Max Age: 18/199
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

NYAGAYA, LINDA M

Provider ID: 271805
Board Certified Specialty: No
HEALTH EXCEL IPA INC
662 ENCINITAS BLVD STE 220
ENCINITAS, CA 92024-6791
Phone: (833) 446-6363
Fax: (760) 633-7879
After Hours Phone: (833)
446-6363
Provider Gender: Female
License number: NP95009642
NPI: 1235612193
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

PARK, SUN MIN

Provider ID: 262381
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

477 N EL CAMINO REAL STE
D302
ENCINITAS, CA 92024-1374
Phone: (858) 966-6789
Fax: (760) 944-3927
After Hours Phone: (858)
966-6789
Provider Gender: Female
License number: NP20538
NPI: 1376678250
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

PIDDING, APRYL D

Provider ID: 265372
Board Certified Specialty: No
HEALTH EXCEL IPA INC
700 GARDEN VIEW CT STE 102
ENCINITAS, CA 92024-2478
Phone: (760) 783-0441
Fax: (760) 635-5972
After Hours Phone: (760)
783-0441
Provider Gender: Female
License number: NP20027
NPI: 1518259936
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes

Min/Max Age: 18/200
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

SCOTT, MARYLOU

Provider ID: 262842
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
477 N EL CAMINO REAL STE
D302
ENCINITAS, CA 92024-1374
Phone: (858) 966-6377
Fax: (760) 944-3927
After Hours Phone: (858)
966-6377
Provider Gender: Female
License number: NP10261
NPI: 1023223252
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

Provider ID: 265372
Board Certified Specialty: No
HEALTH EXCEL IPA INC
700 GARDEN VIEW CT STE 102
ENCINITAS, CA 92024-2478
Phone: (760) 783-0441
Fax: (760) 635-5972
After Hours Phone: (760)
783-0441
Provider Gender: Female
License number: NP20027
NPI: 1518259936
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes

SRILASAK, MICHELE

Provider ID: 281856

Board Certified Specialty: No
UCSD MEDICAL GROUP
1200 GARDEN VIEW RD STE
200
ENCINITAS, CA 92024-2475
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: NP13694
NPI: 1265487326
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

STEARNS, PHILIP H

Provider ID: 265081
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
477 N EL CAMINO REAL STE
D302
ENCINITAS, CA 92024-1374
Phone: (858) 966-6377
Fax: (760) 944-3927
After Hours Phone: (858)
966-6377
Provider Gender: Male
License number: NP11899
NPI: 1609900810
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/99
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

TAWFILIS, AMY C
Provider ID: 275702
Board Certified Specialty: No
HEALTH EXCEL IPA INC
320 SANTA FE DR STE 108
ENCINITAS, CA 92024-5141
Phone: (760) 436-4558
Fax: (858) 429-7926
After Hours Phone: (760)
436-4558
Provider Gender: Female
License number: NP95013902
NPI: 1144855107
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

TAWFILIS, AMY C
Provider ID: 276750
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
320 SANTA FE DR STE 108
ENCINITAS, CA 92024-5141
Phone: (760) 436-4558
Fax: (858) 429-7926
After Hours Phone: (760)
436-4558
Provider Gender: Female
License number: NP95013902
NPI: 1144855107
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

WILLEY, MARTI L , NPA
Provider ID: 256422
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
477 N EL CAMINO REAL STE
D200
ENCINITAS, CA 92024-1375
Phone: (760) 452-3340
Fax:
After Hours Phone: (760)
452-3340
Provider Gender: Female
License number: NP22548
NPI: 1144574062
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 18/120
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

WILLEY, MARTI L
Provider ID: 280141
Board Certified Specialty: No
HEALTH EXCEL IPA INC
326 SANTA FE DR STE 105
ENCINITAS, CA 92024-5157
Phone: (760) 452-3340
Fax: (760) 452-3344
After Hours Phone: (760)
452-3340
Provider Gender: Female
License number: NP22548
NPI: 1144574062
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 17/120
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

WOODRUFF, WHITNEY L

Provider ID: 265260
Board Certified Specialty: No
HEALTH EXCEL IPA INC
700 GARDEN VIEW CT STE 102
ENCINITAS, CA 92024-2478
Phone: (760) 783-0441
Fax: (760) 635-5972
After Hours Phone: (760)
783-0441
Provider Gender: Female
License number: NP16535
NPI: 1568557270
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/120
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

CERTIFIED REGISTERED NURSE MIDWIFE

KARVER CHRISTENSON, ELYSE S

Provider ID: 257565
Board Certified Specialty: Yes
BLUE SHIELD PROMISE
HEALTH PLAN DIRECT
1130 2ND ST
ENCINITAS, CA 92024-5008
Phone: (760) 943-9994
Fax:
After Hours Phone: (760)
943-9994
Provider Gender: Female

License number: NMW276
NPI: 1720098155
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health
Plan Direct

DERMATOLOGY

GLADSJO, JULIE A

Provider ID: 207589
Board Certified Specialty: No
HEALTH EXCEL IPA INC
477 N EL CAMINO REAL STE
D308
ENCINITAS, CA 92024-1370
Phone: (760) 436-2300
Fax: (760) 436-5482
After Hours Phone: (760)
436-2300
Provider Gender: Female
License number: A98641
NPI: 1629234380
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Department
Of Veterans Affairs Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

GLADSJO, JULIE A , MD

Provider ID: 269052
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
477 N EL CAMINO REAL STE
D308
ENCINITAS, CA 92024-1370
Phone: (760) 436-2300
Fax: (760) 436-5482
After Hours Phone: (760)
436-2300

Provider Gender: Female
License number: A98641
NPI: 1629234380
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Department
Of Veterans Affairs Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

HEMPERLY, STEPHEN E

Provider ID: 243725
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
477 N EL CAMINO REAL STE
D308

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

ENCINITAS, CA 92024-1370
Phone: (760) 436-2300
Fax: (760) 436-5482
After Hours Phone: (760) 436-2300
Provider Gender: Male
License number: 20A14658
NPI: 1013277045
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

LASHGARI, ALI R

Provider ID: 284475
Board Certified Specialty: No
HEALTH EXCEL IPA INC
700 GARDEN VIEW CT STE 100
ENCINITAS, CA 92024-2478
Phone: (760) 633-1000
Fax: (760) 753-8657
After Hours Phone: (760) 633-1000
Provider Gender: Male
License number: G78121
NPI: 1528033925
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Memorial Hospital Encinitas, Ridgecrest Regional Hospital

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

NICKERSON, DEREK W

Provider ID: 284536
Board Certified Specialty: No
HEALTH EXCEL IPA INC
700 GARDEN VIEW CT STE 100
ENCINITAS, CA 92024-2478
Phone: (760) 633-1000
Fax: (760) 753-8657
After Hours Phone: (760) 633-1000
Provider Gender: Male
License number: A171167
NPI: 1265895619
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

RILEY, JESSICA A

Provider ID: 243457
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
477 N EL CAMINO REAL STE D308

ENCINITAS, CA 92024-1370
Phone: (760) 436-2300
Fax: (760) 436-5482
After Hours Phone: (760) 436-2300
Provider Gender: Female
License number: 20A16345
NPI: 1548677438
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

SCHAIRER, DAVID O

Provider ID: 264680
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
477 N EL CAMINO REAL # 302
ENCINITAS, CA 92024-1328
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760) 944-5545
Provider Gender: Male
License number: A148597
NPI: 1619311164
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Childrens Hospital San Diego,
Childrens Hospital Of Orange
County

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

SPRAGUE, JESSICA M

Provider ID: 127463

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED
FNDTN

477 N EL CAMINO REAL STE
D302

ENCINITAS, CA 92024-1374

Phone: (760) 944-5545

Fax:

After Hours Phone: (760)

944-5545

Provider Gender: Female

License number: A134345

NPI: 1437594884

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

SPRAGUE, JESSICA M

Provider ID: 242315

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

477 N EL CAMINO REAL STE
D302

ENCINITAS, CA 92024-1374

Phone: (858) 966-6795

Fax: (760) 944-3927

After Hours Phone: (858)

966-6795

Provider Gender: Female

License number: A134345

NPI: 1437594884

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

TOMPKINS, STACY D , MD

Provider ID: 246363

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

477 N EL CAMINO REAL STE
D302

ENCINITAS, CA 92024-1370

Phone: (760) 436-2300

Fax: (760) 436-5482

After Hours Phone: (760)
436-2300

Provider Gender: Female

License number: A52958

NPI: 1255418265

Provider English Spoken: Yes

Provider Language(s) Spoken:

French, Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

ENDOCRINOLOGY METABOLISM DIABETES

HUPFELD, CHRISTOPHER J

Provider ID: 277111

Board Certified Specialty: No

UCSD MEDICAL GROUP

1200 GARDEN VIEW RD STE
100

ENCINITAS, CA 92024-2475

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A64102

NPI: 1568429165

Provider English Spoken: Yes

Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

PADILLA, PATRICK J
Provider ID: 284402
Board Certified Specialty: No
HEALTH EXCEL IPA INC
351 SANTA FE DR STE 100
ENCINITAS, CA 92024-5137
Phone: (760) 633-3130
Fax: (760) 633-3546
After Hours Phone: (760)
633-3130

Provider Gender: Male
License number: G79160
NPI: 1225041676
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Scripps
Memorial Hospital Encinitas, Tri
City Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

FAMILY PRACTICE

ESTRADA, JOHANNA A
Provider ID: 283645
Board Certified Specialty: No
HEALTH EXCEL IPA INC
662 ENCINITAS BLVD STE 220

ENCINITAS, CA 92024-6791
Phone: (833) 446-6363
Fax: (760) 633-7879
After Hours Phone: (833)
446-6363
Provider Gender: Female
License number: A127188
NPI: 1255698155
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista, Scripps Memorial
Hospital, Scripps Green Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 21/199
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

GASTROENTEROLOGY

DILAURO, STEVEN C
Provider ID: 257122
Board Certified Specialty: Yes
HEALTH EXCEL IPA INC
700 GARDEN VIEW CT STE 102
ENCINITAS, CA 92024-2478
Phone: (760) 783-0441
Fax: (760) 635-5972
After Hours Phone: (760)
783-0441
Provider Gender: Male
License number: A104332
NPI: 1629117643
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

DILAURO, STEVEN C , MD
Provider ID: 66036
Board Certified Specialty: Yes
GENESIS HEALTHCARE PARTNERS PC
700 GARDEN VIEW CT STE 102 ENCINITAS, CA 92024-2478
Phone: (760) 783-0441
Fax: (760) 635-5972
After Hours Phone: (760) 783-0441
Provider Gender: Male
License number: A104332
NPI: 1629117643
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

Health Excel Ipa Inc
DILAURO, STEVEN C
Provider ID: 66036
Board Certified Specialty: No
GENESIS HEALTHCARE PARTNERS PC
700 GARDEN VIEW CT STE 102 ENCINITAS, CA 92024-2478
Phone: (760) 783-0441
Fax: (760) 635-5972
After Hours Phone: (760) 783-0441
Provider Gender: Male
License number: A104332
NPI: 1629117643
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

GOLDKLANG, ROBERT H , MD
Provider ID: 66037
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
700 GARDEN VIEW CT STE 102 ENCINITAS, CA 92024-2478
Phone: (760) 783-0441
Fax: (760) 635-5972
After Hours Phone: (760) 783-0441

Provider Gender: Male
License number: G69237
NPI: 1275527657
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

GOLDKLANG, ROBERT H
Provider ID: 66037
Board Certified Specialty: No
HEALTH EXCEL IPA INC
700 GARDEN VIEW CT STE 102 ENCINITAS, CA 92024-2478
Phone: (760) 783-0441
Fax: (760) 635-5972
After Hours Phone: (760) 783-0441
Provider Gender: Male
License number: G69237
NPI: 1275527657
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc

LAJOIE, ADRIANNE M

Provider ID: 257124
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 700 GARDEN VIEW CT STE 102
 ENCINITAS, CA 92024-2478
 Phone: (760) 783-0441
 Fax: (760) 635-5972
 After Hours Phone: (760)
 783-0441
 Provider Gender: Female
 License number: A84301
 NPI: 1225253651
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps
 Memorial Hospital Encinitas
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No

Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc

LAJOIE, ADRIANNE M , MD

Provider ID: 65629
 Board Certified Specialty: No

GENESIS HEALTHCARE
 PARTNERS PC
 700 GARDEN VIEW CT STE 102
 ENCINITAS, CA 92024-2478
 Phone: (760) 783-0441
 Fax: (760) 635-5972
 After Hours Phone: (760)
 783-0441
 Provider Gender: Female
 License number: A84301
 NPI: 1225253651

Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps
 Memorial Hospital Encinitas
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No

Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc

LAJOIE, ADRIANNE M , MD

Provider ID: 65629
 Board Certified Specialty: No
 COASTAL
 GASTROENTEROLOGY A
 PROF CORP
 700 GARDEN VIEW CT STE 102
 ENCINITAS, CA 92024-2478
 Phone: (760) 783-0441
 Fax: (760) 635-5972
 After Hours Phone: (760)
 783-0441
 Provider Gender: Female
 License number: A84301
 NPI: 1225253651
 Provider English Spoken: Yes

Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps
 Memorial Hospital Encinitas
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc

PATEL, JANKI R

Provider ID: 257158
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 700 GARDEN VIEW CT STE 102
 ENCINITAS, CA 92024-2478
 Phone: (760) 783-0441
 Fax: (760) 635-5972
 After Hours Phone: (760)
 783-0441
 Provider Gender: Female
 License number: A133101
 NPI: 1548606668
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps
 Memorial Hospital Encinitas
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No

Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Health Excel Ipa Inc

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

SINGH, MARVIN M , MD

Provider ID: 123127
Board Certified Specialty: No
GENESIS HEALTHCARE PARTNERS PC
 700 GARDEN VIEW CT STE 102
 ENCINITAS, CA 92024-2478
Phone: (760) 783-0441
Fax: (760) 635-5972
After Hours Phone: (760) 783-0441
Provider Gender: Male
License number: A102749
NPI: 1306968417
Provider English Spoken: Yes
Provider Language(s) Spoken: Korean, Russian, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: University Of California Irvine Med Ctr, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

SINGH, MARVIN M

Provider ID: 123127
Board Certified Specialty: No
GENESIS HEALTHCARE PARTNERS PC
 700 GARDEN VIEW CT STE 102
 ENCINITAS, CA 92024-2478

Phone: (760) 783-0441
Fax:
After Hours Phone: (760) 783-0441
Provider Gender: Male
License number: A102749
NPI: 1306968417
Provider English Spoken: Yes
Provider Language(s) Spoken: Korean, Russian, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: University Of California Irvine Med Ctr, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

SINGH, MARVIN M

Provider ID: 257154
Board Certified Specialty: No
HEALTH EXCEL IPA INC
 700 GARDEN VIEW CT STE 102
 ENCINITAS, CA 92024-2478
Phone: (760) 783-0441
Fax: (760) 635-5972
After Hours Phone: (760) 783-0441
Provider Gender: Male
License number: A102749
NPI: 1306968417
Provider English Spoken: Yes
Provider Language(s) Spoken: Korean, Russian, Spanish, Tagalog

Cultural Competency: No
Hospital Affiliation: University Of California Irvine Med Ctr, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

SINGH, MARVIN M

Provider ID: 260237
Board Certified Specialty: No
HEALTH EXCEL IPA INC
 320 SANTA FE DR STE 308
 ENCINITAS, CA 92024-5139
Phone: (760) 783-0441
Fax:

After Hours Phone: (760) 783-0441
Provider Gender: Male
License number: A102749
NPI: 1306968417
Provider English Spoken: Yes
Provider Language(s) Spoken: Korean, Russian, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: University Of California Irvine Med Ctr, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

NPI: 1003888074

Provider English Spoken: Yes
Provider Language(s) Spoken:
Hebrew, Spanish

Cultural Competency: No
Hospital Affiliation: Palomar
Health Downtown Campus, Tri
City Medical Ctr, Scripps

Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

BESSUDO, ALBERTO

Provider ID: 278509

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD

326 SANTA FE DR STE 105
ENCINITAS, CA 92024-5157

Phone: (760) 452-3340

Fax: (760) 452-3344

After Hours Phone: (760)
452-3340

Provider Gender: Male

License number: A50309

NPI: 1003888074

Provider English Spoken: Yes

Provider Language(s) Spoken:
Hebrew, Spanish

Cultural Competency: No

Hospital Affiliation: Palomar
Health Downtown Campus, Tri
City Medical Ctr, Scripps
Memorial Hospital Encinitas

HEMATOLOGY / ONCOLOGY

BALL, EDWARD D

Provider ID: 83201

Board Certified Specialty: No

UCSD MEDICAL GROUP

1200 GARDEN VIEW RD STE
200

ENCINITAS, CA 92024-2475

Phone: (760) 944-0223

Fax:

After Hours Phone: (760)

944-0223

Provider Gender: Male

License number: G84752

NPI: 1093740110

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

BESSUDO, ALBERTO

Provider ID: 278508

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

326 SANTA FE DR STE 105

ENCINITAS, CA 92024-5157

Phone: (760) 452-3340

Fax: (760) 452-3344

After Hours Phone: (760)

452-3340

Provider Gender: Male

License number: A50309

GYNECOLOGIC ONCOLOGY

ESKANDER, RAMEZ N

Provider ID: 282164

Board Certified Specialty: No

UCSD MEDICAL GROUP

1200 GARDEN VIEW RD STE
200

ENCINITAS, CA 92024-2475

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A102482

NPI: 1144486929

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: University Of
California Irvine Med Ctr, Earl
And Lorraine Miller Childrens

Hsp, Long Beach Memorial Med
Ctr, Providence St Joseph

Hospital, Providence St Jude

Medical Center, Orange Coast

Mem Med Ctr, Fountain Valley

Regional Hosp And Med Ctr,

Corona Regional Med Ctr, Ucsd

La Jolla John Sally Thornton,

Ucsd Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes
Min/Max Age: 16/120
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

FLORES, EDNA I, MD

Provider ID: 256367
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
477 N EL CAMINO REAL STE
D200
ENCINITAS, CA 92024-1375
Phone: (760) 452-3440
Fax:
After Hours Phone: (760)
452-3440
Provider Gender: Female
License number: A114373
NPI: 1396994604
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Pioneers
Memorial Hospital, Scripps
Memorial Hospital Encinitas,
Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

FRAKES, LAURIE A
Provider ID: 54038
Board Certified Specialty: No
CA CANCER ASSOC FOR RES
& EXCEL-ENCINITA
477 N EL CAMINO REAL STE
D200
ENCINITAS, CA 92024-1375
Phone: (760) 452-3340
Fax: (760) 452-3344
After Hours Phone: (760)
452-3340
Provider Gender: Female
License number: A52663
NPI: 1174595144
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr, Scripps Memorial
Hospital, Scripps Memorial
Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 16/120
American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

SIDDIQUI, FAREEHA H
Provider ID: 282174
Board Certified Specialty: No

UCSD MEDICAL GROUP
1200 GARDEN VIEW RD STE
200
ENCINITAS, CA 92024-2475
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A108879
NPI: 1104848720
Provider English Spoken: Yes
Provider Language(s) Spoken:
French, Spanish, Urdu
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr, Scripps Memorial
Hospital Encinitas, Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SUBRAMANIAN, RUPA
Provider ID: 282180
Board Certified Specialty: No
UCSD MEDICAL GROUP
1200 GARDEN VIEW RD STE
200
ENCINITAS, CA 92024-2475
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A67026
NPI: 1376547174

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Tamil
Cultural Competency: No
Hospital Affiliation: Corona Regional Med Ctr, Tri City Medical Ctr, Ucsd Medical Ctr, Scripps Memorial Hospital Encinitas, Fountain Valley Regional Hosp And Med Ctr, University Of California Irvine Med Ctr, Ucsd La Jolla John Sally Thornton

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SULLIVAN, JESSICA E , MD

Provider ID: 243484
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 477 N EL CAMINO REAL STE D200
 ENCINITAS, CA 92024-1375
Phone: (760) 452-3340
Fax: (760) 452-3344
After Hours Phone: (760) 452-3340
Provider Gender: Female
License number: 20A16273
NPI: 1942407150
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Temecula Valley Hospital Inc

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

SULLIVAN, JESSICA E

Provider ID: 273554
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 326 SANTA FE DR STE 105
 ENCINITAS, CA 92024-5157
Phone: (760) 452-3340
Fax: (760) 452-3344
After Hours Phone: (760) 452-3340
Provider Gender: Female
License number: 20A16273
NPI: 1942407150
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Temecula Valley Hospital Inc
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

HOSPICE AND PALLIATIVE

MEDICINE

RUBENZIK, TAMARA T

Provider ID: 245575
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 1200 GARDEN VIEW RD STE 100
 ENCINITAS, CA 92024-2475
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A119245
NPI: 1811200652
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

RUBENZIK, TAMARA T

Provider ID: 282127
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 1200 GARDEN VIEW RD STE 200
 ENCINITAS, CA 92024-2475
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Female
License number: A119245
NPI: 1811200652
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

INTERNAL MEDICINE CRITICAL CARE MEDICINE

FUSSELL, KEVIN M

Provider ID: 282190
Board Certified Specialty: No
HEALTH EXCEL IPA INC
326 SANTA FE DR STE 100
ENCINITAS, CA 92024-5157
Phone: (760) 230-8994
Fax: (760) 944-1309
After Hours Phone: (760)
230-8994
Provider Gender: Male
License number: C172323
NPI: 1164404901
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 18/199
American Sign Language (ASL):
No
Accessibility:

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc
PINO, ALEJANDRO
Provider ID: 282149
Board Certified Specialty: No
HEALTH EXCEL IPA INC
326 SANTA FE DR STE 100
ENCINITAS, CA 92024-5157
Phone: (760) 230-8994
Fax: (760) 944-1309
After Hours Phone: (760)
230-8994
Provider Gender: Male
License number: A172405
NPI: 1457748089
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:

Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

SHIN, STEPHANIE

Provider ID: 260072
Board Certified Specialty: No
HEALTH EXCEL IPA INC
320 SANTA FE DR STE 107-C
ENCINITAS, CA 92024-5139
Phone: (760) 230-8994
Fax: (760) 944-1309
After Hours Phone: (760)
230-8994
Provider Gender: Female

License number: A130231
NPI: 1023317286
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Sharp Mary
Birch Hosp For Women And
Newborns, Sharp Coronado
Hosp And Healthcare Ctr, Sharp
Chula Vista Med Ctr, Scripps
Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 18/199
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

SMILDE, RENEE I

Provider ID: 271804
Board Certified Specialty: No
HEALTH EXCEL IPA INC
662 ENCINITAS BLVD STE 220
ENCINITAS, CA 92024-6791
Phone: (833) 446-6363
Fax: (760) 633-7879
After Hours Phone: (833)
446-6363
Provider Gender: Female
License number: A70175
NPI: 1427010594
Provider English Spoken: Yes
Provider Language(s) Spoken:
Dutch
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

TRAN, SHERI

Provider ID: 270757
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 320 SANTA FE DR STE 107C
 ENCINITAS, CA 92024-5139
Phone: (760) 230-8994
Fax: (760) 944-1309
After Hours Phone: (760)
 230-8994
Provider Gender: Female
License number: A124071
NPI: 1053641563
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish, Vietnamese
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton, Scripps Memorial
 Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

INTERNAL MEDICINE

BAUTISTA, JENNIFER D

Provider ID: 259803

Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 320 SANTA FE DR STE 107-C
 ENCINITAS, CA 92024-5139
Phone: (760) 230-8994
Fax: (760) 944-1309
After Hours Phone: (760)
 230-8994
Provider Gender: Female
License number: A112993
NPI: 1770727034
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Tagalog
Cultural Competency: No
Hospital Affiliation: Community
 Hospital Of The Monterey
 Peninsula, Natividad Medical
 Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

BERUTI, DAN

Provider ID: 280985
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 662 ENCINITAS BLVD STE 220
 ENCINITAS, CA 92024-6791
Phone: (833) 446-6363
Fax: (760) 633-7879
After Hours Phone: (833)
 446-6363
Provider Gender: Male
License number: 20A11030
NPI: 1710970983
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: 21/199
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

CAPARSO, AMANDA M

Provider ID: 280764
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 662 ENCINITAS BLVD STE 220
 ENCINITAS, CA 92024-6791
Phone: (833) 446-6363
Fax: (760) 633-7879
After Hours Phone: (833)
 446-6363
Provider Gender: Female
License number: 20A12874
NPI: 1003046004
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Palomar
 Medical Center, Pomerado
 Hospital, Palomar Health
 Downtown Campus, Scripps
 Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: 21/199
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

CHOWDHURY, PUNAM

Provider ID: 271725
Board Certified Specialty: No
HEALTH EXCEL IPA INC
662 ENCINITAS BLVD STE 220
ENCINITAS, CA 92024-6791
Phone: (833) 446-6363
Fax: (760) 633-7879
After Hours Phone: (833) 446-6363
Provider Gender: Female
License number: A113005
NPI: 1154513174
Provider English Spoken: Yes
Provider Language(s) Spoken: Bengali
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

ELHOFY, ASHRAF

Provider ID: 271730
Board Certified Specialty: No
HEALTH EXCEL IPA INC
662 ENCINITAS BLVD STE 220
ENCINITAS, CA 92024-6791
Phone: (833) 446-6363
Fax: (760) 633-7879
After Hours Phone: (833) 446-6363
Provider Gender: Male
License number: A154984
NPI: 1275928129

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

ELLIS, ADAM P

Provider ID: 271781
Board Certified Specialty: No
HEALTH EXCEL IPA INC
662 ENCINITAS BLVD STE 220
ENCINITAS, CA 92024-6791
Phone: (833) 446-6363
Fax: (760) 633-7879
After Hours Phone: (833) 446-6363
Provider Gender: Male
License number: C53403
NPI: 1285731661
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

HANSON, COURTNEY C

Provider ID: 271796
Board Certified Specialty: No
HEALTH EXCEL IPA INC
662 ENCINITAS BLVD STE 220
ENCINITAS, CA 92024-6791
Phone: (833) 446-6363
Fax: (760) 633-7879
After Hours Phone: (833) 446-6363
Provider Gender: Female
License number: A114225
NPI: 1609004191
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

KHAYYAT, OMAR S

Provider ID: 283600
Board Certified Specialty: No
HEALTH EXCEL IPA INC
662 ENCINITAS BLVD STE 220
ENCINITAS, CA 92024-6791
Phone: (833) 446-6363
Fax: (760) 633-7879
After Hours Phone: (833) 446-6363
Provider Gender: Male
License number: A163653
NPI: 1649711862
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p><i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, El Centro Regional Medical Center <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 21/199 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Health Excel Ipa Inc</p> <p>LAJOIE, ADRIANNE M <i>Provider ID:</i> 65629 <i>Board Certified Specialty:</i> No GENESIS HEALTHCARE PARTNERS PC 700 GARDEN VIEW CT STE 102 ENCINITAS, CA 92024-2478 <i>Phone:</i> (760) 783-0441 <i>Fax:</i> <i>After Hours Phone:</i> (760) 783-0441 <i>Provider Gender:</i> Female <i>License number:</i> A84301 <i>NPI:</i> 1225253651 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital Encinitas <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM</p>	<p><i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc</p> <p>LAJOIE, ADRIANNE M <i>Provider ID:</i> 65629 <i>Board Certified Specialty:</i> No COASTAL GASTROENTEROLOGY A PROF CORP 700 GARDEN VIEW CT STE 102 ENCINITAS, CA 92024-2478 <i>Phone:</i> (760) 783-0441 <i>Fax:</i> <i>After Hours Phone:</i> (760) 783-0441 <i>Provider Gender:</i> Female <i>License number:</i> A84301 <i>NPI:</i> 1225253651 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital Encinitas <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc</p> <p>LIU, STEVEN T <i>Provider ID:</i> 271795 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 662 ENCINITAS BLVD STE 220</p>	<p>ENCINITAS, CA 92024-6791 <i>Phone:</i> (833) 446-6363 <i>Fax:</i> (760) 633-7879 <i>After Hours Phone:</i> (833) 446-6363 <i>Provider Gender:</i> Male <i>License number:</i> C53222 <i>NPI:</i> 1801815048 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 18/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Health Excel Ipa Inc</p> <p>MCCLAY, EDWARD F , MD <i>Provider ID:</i> 243933 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 477 N EL CAMINO REAL STE D200 ENCINITAS, CA 92024-1375 <i>Phone:</i> (760) 452-3340 <i>Fax:</i> (760) 452-3344 <i>After Hours Phone:</i> (760) 452-3340 <i>Provider Gender:</i> Male <i>License number:</i> G64594 <i>NPI:</i> 1497727465 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Tri City Medical Ctr, Scripps Memorial Hospital Encinitas, Palomar</p>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Center
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ☒ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc, Imperial
 Health Holdings Medical
 Group-Sd

MCMURRAY, SARAH J

Provider ID: 271782
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 662 ENCINITAS BLVD STE 220
 ENCINITAS, CA 92024-6791
 Phone: (833) 446-6363
 Fax: (760) 633-7879
 After Hours Phone: (833)
 446-6363
 Provider Gender: Female
 License number: 20A15890
 NPI: 1124274899
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps
 Memorial Hospital Encinitas
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL):
 No
 ☒ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Health Excel Ipa Inc

MINOOEE, AREZOU

Provider ID: 271793
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 662 ENCINITAS BLVD STE 220
 ENCINITAS, CA 92024-6791
 Phone: (833) 446-6363
 Fax: (760) 633-7879
 After Hours Phone: (833)
 446-6363
 Provider Gender: Female
 License number: A102443
 NPI: 1275770836
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Farsi
 Cultural Competency: No
 Hospital Affiliation: St Louise
 Regional Hospital, Hazel
 Hawkins Memorial Hospital,
 Scripps Memorial Hospital
 Encinitas
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL):
 No
 ☒ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Health Excel Ipa Inc

MULRONEY, CAROLYN M

Provider ID: 84293
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 1200 GARDEN VIEW RD STE
 200
 ENCINITAS, CA 92024-2475
 Phone: (760) 536-7700
 Fax:
 After Hours Phone: (760)
 536-7700
 Provider Gender: Female
 License number: A48368

NPI: 1215124664
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ☒ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

NARDI, MELISSA A

Provider ID: 271803
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 662 ENCINITAS BLVD STE 220
 ENCINITAS, CA 92024-6791
 Phone: (833) 446-6363
 Fax: (760) 633-7879
 After Hours Phone: (833)
 446-6363
 Provider Gender: Female
 License number: 20A13524
 NPI: 1720321755
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy
 Hospital, Scripps Mercy Hospital
 Chula Vista, Scripps Memorial
 Hospital, Scripps Green Hospital,
 Scripps Memorial Hospital
 Encinitas
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL):
 No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

NELKIN, CORY

Provider ID: 285591
Board Certified Specialty: No
HEALTH EXCEL IPA INC
662 ENCINITAS BLVD STE 220
ENCINITAS, CA 92024-6791
Phone: (833) 446-6363
Fax: (760) 633-7879
After Hours Phone: (833)
446-6363
Provider Gender: Male
License number: 20A13311
NPI: 1831475136
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Pomerado
Hospital, Palomar Medical
Center, Scripps Memorial
Hospital Encinitas, Scripps
Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: 21/199
American Sign Language (ASL):
No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

NGUYEN, ALEXIE K

Provider ID: 271792
Board Certified Specialty: No
HEALTH EXCEL IPA INC
662 ENCINITAS BLVD STE 220
ENCINITAS, CA 92024-6791

Phone: (833) 446-6363
Fax: (760) 633-7879
After Hours Phone: (833)
446-6363
Provider Gender: Female
License number: A83318
NPI: 1659367613
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton, Scripps Memorial
Hospital Encinitas, Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

NGUYEN, ANDY H

Provider ID: 271789
Board Certified Specialty: No
HEALTH EXCEL IPA INC
662 ENCINITAS BLVD STE 220
ENCINITAS, CA 92024-6791
Phone: (833) 446-6363
Fax: (760) 633-7879
After Hours Phone: (833)
446-6363
Provider Gender: Male
License number: 20A14947
NPI: 1053748459
Provider English Spoken: Yes
Provider Language(s) Spoken:
Vietnamese
Cultural Competency: No
Hospital Affiliation: Alvarado
Hospital Llc, Vibra Hospital Of

San Diego, Scripps Memorial
Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

RAISINGHANI, AJIT B

Provider ID: 64681
Board Certified Specialty: No
UCSD MEDICAL GROUP
477 N EL CAMINO REAL # B300
ENCINITAS, CA 92024-1328
Phone: (760) 634-8273
Fax:
After Hours Phone: (760)
634-8273
Provider Gender: Male
License number: G75914
NPI: 1831292796
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ROLFSEN, MARK L

Provider ID: 283659

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
HEALTH EXCEL IPA INC
662 ENCINITAS BLVD STE 220
ENCINITAS, CA 92024-6791
Phone: (833) 446-6363
Fax: (760) 633-7879
After Hours Phone: (833) 446-6363
Provider Gender: Male
License number: A164623
NPI: 1578053856
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: 21/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

RUMMANI, BENNY A

Provider ID: 280804
Board Certified Specialty: No
HEALTH EXCEL IPA INC
662 ENCINITAS BLVD STE 220
ENCINITAS, CA 92024-6791
Phone: (833) 446-6363
Fax: (760) 633-7879
After Hours Phone: (833) 446-6363
Provider Gender: Male
License number: 20A15450
NPI: 1811381064
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No

Min/Max Age: 21/199
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

SAVAGE, ROBERT T

Provider ID: 259635
Board Certified Specialty: No
HEALTH EXCEL IPA INC
320 SANTA FE DR STE 107C
ENCINITAS, CA 92024-5139
Phone: (760) 230-8994
Fax: (760) 944-1309
After Hours Phone: (760) 230-8994
Provider Gender: Male
License number: G27715
NPI: 1881694891
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 18/199
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

Board Certified Specialty: No
HEALTH EXCEL IPA INC
662 ENCINITAS BLVD STE 220
ENCINITAS, CA 92024-6791
Phone: (833) 446-6363
Fax: (760) 633-7879
After Hours Phone: (833) 446-6363
Provider Gender: Male
License number: 20A15450
NPI: 1811381064
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No

STEADMAN, MICHAEL C

Provider ID: 275569
Board Certified Specialty: No
HEALTH EXCEL IPA INC
662 ENCINITAS BLVD STE 220

ENCINITAS, CA 92024-6791
Phone: (833) 446-6363
Fax: (760) 633-7879
After Hours Phone: (833) 446-6363
Provider Gender: Male
License number: A108824
NPI: 1285830950
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 21/199
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

TOROSIAN, KARO

Provider ID: 272858
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
320 SANTA FE DR STE 212
ENCINITAS, CA 92024-5139
Phone: (858) 558-8150
Fax: (858) 346-1024
After Hours Phone: (858) 558-8150
Provider Gender: Male
License number: 20A12445
NPI: 1275822082
Provider English Spoken: Yes
Provider Language(s) Spoken: Armenian, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas, Sharp Memorial Hospital

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

TRAN, AMY H

Provider ID: 271790
Board Certified Specialty: No
HEALTH EXCEL IPA INC
662 ENCINITAS BLVD STE 220
ENCINITAS, CA 92024-6791
Phone: (833) 446-6363
Fax: (760) 633-7879
After Hours Phone: (833)
446-6363
Provider Gender: Female
License number: A137426
NPI: 1649615071
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

TRAN, GLORIA E

Provider ID: 283658

Board Certified Specialty: No
HEALTH EXCEL IPA INC
662 ENCINITAS BLVD STE 220
ENCINITAS, CA 92024-6791
Phone: (833) 446-6363
Fax: (760) 633-7879
After Hours Phone: (833)
446-6363
Provider Gender: Female
License number: A168703
NPI: 1720433907
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Scripps
Memorial Hospital Encinitas,
Scripps Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: 21/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

TRING, ELEANOR P

Provider ID: 280779
Board Certified Specialty: No
HEALTH EXCEL IPA INC
662 ENCINITAS BLVD STE 220
ENCINITAS, CA 92024-6791
Phone: (833) 446-6363
Fax: (760) 633-7879
After Hours Phone: (833)
446-6363
Provider Gender: Female
License number: 20A18139
NPI: 1609138767
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Scripps
Memorial Hospital Encinitas
Medi-Cal Open Panel: No
Min/Max Age: 21/199
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

TUCHMAN, LESLIE J

Provider ID: 271801
Board Certified Specialty: No
HEALTH EXCEL IPA INC
662 ENCINITAS BLVD STE 220
ENCINITAS, CA 92024-6791
Phone: (833) 446-6363
Fax: (760) 633-7879
After Hours Phone: (833)
446-6363
Provider Gender: Female
License number: C148437
NPI: 1033152616
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas,
Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

VERMA, JINNU A

Provider ID: 272429

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
HEALTH EXCEL IPA INC
662 ENCINITAS BLVD STE 220
ENCINITAS, CA 92024-6791
Phone: (833) 446-6363
Fax: (760) 633-7879
After Hours Phone: (833)
446-6363
Provider Gender: Female
License number: A79306
NPI: 1093804767
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi, Malay, Malayalam,
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

YUEN, ERIC M

Provider ID: 280765
Board Certified Specialty: No
HEALTH EXCEL IPA INC
662 ENCINITAS BLVD STE 220
ENCINITAS, CA 92024-6791
Phone: (833) 446-6363
Fax: (760) 633-7879
After Hours Phone: (833)
446-6363
Provider Gender: Male
License number: A82464
NPI: 1598765968
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Scripps
Memorial Hospital Encinitas
Medi-Cal Open Panel: No
Min/Max Age: 21/199
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

ZHOU, QINWEN

Provider ID: 283677
Board Certified Specialty: No
HEALTH EXCEL IPA INC
662 ENCINITAS BLVD STE 220
ENCINITAS, CA 92024-6791
Phone: (833) 446-6363
Fax: (760) 633-7879
After Hours Phone: (833)
446-6363
Provider Gender: Female
License number: A164101
NPI: 1912403163
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Scripps
Memorial Hospital Encinitas
Medi-Cal Open Panel: No
Min/Max Age: 21/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

INTERVENTIONAL CARDIOLOGY

YTURRALDE, FREDERICK R
Provider ID: 276086
Board Certified Specialty: No
HEALTH EXCEL IPA INC
700 GARDEN VIEW CT STE 204
ENCINITAS, CA 92024-2478
Phone: (760) 452-6334
Fax: (760) 634-9755
After Hours Phone: (760)
452-6334
Provider Gender: Male
License number: C168384
NPI: 1134186372
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Pioneers
Memorial Hospital, Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 21/200
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

YTURRALDE, FREDERICK R

Provider ID: 276087
Board Certified Specialty: No
HEALTH EXCEL IPA INC
354 SANTA FE DR
ENCINITAS, CA 92024-5142
Phone: (760) 452-6334
Fax: (760) 634-9755
After Hours Phone: (760)
452-6334
Provider Gender: Male
License number: C168384
NPI: 1134186372
Provider English Spoken: Yes
Provider Language(s) Spoken:

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Pioneers Memorial Hospital, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 21/200
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

MATERNAL AND FETAL MEDICINE

ADAMCZAK, JOANNA E

Provider ID: 258902
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
477 N EL CAMINO REAL # 302
ENCINITAS, CA 92024-1328
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: A116982
NPI: 1447428420
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Tri City Medical Ctr, Sharp Mary Birch Hosp For Women And Newborns
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

ADAMI, REBECCA R

Provider ID: 277180
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
477 N EL CAMINO REAL STE D302
ENCINITAS, CA 92024-1374

Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: A149389
NPI: 1992149447
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

BALLAS, JERASIMOS

Provider ID: 209562
Board Certified Specialty: No
UCSD MEDICAL GROUP

781 GARDEN VIEW CT STE 200
ENCINITAS, CA 92024-2481
Phone: (858) 657-7200
Fax:
After Hours Phone: (858) 657-7200
Provider Gender: Male
License number: A112607
NPI: 1871767384
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton

Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CASELE, HOLLY L

Provider ID: 258871
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
477 N EL CAMINO REAL STE D302
ENCINITAS, CA 92024-1374
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: G87630
NPI: 1255348744
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp

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D. Directorio de proveedores de atención especializada

Memorial Hospital, Grossmont Hospital, Tri City Medical Ctr, Sharp Mary Birch Hosp For Women And Newborns, Scripps Memorial Hospital Encinitas, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CATANZARITE, VALERIAN A

Provider ID: 258849
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
477 N EL CAMINO REAL STE D302
ENCINITAS, CA 92024-1374
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Male
License number: G46026
NPI: 1174694939
Provider English Spoken: Yes
Provider Language(s) Spoken: Russian, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Scripps Memorial Hospital, Tri City Medical Ctr, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Grossmont Hospital,

Scripps Memorial Hospital Encinitas, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

HULL, ANDREW D

Provider ID: 209483
Board Certified Specialty: No
UCSD MEDICAL GROUP
781 GARDEN VIEW CT STE 200 ENCINITAS, CA 92024-2481
Phone: (858) 657-7200
Fax:
After Hours Phone: (858) 657-7200
Provider Gender: Male
License number: A53578
NPI: 1902862121
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Palomar Medical Center, Ucsd Medical Ctr, Scripps Memorial Hospital, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
Accessibility:

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KELLY, THOMAS F

Provider ID: 210191
Board Certified Specialty: No
UCSD MEDICAL GROUP
781 GARDEN VIEW CT STE 200 ENCINITAS, CA 92024-2481
Phone: (858) 657-7200
Fax:

After Hours Phone: (858) 657-7200
Provider Gender: Male
License number: G60630
NPI: 1336203496
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Palomar Medical Center, Palomar Health Downtown Campus
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LAURENT, LOUISE C

Provider ID: 208641
Board Certified Specialty: No
UCSD MEDICAL GROUP

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D. Directorio de proveedores de atención especializada

781 GARDEN VIEW CT STE 200
ENCINITAS, CA 92024-2481
Phone: (858) 657-7200
Fax:
After Hours Phone: (858)
657-7200
Provider Gender: Female
License number: A80409
NPI: 1770532707
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Palomar
Health Downtown Campus,
Scripps Mercy Hospital, Scripps
Mercy Hospital Chula Vista,
Scripps Memorial Hospital
Encinitas, Palomar Medical
Center, Scripps Memorial
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MCCULLOUGH, DEIRDRE M
Provider ID: 277264
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
477 N EL CAMINO REAL STE
D302
ENCINITAS, CA 92024-1374
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858)
966-6710
Provider Gender: Female
License number: C159758

NPI: 1639153018
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Mary
Birch Hosp For Women And
Newborns
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

MOORE, THOMAS R
Provider ID: 208645
Board Certified Specialty: No
UCSD MEDICAL GROUP
781 GARDEN VIEW CT STE 200
ENCINITAS, CA 92024-2481
Phone: (858) 657-7200
Fax:
After Hours Phone: (858)
657-7200
Provider Gender: Male
License number: G49930
NPI: 1184682379
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Ucsd Medical Group
RICHARDSON, ALVIE C
Provider ID: 277315
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
477 N EL CAMINO REAL STE
D302
ENCINITAS, CA 92024-1374
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858)
966-6710
Provider Gender: Male
License number: C160063
NPI: 1154305977
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

SCHWENDEMANN, WADE D
Provider ID: 205436
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
477 N EL CAMINO REAL
ENCINITAS, CA 92024-1328

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D. Directorio de proveedores de atención especializada

Phone: (858) 966-6710
 Fax: (858) 966-6711
 After Hours Phone: (858) 966-6710
 Provider Gender: Male
 License number: A109228
 NPI: 1477563302
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Scripps Memorial Hospital, Grossmont Hospital, Sharp Memorial Hospital, Sharp Mary Birch Hosp For Women And Newborns, Tri City Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

TARSA, MARYAM

Provider ID: 209393
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 781 GARDEN VIEW CT STE 200
 ENCINITAS, CA 92024-2481
 Phone: (858) 657-7200
 Fax:
 After Hours Phone: (858) 657-7200
 Provider Gender: Female
 License number: A69894
 NPI: 1295768638
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Farsi

Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Palomar Medical Center, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr, Eisenhower Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 16/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

THOMAS, STEVEN J

Provider ID: 209480
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 781 GARDEN VIEW CT STE 200
 ENCINITAS, CA 92024-2481
 Phone: (858) 657-7200
 Fax:
 After Hours Phone: (858) 657-7200
 Provider Gender: Male
 License number: A40379
 NPI: 1639242589
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Palomar Health Downtown Campus, Ucsd Medical Ctr, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Palomar

Medical Center, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 16/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

TITH, TEVY

Provider ID: 277328
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 477 N EL CAMINO REAL STE D302
 ENCINITAS, CA 92024-1374
 Phone: (858) 966-6710
 Fax: (858) 966-6711
 After Hours Phone: (858) 966-6710
 Provider Gender: Female
 License number: A103521
 NPI: 1588816086
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Tri City Medical Ctr, Sharp Mary Birch Hosp For Women And Newborns, University Of California Irvine Med Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

WESTERMANN, MELISSA L

Provider ID: 277354
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
477 N EL CAMINO REAL STE D302
ENCINITAS, CA 92024-1374
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: A130149
NPI: 1760730758
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Mary Birch Hosp For Women And Newborns, Earl And Lorraine Miller Childrens Hsp, Long Beach Memorial Med Ctr, University Of California Irvine Med Ctr, Sharp Memorial Hospital, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

WILLIAMS, KRISTIN M

Provider ID: 277386
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
477 N EL CAMINO REAL STE D302
ENCINITAS, CA 92024-1374
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: A72985
NPI: 1992847131
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Stanford Health Care, Lucile Salter Packard Childrens Hosp, San Mateo Medical Ctr, Sharp Memorial Hospital, Sharp Mary Birch Hosp For Women And Newborns, Tri City Medical Ctr, California Pacific Med Ctr, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

WOELKERS, DOUGLAS A

Provider ID: 209384
Board Certified Specialty: No
UCSD MEDICAL GROUP
781 GARDEN VIEW CT STE 200
ENCINITAS, CA 92024-2481

Phone: (858) 657-7200
Fax:
After Hours Phone: (858) 657-7200
Provider Gender: Male
License number: G77134
NPI: 1013965748
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Palomar Medical Center, Palomar Health Downtown Campus, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

WOLF, RICHARD B

Provider ID: 209254
Board Certified Specialty: No
UCSD MEDICAL GROUP
781 GARDEN VIEW CT STE 200
ENCINITAS, CA 92024-2481
Phone: (858) 657-7200
Fax:
After Hours Phone: (858) 657-7200
Provider Gender: Male
License number: 20A6028
NPI: 1497713846
Provider English Spoken: Yes

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Palomar Medical Center, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

NEPHROLOGY

BOISKIN, MARK M
Provider ID: 113514
Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC
320 SANTA FE DR STE 212 ENCINITAS, CA 92024-5139
Phone: (858) 558-8150
Fax: (858) 346-1024
After Hours Phone: (858) 558-8150
Provider Gender: Male
License number: A52055
NPI: 1437154143
Provider English Spoken: Yes
Provider Language(s) Spoken: Afrikaans, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital

Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

BOISKIN, MARK M
Provider ID: 113514
Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC
320 SANTA FE DR STE 212 ENCINITAS, CA 92024-5139
Phone: (760) 509-1040
Fax:
After Hours Phone: (760) 509-1040
Provider Gender: Male
License number: A52055
NPI: 1437154143
Provider English Spoken: Yes
Provider Language(s) Spoken: Afrikaans, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas, Sharp Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 9AM-5PM, SA 9AM-5PM
Website: www.bnmg.org
Email:

Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

BOISKIN, MARK M , MD
Provider ID: 273106
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
320 SANTA FE DR STE 212 ENCINITAS, CA 92024-5139
Phone: (858) 558-8150
Fax: (858) 346-1024

After Hours Phone: (858) 558-8150
Provider Gender: Male
License number: A52055
NPI: 1437154143
Provider English Spoken: Yes
Provider Language(s) Spoken: Afrikaans, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

LAKHERA, YOGITA
Provider ID: 109347
Board Certified Specialty: No
BALBOA NEPHROLOGY MED

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

GRP INC
320 SANTA FE DR STE 212
ENCINITAS, CA 92024-5139
Phone: (858) 509-1040
Fax:
After Hours Phone: (858)
509-1040
Provider Gender: Female
License number: A125173
NPI: 1083972483
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Scripps
Memorial Hospital Encinitas
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 9AM-5PM, SA
9AM-5PM
Website: www.bnmg.org
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

LAKHERA, YOGITA
Provider ID: 109347
Board Certified Specialty: No
BALBOA NEPHROLOGY MED
GRP INC
320 SANTA FE DR STE 212
ENCINITAS, CA 92024-5139
Phone: (760) 509-1040
Fax: (858) 346-1024
After Hours Phone: (760)
509-1040
Provider Gender: Female
License number: A125173

NPI: 1083972483
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Scripps
Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

LAKHERA, YOGITA
Provider ID: 262129
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
320 SANTA FE DR STE 212
ENCINITAS, CA 92024-5139
Phone: (760) 509-1040
Fax: (858) 346-1024
After Hours Phone: (760)
509-1040
Provider Gender: Female
License number: A125173
NPI: 1083972483
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Scripps
Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

STEER, DYLAN L , MD
Provider ID: 272853
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
320 SANTA FE DR STE 212
ENCINITAS, CA 92024-5139
Phone: (760) 509-1040
Fax: (760) 967-6769
After Hours Phone: (760)
509-1040
Provider Gender: Male
License number: A65604
NPI: 1437154978
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Sharp
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health
Plan Direct, Community Care Ipa
Llc, Health Excel Ipa Inc, Imperial
Health Holdings Medical

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D. Directorio de proveedores de atención especializada

Group-Sd

ENCINITAS, CA 92024-1374

Cultural Competency: No

Phone: (760) 944-5545

Hospital Affiliation: Rady

Fax: (760) 944-3927

Childrens Hospital San Diego

After Hours Phone: (760)

Medi-Cal Open Panel: Yes

944-5545

Min/Max Age: 0/18

Provider Gender: Female

American Sign Language (ASL):

License number: A120194

No

NPI: 1174870067

♿ *Accessibility:*

Provider English Spoken: Yes

Hours: M-SA 9AM-5PM

Provider Language(s) Spoken:

Website:

Cultural Competency: No

Email:

Hospital Affiliation: University Of

Medical Group(s):

California Irvine Med Ctr, Rady

IPA: Rady Childrens Health

Childrens Hospital San Diego,

Network

Childrens Hospital Of Orange

County

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

NEUROLOGY

NEUROLOGY CHILD

GROSMANN, CARLA M

Provider ID: 205657

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

477 N EL CAMINO REAL STE D302

ENCINITAS, CA 92024-1374

Phone: (760) 944-5545

Fax: (760) 944-3927

After Hours Phone: (760)

944-5545

Provider Gender: Female

License number: G84717

NPI: 1497826259

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Childrens Hosp And Resrch Ctr

At Oakland

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

KIM MCMANUS, OLIVIA S

Provider ID: 206258

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

477 N EL CAMINO REAL STE

D302

SAHAGIAN, MICHELLE L

Provider ID: 206073

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

477 N EL CAMINO REAL STE

D302

ENCINITAS, CA 92024-1374

Phone: (760) 944-5545

Fax: (760) 944-3927

After Hours Phone: (760)

944-5545

Provider Gender: Female

License number: A80990

NPI: 1275604035

Provider English Spoken: Yes

Provider Language(s) Spoken:

BUI, JONATHAN D

Provider ID: 269966

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

477 N EL CAMINO REAL # 302

ENCINITAS, CA 92024-1328

Phone: (760) 944-6377

Fax: (760) 944-3927

After Hours Phone: (760)

944-6377

Provider Gender: Male

License number: A96574

NPI: 1730247974

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Ucsd Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/25

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

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D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Rady Childrens Health
Network

JINDAL, ANUJA V

Provider ID: 206264
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
477 N EL CAMINO REAL # 302
ENCINITAS, CA 92024-1328
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760)
944-5545
Provider Gender: Female
License number: A149444
NPI: 1194046581
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

SAHAGIAN, MICHELLE L

Provider ID: 52601
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FN D TN
477 N EL CAMINO REAL STE
D302
ENCINITAS, CA 92024-1374

Phone: (760) 944-5545
Fax:
After Hours Phone: (760)
944-5545
Provider Gender: Female
License number: A80990
NPI: 1275604035
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

TROXELL, REGINA M

Provider ID: 265112
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
477 N EL CAMINO REAL # 302
ENCINITAS, CA 92024-1328
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760)
944-5545
Provider Gender: Female
License number: A157940
NPI: 1013350586
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/99

American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network, Ucsd Medical Group

TROXELL, REGINA M

Provider ID: 283168
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
477 N EL CAMINO REAL STE
D302
ENCINITAS, CA 92024-1374
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760)
944-5545
Provider Gender: Female
License number: A157940
NPI: 1013350586
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network, Ucsd Medical Group

OBSTETRICS / GYNECOLOGY

BINDER, PRATIBHA S

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Provider ID: 282167
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 1200 GARDEN VIEW RD STE 200
 ENCINITAS, CA 92024-2475
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A149945
NPI: 1174758031
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

JUMA, SAAD

Provider ID: 127805
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 320 SANTA FE DR STE 108
 ENCINITAS, CA 92024-5141
Phone: (760) 753-8373
Fax: (760) 753-9332
After Hours Phone: (760) 753-8373
Provider Gender: Male
License number: A42398
NPI: 1013931930
Provider English Spoken: Yes
Provider Language(s) Spoken:

Arabic, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Tri City Medical Ctr, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

LAMALE-SMITH, LEAH M

Provider ID: 208682
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 781 GARDEN VIEW CT STE 200
 ENCINITAS, CA 92024-2481
Phone: (858) 657-7200
Fax:
After Hours Phone: (858) 657-7200
Provider Gender: Female
License number: A135831
NPI: 1396904876
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Ucsd Medical Group
RIES, MAUREEN C
Provider ID: 125253
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 1200 GARDEN VIEW RD STE 100
 ENCINITAS, CA 92024-2475
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A127234
NPI: 1750544516

Provider English Spoken: Yes
Provider Language(s) Spoken: Indonesian, Spanish, Swahili
Cultural Competency: No
Hospital Affiliation: University Of California Irvine Med Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SCHWENDEMANN, WADE D

Provider ID: 52500
Board Certified Specialty: No
 RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDRN

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D. Directorio de proveedores de atención especializada

477 N EL CAMINO REAL STE
D302
ENCINITAS, CA 92024-1374
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858)
966-6710
Provider Gender: Male
License number: A109228
NPI: 1477563302
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Scripps Memorial Hospital,
Grossmont Hospital, Sharp
Memorial Hospital, Sharp Mary
Birch Hosp For Women And
Newborns, Tri City Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

SHAH, NEMI M

Provider ID: 272578
Board Certified Specialty: No
UCSD MEDICAL GROUP
1200 GARDEN VIEW RD STE
100
ENCINITAS, CA 92024-2475
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A168801

NPI: 1558715268
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

ONCOLOGY MEDICAL

BESSUDO, ALBERTO

Provider ID: 273486
Board Certified Specialty: No
HEALTH EXCEL IPA INC
326 SANTA FE DR STE 105
ENCINITAS, CA 92024-5157
Phone: (760) 452-3340
Fax: (760) 452-3344
After Hours Phone: (760)
452-3340
Provider Gender: Male
License number: A50309
NPI: 1003888074
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hebrew, Spanish
Cultural Competency: No
Hospital Affiliation: Palomar
Health Downtown Campus, Tri
City Medical Ctr, Scripps
Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

FLORES, EDNA I

Provider ID: 273539
Board Certified Specialty: No
HEALTH EXCEL IPA INC
326 SANTA FE DR STE 105
ENCINITAS, CA 92024-5157
Phone: (760) 452-3340
Fax: (760) 452-3344
After Hours Phone: (760)
452-3340
Provider Gender: Female
License number: A114373
NPI: 1396994604
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Pioneers
Memorial Hospital, Scripps
Memorial Hospital Encinitas,
Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

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D. Directorio de proveedores de atención especializada

FRAKES, LAURIE A , MD

Provider ID: 269133
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
477 N EL CAMINO REAL STE
C204
ENCINITAS, CA 92024-1332
Phone: (760) 452-3340
Fax: (760) 452-3344
After Hours Phone: (760)
452-3340
Provider Gender: Female
License number: A52663
NPI: 1174595144
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr, Scripps Memorial
Hospital, Scripps Memorial
Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

FRAKES, LAURIE A

Provider ID: 273454
Board Certified Specialty: No
HEALTH EXCEL IPA INC
326 SANTA FE DR STE 105
ENCINITAS, CA 92024-5157

Phone: (760) 452-3340
Fax: (760) 452-3344
After Hours Phone: (760)
452-3340
Provider Gender: Female
License number: A52663
NPI: 1174595144
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr, Scripps Memorial
Hospital, Scripps Memorial
Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

MCCLAY, EDWARD F

Provider ID: 276710
Board Certified Specialty: No
HEALTH EXCEL IPA INC
326 SANTA FE DR STE 105
ENCINITAS, CA 92024-5157
Phone: (760) 452-3340
Fax: (760) 452-3344
After Hours Phone: (760)
452-3340
Provider Gender: Male
License number: G64594
NPI: 1497727465
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Tri City
Medical Ctr, Scripps Memorial
Hospital Encinitas, Palomar
Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

MCCLAY, EDWARD F

Provider ID: 54083
Board Certified Specialty: No
CALIFORNIA CANCER
ASSOCS FOR RESEARCH AND
EXCELL
477 N EL CAMINO REAL STE
D200
ENCINITAS, CA 92024-1375
Phone: (760) 452-3340
Fax: (760) 452-3344
After Hours Phone: (760)
452-3340
Provider Gender: Male
License number: G64594
NPI: 1497727465
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr, Scripps Memorial
Hospital Encinitas, Palomar
Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>	<p>IPA: Rady Childrens Health Network</p> <p>ADAMS, MONA N <i>Provider ID:</i> 260961 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 477 N EL CAMINO REAL # 302 ENCINITAS, CA 92024-1328 <i>Phone:</i> (760) 944-5545 <i>Fax:</i> <i>After Hours Phone:</i> (760) 944-5545 <i>Provider Gender:</i> Female <i>License number:</i> OPT14457 <i>NPI:</i> 1942564521 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Grossmont Hospital, Sharp Mary Birch Hosp For Women And Newborns, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Tri City Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Rady Childrens Health Network</p>	<p><i>Phone:</i> (760) 944-5545 <i>Fax:</i> (760) 944-3927 <i>After Hours Phone:</i> (760) 944-5545 <i>Provider Gender:</i> Female <i>License number:</i> A90890 <i>NPI:</i> 1871664631 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Grossmont Hospital, Sharp Mary Birch Hosp For Women And Newborns, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Tri City Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Rady Childrens Health Network</p>
OPHTHALMOLOGY		
<p>ABBOUD, JEAN-PAUL J <i>Provider ID:</i> 214189 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 477 N EL CAMINO REAL STE D302 ENCINITAS, CA 92024-1374 <i>Phone:</i> (760) 944-5545 <i>Fax:</i> (760) 944-3927 <i>After Hours Phone:</i> (760) 944-5545 <i>Provider Gender:</i> Male <i>License number:</i> A124825 <i>NPI:</i> 1760776728 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic, French, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Tri City Medical Ctr, Scripps Memorial Hospital, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i></p>	<p><i>After Hours Phone:</i> (760) 944-5545 <i>Provider Gender:</i> Female <i>License number:</i> OPT14457 <i>NPI:</i> 1942564521 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/99 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Rady Childrens Health Network</p> <p>BANSAL, PREETI <i>Provider ID:</i> 205617 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 477 N EL CAMINO REAL STE D302 ENCINITAS, CA 92024-1374</p>	<p>BANSAL, PREETI <i>Provider ID:</i> 52611 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 477 N EL CAMINO REAL STE D302 ENCINITAS, CA 92024-1374 <i>Phone:</i> (760) 944-5545 <i>Fax:</i> (858) 966-7403 <i>After Hours Phone:</i> (760) 944-5545 <i>Provider Gender:</i> Female <i>License number:</i> A90890</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1871664631

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Grossmont Hospital, Sharp Mary

Birch Hosp For Women And

Newborns, Scripps Mercy

Hospital Chula Vista, Scripps

Memorial Hospital, Tri City

Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

BHATIA, SHAGUN K

Provider ID: 267315

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

477 N EL CAMINO REAL STE

D302

ENCINITAS, CA 92024-1374

Phone: (760) 944-5545

Fax: (760) 944-3927

After Hours Phone: (760)

944-5545

Provider Gender: Female

License number: A154902

NPI: 1104237353

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr, Rady Childrens

Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

CROSBY, MICHELLE B

Provider ID: 85965

Board Certified Specialty: No

HEALTH EXCEL IPA INC

477 N EL CAMINO REAL STE

C202

ENCINITAS, CA 92024-1332

Phone: (760) 257-5550

Fax: (760) 753-5150

After Hours Phone: (760)

257-5550

Provider Gender: Female

License number: A108687

NPI: 1558549303

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital Encinitas,

Grossmont Hospital, Scripps

Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

CULOTTA, ANTHONY J

Provider ID: 268887

Board Certified Specialty: No

HEALTH EXCEL IPA INC

320 SANTA FE DR STE 104

ENCINITAS, CA 92024-5139

Phone: (800) 898-2020

Fax: (844) 897-3788

After Hours Phone: (800)

898-2020

Provider Gender: Male

License number: A97142

NPI: 1497790018

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: East Los

Angeles Doctors Hsp

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

LEE, JASON

Provider ID: 262162

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

477 N EL CAMINO REAL STE

D302

ENCINITAS, CA 92024-1374

Phone: (760) 944-5545

Fax: (760) 944-3927

After Hours Phone: (760)

944-5545

Provider Gender: Male

License number: OPT14881

NPI: 1679985584

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Childrens
Hosp Of Los Angeles, Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/99
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

MCGRAW, JOSEPH P , MD

Provider ID: 269706
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
320 SANTA FE DR STE 104
ENCINITAS, CA 92024-5139
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone: (760)
943-7141
Provider Gender: Male
License number: A155228
NPI: 1588624852
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

MCGRAW, JOSEPH P

Provider ID: 285864
Board Certified Specialty: No
HEALTH EXCEL IPA INC
320 SANTA FE DR STE 104
ENCINITAS, CA 92024-5139
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone: (760)
943-7141
Provider Gender: Male
License number: A155228
NPI: 1588624852
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

MOLL, ANGELA M

Provider ID: 205507
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
477 N EL CAMINO REAL STE
D302
ENCINITAS, CA 92024-1374
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760)
944-5545

Provider Gender: Female
License number: A105472
NPI: 1861648602
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Grossmont Hospital, Sharp
Memorial Hospital, Childrens
Hosp And Resrch Ctr At
Oakland, Scripps Mercy Hospital,
Scripps Mercy Hospital Chula
Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

MOLL, ANGELA M

Provider ID: 52618
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FN D TN
477 N EL CAMINO REAL STE
D302
ENCINITAS, CA 92024-1374
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760)
944-5545
Provider Gender: Female
License number: A105472
NPI: 1861648602
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Rady Childrens Hospital San Diego, Grossmont Hospital, Sharp Memorial Hospital, Childrens Hosp And Resrch Ctr At Oakland, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL): No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

MOVAGHAR, MANSOOR

Provider ID: 216413

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

477 N EL CAMINO REAL STE D302

ENCINITAS, CA 92024-1374

Phone: (760) 944-5545

Fax:

After Hours Phone: (760)

944-5545

Provider Gender: Male

License number: A100897

NPI: 1497792220

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network, Ucsd Medical Group

OHALLORAN, HENRY S

Provider ID: 205886

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

477 N EL CAMINO REAL STE D302

ENCINITAS, CA 92024-1374

Phone: (760) 944-5545

Fax: (760) 944-3927

After Hours Phone: (760)

944-5545

Provider Gender: Male

License number: A73282

NPI: 1235287947

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

OHALLORAN, HENRY S

Provider ID: 52621

Board Certified Specialty: No
RADY CHILDRENS

SPECIALISTS SAN DIEGO MED FNDTN

477 N EL CAMINO REAL STE D302

ENCINITAS, CA 92024-1374

Phone: (760) 944-5545

Fax: (760) 944-3927

After Hours Phone: (760)

944-5545

Provider Gender: Male

License number: A73282

NPI: 1235287947

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL): No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

SCHER, COLIN A

Provider ID: 206326

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

477 N EL CAMINO REAL STE D302

ENCINITAS, CA 92024-1374

Phone: (760) 944-5545

Fax: (760) 944-3927

After Hours Phone: (760)

944-5545

Provider Gender: Male

License number: A42700

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1396816153

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Rady

Childrens Hospital San Diego,

Palomar Medical Center,

Grossmont Hospital, Tri City

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

SCHER, COLIN A

Provider ID: 52624

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED

FNDTN

477 N EL CAMINO REAL STE

D302

ENCINITAS, CA 92024-1374

Phone: (760) 944-5545

Fax: (760) 944-3927

After Hours Phone: (760)

944-5545

Provider Gender: Male

License number: A42700

NPI: 1396816153

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Rady

Childrens Hospital San Diego,

Palomar Medical Center,

Grossmont Hospital, Tri City

Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

SCOTTI, FRANK A

Provider ID: 244904

Board Certified Specialty: Yes

HEALTH EXCEL IPA INC

320 SANTA FE DR STE 104

ENCINITAS, CA 92024-5139

Phone: (760) 943-7141

Fax: (844) 897-3788

After Hours Phone: (760)

943-7141

Provider Gender: Male

License number: G40698

NPI: 1801824313

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Vietnamese

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Scripps

Memorial Hospital Encinitas

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc

SCOTTI, FRANK A , MD

Provider ID: 255689

Board Certified Specialty: Yes

COMMUNITY CARE IPA LLC

320 SANTA FE DR STE 104

ENCINITAS, CA 92024-5139

Phone: (760) 943-7141

Fax: (844) 897-3788

After Hours Phone: (760)

943-7141

Provider Gender: Male

License number: G40698

NPI: 1801824313

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Vietnamese

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Scripps

Memorial Hospital Encinitas

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc

OTOLARYNGOLOGY / OTOLOGY / LARYNGOLOGY / RHINOLOGY

BLISS, MORGAN R

Provider ID: 206085

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

477 N EL CAMINO REAL # 302

ENCINITAS, CA 92024-1328

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760) 944-5545
Provider Gender: Female
License number: A134647
NPI: 1760707657
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

OTOLARYNGOLOGY

BLISS, MORGAN R
Provider ID: 112859
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN
477 N EL CAMINO REAL STE
D302
ENCINITAS, CA 92024-1374
Phone: (760) 944-5545
Fax:
After Hours Phone: (760)
944-5545
Provider Gender: Female
License number: A134647
NPI: 1760707657
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

FRIESEN, TZYYNONG L
Provider ID: 244900
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
477 N EL CAMINO REAL STE
D302
ENCINITAS, CA 92024-1374
Phone: (760) 944-5545
Fax:
After Hours Phone: (760)
944-5545
Provider Gender: Female
License number: A152327
NPI: 1952740177
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

LEUIN, SHELBY C
Provider ID: 206112
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
477 N EL CAMINO REAL STE
D302
ENCINITAS, CA 92024-1374
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760)
944-5545
Provider Gender: Female
License number: A112930
NPI: 1124230909
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Childrens Hosp And Resrch Ctr
At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

LEUIN, SHELBY C
Provider ID: 52722
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN
477 N EL CAMINO REAL STE
D302
ENCINITAS, CA 92024-1374

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (760) 944-5545
 Fax: (760) 944-3927
 After Hours Phone: (760) 944-5545
 Provider Gender: Female
 License number: A112930
 NPI: 1124230909
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Childrens Hosp And Resrch Ctr
 At Oakland
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

NATION, JAVAN J
 Provider ID: 83129
 Board Certified Specialty: No
 RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDTN
 477 N EL CAMINO REAL STE
 D302
 ENCINITAS, CA 92024-1374
 Phone: (760) 944-5545
 Fax: (760) 944-3927
 After Hours Phone: (760)
 944-5545
 Provider Gender: Male
 License number: A125279
 NPI: 1043478902
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No

Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Childrens Hosp And Resrch Ctr
 At Oakland
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

PEDIATRIC ALLERGY / IMMUNOLOGY

GREINER, ALEXANDER N
 Provider ID: 205696
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 477 N EL CAMINO REAL STE
 D302
 ENCINITAS, CA 92024-1374
 Phone: (760) 944-6377
 Fax: (760) 944-3927
 After Hours Phone: (760)
 944-6377
 Provider Gender: Male
 License number: A77327
 NPI: 1609801299
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 French, German, Spanish
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 ♿ Accessibility:

Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

HOFFMAN, HAROLD M
 Provider ID: 206003
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 477 N EL CAMINO REAL STE
 D302
 ENCINITAS, CA 92024-1374
 Phone: (760) 944-5545
 Fax: (760) 944-3927
 After Hours Phone: (760)
 944-5545

Provider Gender: Male
 License number: A53101
 NPI: 1326074261
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr, Rady Childrens Hospital San
 Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

LAUBACH, SUSAN S
 Provider ID: 205801
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

477 N EL CAMINO REAL STE
D302
ENCINITAS, CA 92024-1374
Phone: (858) 966-6377
Fax: (760) 944-3927
After Hours Phone: (858)
966-6377
Provider Gender: Female
License number: A114061
NPI: 1366656209
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital,
Childrens Hosp And Resrch Ctr
At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

PEDIATRIC CARDIOLOGY

FAGAN, BRIAN T
Provider ID: 205344
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
477 N EL CAMINO REAL STE
D302
ENCINITAS, CA 92024-1374
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760)
944-5545
Provider Gender: Male

License number: A82153
NPI: 1740308550
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: San Gabriel
Valley Med Ctr, California Hosp
Med Ctr Los Angeles, Emanate
Health Inter-Community Hospital,
Rady Childrens Hospital San
Diego, Huntington Memorial
Hospital, Emanate Health Queen
Of The Valley Hospital, Childrens
Hosp And Resrch Ctr At
Oakland, Childrens Hosp Of Los
Angeles
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

HALEY, JESSICA E
Provider ID: 205688
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
477 N EL CAMINO REAL STE
D302
ENCINITAS, CA 92024-1374
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760)
944-5545
Provider Gender: Female
License number: A125568
NPI: 1023329885
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

HEGDE, SANJEET R
Provider ID: 206077
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
477 N EL CAMINO REAL STE
D302
ENCINITAS, CA 92024-1374
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760)
944-5545
Provider Gender: Male
License number: A112326
NPI: 1306036884
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health

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D. Directorio de proveedores de atención especializada

Network

SILVA SEPULVEDA, JOSE A

Provider ID: 206299
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
477 N EL CAMINO REAL STE D302
ENCINITAS, CA 92024-1374
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760) 944-5545
Provider Gender: Male
License number: A120119
NPI: 1417222472
Provider English Spoken: Yes
Provider Language(s) Spoken: German, Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility: No
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s): Rady Childrens Health Network

PEDIATRIC DERMATOLOGY

DOHIL, MAGDALENE A

Provider ID: 205417
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
477 N EL CAMINO REAL STE D302
ENCINITAS, CA 92024-1374

Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760) 944-5545
Provider Gender: Female
License number: A86265
NPI: 1528139383
Provider English Spoken: Yes
Provider Language(s) Spoken: German, Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Sharp Memorial Hospital, Sharp Mary Birch Hosp For Women And Newborns
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility: No
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s): Rady Childrens Health Network

METTERLE, LAUREN M

Provider ID: 284659
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
477 N EL CAMINO REAL STE D302
ENCINITAS, CA 92024-1374
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760) 944-5545
Provider Gender: Female
License number: A169271
NPI: 1033572391
Provider English Spoken: Yes

Provider Language(s) Spoken: No
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility: No
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s): Rady Childrens Health Network

PEDIATRIC ENDOCRINOLOGY

DEMETERCO BERGGREN, CARLA

Provider ID: 206160
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
477 N EL CAMINO REAL STE D302
ENCINITAS, CA 92024-1374
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760) 944-5545
Provider Gender: Female
License number: A98629
NPI: 1619130655
Provider English Spoken: Yes
Provider Language(s) Spoken: No
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility: No
Hours: M-SA 9AM-5PM

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D. Directorio de proveedores de atención especializada

Website:
Email:
Medical Group(s):
 IPA: Rady Childrens Health Network

GOTTSCHALK, MICHAEL E

Provider ID: 205776
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 477 N EL CAMINO REAL STE D302
 ENCINITAS, CA 92024-1374
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760) 944-5545
Provider Gender: Male
License number: G55424
NPI: 1033280888
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No

Ⓜ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Rady Childrens Health Network

NEWFIELD, RON S

Provider ID: 205371
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 477 N EL CAMINO REAL STE D302

ENCINITAS, CA 92024-1374
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760) 944-5545
Provider Gender: Male
License number: A73875
NPI: 1679644421
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Ucsd Medical Ctr, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No

Ⓜ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Rady Childrens Health Network

PEDIATRIC GASTROENTEROLOGY

NEWTON, KIMBERLY P
Provider ID: 205360
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 477 N EL CAMINO REAL STE D302
 ENCINITAS, CA 92024-1374
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760) 944-5545
Provider Gender: Female
License number: A101980
NPI: 1912071655

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Naval Medical Ctr Sd Rbe
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 Ⓜ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Rady Childrens Health Network

NEWTON, KIMBERLY P
Provider ID: 52263
Board Certified Specialty: No
 RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN

477 N EL CAMINO REAL STE D302
 ENCINITAS, CA 92024-1374
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760) 944-5545
Provider Gender: Female
License number: A101980
NPI: 1912071655
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Naval Medical Ctr Sd Rbe
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):

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D. Directorio de proveedores de atención especializada

<p>No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network</p>	<p>CERNELC KOHAN, MATEJKA <i>Provider ID:</i> 243043 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 477 N EL CAMINO REAL STE D302 ENCINITAS, CA 92024-1374 <i>Phone:</i> (760) 944-5545 <i>Fax:</i> (760) 944-3927 <i>After Hours Phone:</i> (760) 944-5545 <i>Provider Gender:</i> Female <i>License number:</i> A116947 <i>NPI:</i> 1871752451 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Childrens Hosp And Resrch Ctr At Oakland, Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network</p>	<p><i>Phone:</i> (760) 633-6120 <i>Fax:</i> <i>After Hours Phone:</i> (760) 633-6120 <i>Provider Gender:</i> Female <i>License number:</i> A155419 <i>NPI:</i> 1528454188 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network</p>
PEDIATRIC ORTHOPEDICS		
<p>WALLACE, CHARLES D <i>Provider ID:</i> 205660 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 477 N EL CAMINO REAL STE D302 ENCINITAS, CA 92024-1374 <i>Phone:</i> (858) 966-6789 <i>Fax:</i> (760) 944-3927 <i>After Hours Phone:</i> (858) 966-6789 <i>Provider Gender:</i> Male <i>License number:</i> G67953 <i>NPI:</i> 1144229600 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Doctors Hospital Of Riverside Llc <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network</p>	<p>GOTTSCHALK, MICHAEL E <i>Provider ID:</i> 52048 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDDTN 477 N EL CAMINO REAL STE D302 ENCINITAS, CA 92024-1374 <i>Phone:</i> (760) 944-5545 <i>Fax:</i> (760) 944-3927 <i>After Hours Phone:</i> (760) 944-5545 <i>Provider Gender:</i> Male <i>License number:</i> G55424 <i>NPI:</i> 1033280888 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego</p>	
PEDIATRICS		
<p>BAI-TONG, SHIYU S <i>Provider ID:</i> 283286 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 354 SANTA FE DR ENCINITAS, CA 92024-5142</p>		
PEDIATRIC PULMONOLOGY		

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D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

WELCH, MICHAEL J

Provider ID: 54278

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED
FNDTN

477 N EL CAMINO REAL STE
D302

ENCINITAS, CA 92024-1374

Phone: (760) 944-5545

Fax:

After Hours Phone: (760)

944-5545

Provider Gender: Male

License number: G34844

NPI: 1699794222

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

PHYSICAL MEDICINE / REHABILITATION

BELNAP, BRIAN D

Provider ID: 92105

Board Certified Specialty: No

WEST COAST PAIN

SPECIALISTS

4405 MANCHESTER AVE STE
101

ENCINITAS, CA 92024-4940

Phone: (760) 650-4040

Fax:

After Hours Phone: (760)

650-4040

Provider Gender: Male

License number: 20A10439

NPI: 1457360448

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital Encinitas

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M 8:30AM-5PM, TU-TH
8AM-5PM, F 8AM-12PM, SA
9AM-5PM

Website: wcpainfree.com

Email:

Medical Group(s):

IPA:

LEE, HAEWON

Provider ID: 256227

Board Certified Specialty: No

UCSD MEDICAL GROUP

477 N EL CAMINO REAL STE
C100

ENCINITAS, CA 92024-1332

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)
926-8273

Provider Gender: Female

License number: A161567

NPI: 1447661657

Provider English Spoken: Yes

Provider Language(s) Spoken:

Korean

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

PHYSICIANS ASSISTANT

ASARO, AMANDA M

Provider ID: 260262

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

477 N EL CAMINO REAL STE
D302

ENCINITAS, CA 92024-1374

Phone: (858) 966-6789

Fax: (760) 944-3927

After Hours Phone: (858)

966-6789

Provider Gender: Female

License number: PA18493

NPI: 1306961313

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

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D. Directorio de proveedores de atención especializada

Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

CLARK, YVONNE L

Provider ID: 260063
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
477 N EL CAMINO REAL # 302
ENCINITAS, CA 92024-1328
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760)
944-5545
Provider Gender: Female
License number: PA20447
NPI: 1629302476
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

DICKINSON, ALLISON J

Provider ID: 260626
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
477 N EL CAMINO REAL STE
D302
ENCINITAS, CA 92024-1374
Phone: (858) 966-6377
Fax: (760) 944-3927
After Hours Phone: (858)
966-6377
Provider Gender: Female
License number: PA17163
NPI: 1972655389
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

DOMINGUEZ, KATHLEEN H

Provider ID: 270355
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
477 N EL CAMINO REAL STE
B105
ENCINITAS, CA 92024-1330
Phone: (760) 753-7143
Fax: (760) 753-2155
After Hours Phone: (760)
753-7143

Provider Gender: Female
License number: PA17714
NPI: 1689784530
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

DOUGHERTY, CLARA, NPA

Provider ID: 269171
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
320 SANTA FE DR STE 108
ENCINITAS, CA 92024-5141
Phone: (760) 436-4558
Fax:
After Hours Phone: (760)
436-4558
Provider Gender: Female
License number: PA17439
NPI: 1609987619
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

DOUGHERTY, CLARA

Provider ID: 56020
Board Certified Specialty: No
GENESIS HEALTHCARE
PARTNERS PC
320 SANTA FE DR STE 108
ENCINITAS, CA 92024-5141
Phone: (760) 436-4558
Fax:
After Hours Phone: (760)
436-4558
Provider Gender: Female
License number: PA17439
NPI: 1609987619
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

FLOCO, VIRGINIA A

Provider ID: 260683
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
477 N EL CAMINO REAL # 302
ENCINITAS, CA 92024-1328

Phone: (760) 944-5545
Fax:
After Hours Phone: (760)
944-5545
Provider Gender: Female
License number: PA20788
NPI: 1982798112
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

GILLAN, JAMES K

Provider ID: 270545
Board Certified Specialty: No
HEALTH EXCEL IPA INC
320 SANTA FE DR STE 107-C
ENCINITAS, CA 92024-5139
Phone: (760) 230-8994
Fax: (760) 944-1309
After Hours Phone: (760)
230-8994
Provider Gender: Male
License number: PA18037
NPI: 1194832634
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):

No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

HEINEN, JOHN P

Provider ID: 252982
Board Certified Specialty: No
HEALTH EXCEL IPA INC
354 SANTA FE DR
ENCINITAS, CA 92024-5142
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760)
631-3000
Provider Gender: Male
License number: PA10565
NPI: 1427096643
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/200
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

LAZAR, ANITA A

Provider ID: 262301
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
477 N EL CAMINO REAL STE
D302
ENCINITAS, CA 92024-1374

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760) 944-5545
Provider Gender: Female
License number: PA55984
NPI: 1609208198
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/99
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

MCCAULEY, KRISTINA R

Provider ID: 262243
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
477 N EL CAMINO REAL # 302
ENCINITAS, CA 92024-1328
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760)
944-5545
Provider Gender: Female
License number: PA52100
NPI: 1063819944
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/99

American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

MUNCH, LINH D

Provider ID: 260089
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
477 N EL CAMINO REAL STE
D302
ENCINITAS, CA 92024-1374
Phone: (858) 966-6377
Fax: (760) 944-3927
After Hours Phone: (858)
966-6377
Provider Gender: Female
License number: PA14223
NPI: 1679792725
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

NORMAN, STACY T

Provider ID: 208078
Board Certified Specialty: No

HEALTH EXCEL IPA INC
477 N EL CAMINO REAL STE
D308
ENCINITAS, CA 92024-1370
Phone: (760) 436-2300
Fax: (760) 436-5482
After Hours Phone: (760)
436-2300
Provider Gender: Female
License number: PA17505
NPI: 1417146655
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

NORMAN, STACY T , NPA

Provider ID: 243430
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
477 N EL CAMINO REAL STE
D308
ENCINITAS, CA 92024-1370
Phone: (760) 436-2300
Fax: (760) 436-5482
After Hours Phone: (760)
436-2300
Provider Gender: Female
License number: PA17505
NPI: 1417146655
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:

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D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

PAIK, CHRISTINA N

Provider ID: 262431
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
477 N EL CAMINO REAL # D392
ENCINITAS, CA 92024-1328
Phone: (858) 966-6789
Fax: (760) 944-3927
After Hours Phone: (858)
966-6789
Provider Gender: Female
License number: PA21680
NPI: 1174811475
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

SANCHEZ, RAQUEL

Provider ID: 262630

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
477 N EL CAMINO REAL STE
D302
ENCINITAS, CA 92024-1374
Phone: (858) 966-6377
Fax: (760) 944-3927
After Hours Phone: (858)
966-6377
Provider Gender: Female
License number: PA14357
NPI: 1356560650
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

SUTTON, BRIAN C

Provider ID: 272241
Board Certified Specialty: No
UCSD MEDICAL GROUP
1200 GARDEN VIEW RD STE
200
ENCINITAS, CA 92024-2475
Phone: (760) 598-1776
Fax: (760) 598-5744
After Hours Phone: (760)
598-1776
Provider Gender: Male
License number: PA18573
NPI: 1629174727
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

VANETSKY, GARY E

Provider ID: 108458
Board Certified Specialty: Yes
WEST DERMATOLOGY AND
SURG MED GRP
477 N EL CAMINO REAL STE
D308
ENCINITAS, CA 92024-1370
Phone: (760) 436-2300
Fax:
After Hours Phone: (760)
436-2300
Provider Gender: Male
License number: PA15456
NPI: 1417034489
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

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D. Directorio de proveedores de atención especializada

VANETSKY, GARY E

Provider ID: 209318
Board Certified Specialty: No
HEALTH EXCEL IPA INC
 477 N EL CAMINO REAL STE
 D308
 ENCINITAS, CA 92024-1370
Phone: (760) 436-2300
Fax: (760) 436-5482
After Hours Phone: (760)
 436-2300
Provider Gender: Male
License number: PA15456
NPI: 1417034489
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc

VANETSKY, GARY E , NPA

Provider ID: 269152
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 477 N EL CAMINO REAL STE
 D308
 ENCINITAS, CA 92024-1370
Phone: (760) 436-2300
Fax: (760) 436-5482
After Hours Phone: (760)
 436-2300
Provider Gender: Male
License number: PA15456
NPI: 1417034489

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc

VILLAPANDO, NORMA O

Provider ID: 264058
Board Certified Specialty: No
**RADY CHILDRENS HEALTH
 NETWORK**
 477 N EL CAMINO REAL STE
 D302
 ENCINITAS, CA 92024-1374
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760)
 944-5545
Provider Gender: Female
License number: PA56098
NPI: 1376947960
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health

Network

PODIATRIST

DUSTIN, ADAM F

Provider ID: 275800
Board Certified Specialty: No
UCSD MEDICAL GROUP
 326 ENCINITAS BLVD STE 100
 ENCINITAS, CA 92024-8703
Phone: (760) 436-5533
Fax: (760) 436-0611
After Hours Phone: (760)
 436-5533
Provider Gender: Male
License number: DPM4254
NPI: 1043389026
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

PULMONARY DISEASES

GADRE, ABHISHEK

Provider ID: 282153
Board Certified Specialty: No
HEALTH EXCEL IPA INC
 326 SANTA FE DR STE 100
 ENCINITAS, CA 92024-5157

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D. Directorio de proveedores de atención especializada

Phone: (760) 230-8994
Fax: (760) 944-1309
After Hours Phone: (760)
230-8994

Provider Gender: Male
License number: A153850
NPI: 1013322056

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 18/199

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

HSING, ANDREW Y

Provider ID: 259606

Board Certified Specialty: No
HEALTH EXCEL IPA INC

320 SANTA FE DR STE 107C
ENCINITAS, CA 92024-5139

Phone: (760) 230-8994

Fax: (760) 944-1309

After Hours Phone: (760)

230-8994

Provider Gender: Male

License number: A127271

NPI: 1790769131

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital Encinitas

Medi-Cal Open Panel: Yes

Min/Max Age: 18/199

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

LIANG, NI CHENG

Provider ID: 259639

Board Certified Specialty: No

HEALTH EXCEL IPA INC

320 SANTA FE DR STE 107C

ENCINITAS, CA 92024-5139

Phone: (760) 230-8994

Fax: (760) 944-1309

After Hours Phone: (760)

230-8994

Provider Gender: Female

License number: A98510

NPI: 1760666945

Provider English Spoken: Yes

Provider Language(s) Spoken:

Mandarin, Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Scripps Memorial Hospital

Encinitas

Medi-Cal Open Panel: Yes

Min/Max Age: 18/199

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

MAGANA, MARISA M

Provider ID: 259598

Board Certified Specialty: Yes

HEALTH EXCEL IPA INC

320 SANTA FE DR STE 107C

ENCINITAS, CA 92024-5139

Phone: (760) 230-8994

Fax: (760) 944-1309

After Hours Phone: (760)

230-8994

Provider Gender: Female

License number: A94464

NPI: 1194856286

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Scripps

Memorial Hospital Encinitas,

Ucsd Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 18/199

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

MAKANI, SAMIR S

Provider ID: 259603

Board Certified Specialty: No

HEALTH EXCEL IPA INC

320 SANTA FE DR STE 107C

ENCINITAS, CA 92024-5139

Phone: (760) 230-8994

Fax: (760) 944-1309

After Hours Phone: (760)

230-8994

Provider Gender: Male

License number: A90479

NPI: 1043385685

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Scripps

Memorial Hospital Encinitas

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D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes
Min/Max Age: 18/199
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

SARNOFF, ROBERT B

Provider ID: 259596
Board Certified Specialty: No
HEALTH EXCEL IPA INC
320 SANTA FE DR STE 107C
ENCINITAS, CA 92024-5139
Phone: (760) 230-8994
Fax: (760) 944-1309
After Hours Phone: (760)
230-8994
Provider Gender: Male
License number: G36472
NPI: 1083671960
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Scripps
Green Hospital, Scripps
Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 18/199
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

RADIATION ONCOLOGY

MACEWAN, IAIN J

Provider ID: 205876
Board Certified Specialty: No
UCSD MEDICAL GROUP
1200 GARDEN VIEW RD STE
210
ENCINITAS, CA 92024-2475
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A129079
NPI: 1326300401
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr, Ucsd La Jolla
John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Rady Childrens Health Network,
Ucsd Medical Group

RASH, DOMINIQUE L

Provider ID: 108346
Board Certified Specialty: No
UCSD RADIATION ONCOLOGY
1200 GARDEN VIEW RD STE
210
ENCINITAS, CA 92024-2475
Phone: (858) 246-0500
Fax:
After Hours Phone: (858)
246-0500
Provider Gender: Female

License number: A116999
NPI: 1699908640
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Methodist
Hosp Of Sacramento, Mercy
Hospital Of Folsom, Mercy
General Hospital, Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton, Scripps Green
Hospital, Tri City Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ROSE, BRENT S

Provider ID: 113904
Board Certified Specialty: No
UCSD RADIATION ONCOLOGY
1200 GARDEN VIEW RD STE
210
ENCINITAS, CA 92024-2475
Phone: (858) 246-0500
Fax:
After Hours Phone: (858)
246-0500
Provider Gender: Male
License number: A142735
NPI: 1518250869
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc,
 Imperial Health Holdings Medical
 Group-Sd

URBANIC, JAMES J

Provider ID: 87271
Board Certified Specialty: No
 UCSD RADIATION ONCOLOGY
 1200 GARDEN VIEW RD STE
 210
 ENCINITAS, CA 92024-2475
Phone: (858) 246-0500
Fax: (858) 246-0501
After Hours Phone: (858)
 246-0500
Provider Gender: Male
License number: C131112
NPI: 1164607875
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Tri City Medical Ctr, Scripps
 Memorial Hospital Encinitas
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA:

RADIOLOGY DIAGNOSTIC X-RAY

ALLEN, DERRICK R
Provider ID: 125985
Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL
 GROUP INC
 477 N EL CAMINO REAL # 102
 ENCINITAS, CA 92024-1328
Phone: (760) 452-7150
Fax: (760) 632-5389
After Hours Phone: (760)
 452-7150
Provider Gender: Male
License number: A69840
NPI: 1215982970
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital Chula Vista, Scripps
 Mercy Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc

ALLEN, DERRICK R , MD
Provider ID: 268358
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 477 N EL CAMINO REAL STE
 A102
 ENCINITAS, CA 92024-1329
Phone: (760) 452-7150
Fax: (866) 558-4329
After Hours Phone: (760)
 452-7150
Provider Gender: Male
License number: A69840
NPI: 1215982970

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital, Scripps Mercy Hospital
 Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc

ANDERSON, GREGORY S
Provider ID: 125983
Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL
 GROUP INC
 477 N EL CAMINO REAL # 102
 ENCINITAS, CA 92024-1328
Phone: (760) 452-7150
Fax:
After Hours Phone: (760)
 452-7150
Provider Gender: Male
License number: A90018
NPI: 1841467099
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital, Scripps Mercy Hospital
 Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<i>Email:</i>	<i>Phone:</i> (760) 452-7150	Chula Vista
<i>Medical Group(s):</i>	<i>Fax:</i> (760) 632-5389	<i>Medi-Cal Open Panel:</i> Yes
<i>IPA:</i>	<i>After Hours Phone:</i> (760) 452-7150	<i>Min/Max Age:</i> 0/999
BAKER, LORI L	<i>Provider Gender:</i> Female	<i>American Sign Language (ASL):</i> No
<i>Provider ID:</i> 125992	<i>License number:</i> A97134	<i>♿ Accessibility:</i>
<i>Board Certified Specialty:</i> No	<i>NPI:</i> 1548473507	<i>Hours:</i> M-SA 9AM-5PM
IHS RADIOLOGY MEDICAL GROUP INC	<i>Provider English Spoken:</i> Yes	<i>Website:</i>
477 N EL CAMINO REAL # 102	<i>Provider Language(s) Spoken:</i>	<i>Email:</i>
ENCINITAS, CA 92024-1328	<i>Cultural Competency:</i> No	<i>Medical Group(s):</i>
<i>Phone:</i> (760) 452-7150	<i>Hospital Affiliation:</i> Scripps Green Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Ucsd Medical Ctr	<i>IPA:</i> Community Care Ipa Llc
<i>Fax:</i> (760) 632-5389	<i>Medi-Cal Open Panel:</i> No	CHOU, ERIC T
<i>After Hours Phone:</i> (760) 452-7150	<i>Min/Max Age:</i> None	<i>Provider ID:</i> 126011
<i>Provider Gender:</i> Female	<i>American Sign Language (ASL):</i> No	<i>Board Certified Specialty:</i> No
<i>License number:</i> G62517	<i>♿ Accessibility:</i> W	IHS RADIOLOGY MEDICAL GROUP INC
<i>NPI:</i> 1063465219	<i>Hours:</i> M-SA 9AM-5PM	477 N EL CAMINO REAL # 102
<i>Provider English Spoken:</i> Yes	<i>Website:</i>	ENCINITAS, CA 92024-1328
<i>Provider Language(s) Spoken:</i>	<i>Email:</i>	<i>Phone:</i> (760) 452-7150
<i>Cultural Competency:</i> No	<i>Medical Group(s):</i>	<i>Fax:</i> (760) 632-5389
<i>Hospital Affiliation:</i> Scripps Mercy Hospital, Medical Ctr At Ucsf, Scripps Mercy Hospital Chula Vista	<i>IPA:</i>	<i>After Hours Phone:</i> (760) 452-7150
<i>Medi-Cal Open Panel:</i> No	BUCKLEY, DAVID W	<i>Provider Gender:</i> Male
<i>Min/Max Age:</i> None	<i>Provider ID:</i> 243264	<i>License number:</i> A96095
<i>American Sign Language (ASL):</i> No	<i>Board Certified Specialty:</i> No	<i>NPI:</i> 1689627838
<i>♿ Accessibility:</i> W	COMMUNITY CARE IPA LLC	<i>Provider English Spoken:</i> Yes
<i>Hours:</i> M-SA 9AM-5PM	477 N EL CAMINO REAL STE A102	<i>Provider Language(s) Spoken:</i>
<i>Website:</i>	ENCINITAS, CA 92024-1329	<i>Cultural Competency:</i> No
<i>Email:</i>	<i>Phone:</i> (760) 452-7150	<i>Hospital Affiliation:</i> Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
<i>Medical Group(s):</i>	<i>Fax:</i> (866) 558-4329	<i>Medi-Cal Open Panel:</i> No
<i>IPA:</i>	<i>After Hours Phone:</i> (760) 452-7150	<i>Min/Max Age:</i> None
BORSO, MAYA G	<i>Provider Gender:</i> Male	<i>American Sign Language (ASL):</i> No
<i>Provider ID:</i> 126005	<i>License number:</i> G57383	<i>♿ Accessibility:</i> W
<i>Board Certified Specialty:</i> No	<i>NPI:</i> 1982657060	<i>Hours:</i> M-SA 9AM-5PM
IHS RADIOLOGY MEDICAL GROUP INC	<i>Provider English Spoken:</i> Yes	<i>Website:</i>
477 N EL CAMINO REAL # 102	<i>Provider Language(s) Spoken:</i> Spanish	<i>Email:</i>
ENCINITAS, CA 92024-1328	<i>Cultural Competency:</i> No	<i>Medical Group(s):</i>
	<i>Hospital Affiliation:</i> Scripps Mercy Hospital, Scripps Mercy Hospital	<i>IPA:</i> Community Care Ipa Llc
	COOPER, JAMES A	
	<i>Provider ID:</i> 126040	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC
477 N EL CAMINO REAL # 102
ENCINITAS, CA 92024-1328
Phone: (760) 452-7150
Fax: (760) 632-5389
After Hours Phone: (760)
452-7150
Provider Gender: Male
License number: A62473
NPI: 1497708622
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Pomerado
Hospital, Scripps Mercy Hospital,
Scripps Mercy Hospital Chula
Vista, East Los Angeles Doctors
Hsp, Memorial Hosp Of Gardena
Inc, Riverside Community Hosp,
Palmdale Regional Medical
Center, Barstow Community
Hospital, Kindred Hospital South
Bay, Loma Linda University Med
Ctr Murrieta
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

DOEMENY, JOHN M

Provider ID: 126047
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC
477 N EL CAMINO REAL # 102
ENCINITAS, CA 92024-1328

Phone: (760) 452-7150
Fax: (760) 632-5389
After Hours Phone: (760)
452-7150
Provider Gender: Male
License number: G50925
NPI: 1841243912
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

FIROOZNI, NILOFAR

Provider ID: 126169
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC
477 N EL CAMINO REAL # 102
ENCINITAS, CA 92024-1328
Phone: (760) 452-7150
Fax:
After Hours Phone: (760)
452-7150
Provider Gender: Female
License number: A109806
NPI: 1962521419
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado
Hospital Llc, Redlands
Community Hosp, Barstow
Community Hospital, Kindred

Hospital Riverside, Victor Valley
Global Med Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FRANKE, MARK A

Provider ID: 126053
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC
477 N EL CAMINO REAL # 102
ENCINITAS, CA 92024-1328
Phone: (760) 452-7150
Fax:
After Hours Phone: (760)
452-7150
Provider Gender: Male
License number: A118792
NPI: 1114246329
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Santa Monica
Ucla Med Ctr, Ronald Reagan
Ucla Med Ctr, Alvarado Hospital
Llc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

HARMAN, SCOTT A

Provider ID: 126066
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
477 N EL CAMINO REAL # 102
ENCINITAS, CA 92024-1328
Phone: (760) 452-7150
Fax: (760) 632-5389
After Hours Phone: (760) 452-7150
Provider Gender: Male
License number: G57284
NPI: 1124071311
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

JOHNSON, JOHN O

Provider ID: 126077
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
477 N EL CAMINO REAL # 102
ENCINITAS, CA 92024-1328
Phone: (760) 452-7150
Fax: (760) 632-5389
After Hours Phone: (760) 452-7150
Provider Gender: Male
License number: G59632
NPI: 1073565792

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LIZERBRAM, ERIC K

Provider ID: 126091
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
477 N EL CAMINO REAL # 102
ENCINITAS, CA 92024-1328
Phone: (760) 452-7150
Fax: (760) 632-5389
After Hours Phone: (760) 452-7150
Provider Gender: Male
License number: G74959
NPI: 1598718926

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA:

LUBISICH, JOHN P

Provider ID: 126097
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
477 N EL CAMINO REAL # 102
ENCINITAS, CA 92024-1328
Phone: (760) 452-7150
Fax: (760) 632-5389
After Hours Phone: (760) 452-7150
Provider Gender: Male
License number: G77575
NPI: 1194863902

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MOFFIT, BRIAN J

Provider ID: 126118
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
477 N EL CAMINO REAL # 102
ENCINITAS, CA 92024-1328

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (760) 452-7150
Fax: (760) 632-5389
After Hours Phone: (760) 452-7150

Provider Gender: Male
License number: G51551
NPI: 1508817305
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

OLOUGHLIN, BRIAN J

Provider ID: 126124
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
477 N EL CAMINO REAL # 102
ENCINITAS, CA 92024-1328
Phone: (760) 452-7150
Fax:
After Hours Phone: (760) 452-7150
Provider Gender: Male
License number: A120064
NPI: 1972709087
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Santa Monica Ucla Med Ctr, Alvarado Hospital Llc, Scripps Memorial Hospital,

Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Scripps Green Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

OSHAUGHNESSY, LOUISE S

Provider ID: 126130
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
477 N EL CAMINO REAL # 102
ENCINITAS, CA 92024-1328
Phone: (760) 452-7150
Fax: (760) 632-5389
After Hours Phone: (760) 452-7150
Provider Gender: Female
License number: G48800
NPI: 1285685925
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SCHECHTER, MARK S

Provider ID: 126136
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
477 N EL CAMINO REAL # 102
ENCINITAS, CA 92024-1328
Phone: (760) 452-7150
Fax: (760) 632-5389
After Hours Phone: (760) 452-7150
Provider Gender: Male
License number: G42390
NPI: 1942253018
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, El Centro Regional Medical Center, Selma Community Hospital, Adventist Medical Center, Adventist Med Ctr Reedley, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SCHWARTZBERG, ROSS E

Provider ID: 126143
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
477 N EL CAMINO REAL # 102
ENCINITAS, CA 92024-1328

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (760) 452-7150
Fax: (760) 632-5389
After Hours Phone: (760) 452-7150
Provider Gender: Male
License number: G72997
NPI: 1215976766
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SNYDER, WILLIAM C

Provider ID: 126150
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
477 N EL CAMINO REAL # 102
ENCINITAS, CA 92024-1328
Phone: (760) 452-7150
Fax: (866) 558-4329
After Hours Phone: (760) 452-7150
Provider Gender: Male
License number: A65059
NPI: 1477505162
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):

No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:
SPOTO, GARY P
Provider ID: 126156
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
477 N EL CAMINO REAL # 102
ENCINITAS, CA 92024-1328
Phone: (760) 452-7150
Fax: (760) 632-5389
After Hours Phone: (760) 452-7150
Provider Gender: Male
License number: G58131
NPI: 1659332062
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas, Scripps Green Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

TENA, ROWENA G

Provider ID: 126162
Board Certified Specialty: No

IHS RADIOLOGY MEDICAL GROUP INC
477 N EL CAMINO REAL # 102
ENCINITAS, CA 92024-1328
Phone: (760) 452-7150
Fax: (760) 632-5389
After Hours Phone: (760) 452-7150
Provider Gender: Female
License number: A69607
NPI: 1629029335
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Vibra Hospital Of San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

TOBIN, MICHAEL L

Provider ID: 126215
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
477 N EL CAMINO REAL # 102
ENCINITAS, CA 92024-1328
Phone: (760) 452-7150
Fax: (760) 632-5389
After Hours Phone: (760) 452-7150
Provider Gender: Male
License number: A45908
NPI: 1730132150
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p><i>Provider Language(s) Spoken:</i> No <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>	<p><i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>	<p>DOEMENY, JOHN M <i>Provider ID:</i> 269750 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 477 N EL CAMINO REAL STE A102 ENCINITAS, CA 92024-1329 <i>Phone:</i> (760) 452-7150 <i>Fax:</i> (866) 558-4329 <i>After Hours Phone:</i> (760) 452-7150 <i>Provider Gender:</i> Male <i>License number:</i> G50925 <i>NPI:</i> 1841243912 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc</p>
<p>TSUKADA, GLENN H <i>Provider ID:</i> 126200 <i>Board Certified Specialty:</i> No IHS RADIOLOGY MEDICAL GROUP INC 477 N EL CAMINO REAL # 102 ENCINITAS, CA 92024-1328 <i>Phone:</i> (760) 452-7150 <i>Fax:</i> (760) 632-5389 <i>After Hours Phone:</i> (760) 452-7150 <i>Provider Gender:</i> Male <i>License number:</i> A60235 <i>NPI:</i> 1710938394 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Pomerado Hospital, Alvarado Hospital Llc, Scripps Memorial Hospital, Grossmont Hospital, Scripps Mercy Hospital, Ucsd Medical Ctr, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Scripps Green Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i></p>	<p>ZINK BRODY, GORDON C <i>Provider ID:</i> 126193 <i>Board Certified Specialty:</i> No IHS RADIOLOGY MEDICAL GROUP INC 477 N EL CAMINO REAL # 102 ENCINITAS, CA 92024-1328 <i>Phone:</i> (760) 452-7150 <i>Fax:</i> (760) 632-5389 <i>After Hours Phone:</i> (760) 452-7150 <i>Provider Gender:</i> Male <i>License number:</i> G68636 <i>NPI:</i> 1689610362 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Alvarado Hospital Llc, Oak Valley Dist Hosp, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Scripps Green Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>	<p>FRANKE, MARK A <i>Provider ID:</i> 269635 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 477 N EL CAMINO REAL STE A102 ENCINITAS, CA 92024-1329 <i>Phone:</i> (760) 452-7150 <i>Fax:</i> (866) 558-4329 <i>After Hours Phone:</i> (760) 452-7150 <i>Provider Gender:</i> Male <i>License number:</i> A118792 <i>NPI:</i> 1114246329</p>
<hr/> RADIOLOGY <hr/>		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Santa Monica
Ucla Med Ctr, Ronald Reagan
Ucla Med Ctr, Alvarado Hospital
Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MOFFIT, BRIAN J

Provider ID: 269524
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
477 N EL CAMINO REAL STE
A102
ENCINITAS, CA 92024-1329
Phone: (760) 452-7150
Fax: (866) 558-4329
After Hours Phone: (760)
452-7150
Provider Gender: Male
License number: G51551
NPI: 1508817305
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc
SCHWARTZBERG, ROSS E
Provider ID: 245629
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
477 N EL CAMINO REAL STE
A102
ENCINITAS, CA 92024-1329
Phone: (760) 452-7150
Fax:
After Hours Phone: (760)
452-7150
Provider Gender: Male
License number: G72997
NPI: 1215976766

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado
Hospital Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

TENA, ROWENA G , MD

Provider ID: 269824
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
477 N EL CAMINO REAL # 102
ENCINITAS, CA 92024-1328
Phone: (760) 452-7150
Fax: (866) 558-4329
After Hours Phone: (760)
452-7150

Provider Gender: Female
License number: A69607
NPI: 1629029335
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista, Vibra Hospital Of
San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

REGISTERED PHYSICAL THERAPIST

SIMMONS, JESSE J

Provider ID: 130044
Board Certified Specialty: No
SAN DIEGO SPINE AND
SPORT INC
201 S EL CAMINO REAL STE A
ENCINITAS, CA 92024-4150
Phone: (855) 344-5870
Fax:
After Hours Phone: (855)
344-5870
Provider Gender: Male
License number: PT40517
NPI: 1467888065
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None

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D. Directorio de proveedores de atención especializada

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-F 7AM-6PM, SA
9AM-5PM

Website:

www.spineandsport.com

Email:

Medical Group(s):

IPA:

RHEUMATOLOGY

CHANG, JOHANNA C

Provider ID: 246395

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

477 N EL CAMINO REAL STE
D302

ENCINITAS, CA 92024-1374

Phone: (760) 944-5545

Fax:

After Hours Phone: (760)
944-5545

Provider Gender: Female

License number: A98479

NPI: 1821242199

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

REDDY, DANA A

Provider ID: 262364

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD

230 2ND ST STE 102

ENCINITAS, CA 92024-3275

Phone: (619) 427-1721

Fax: (619) 427-1235

After Hours Phone: (619)
427-1721

Provider Gender: Female

License number: A115598

NPI: 1144538778

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp Chula
Vista Med Ctr, Scripps Mercy

Hospital, Sharp Memorial

Hospital, Scripps Memorial

Hospital, Scripps Memorial

Hospital Encinitas

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Imperial Health Holdings
Medical Group-Sd

SURGERY COLON SURGERY

PARRY, LISA A

Provider ID: 278552

Board Certified Specialty: No
UCSD MEDICAL GROUP

1200 GARDEN VIEW RD STE
200

ENCINITAS, CA 92024-2475

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

License number: A131297

NPI: 1235369067

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

SURGERY GENERAL

VASCULAR

RAYAN, SUNIL S

Provider ID: 204490

Board Certified Specialty: No
HEALTH EXCEL IPA INC

320 SANTA FE DR STE 212
ENCINITAS, CA 92024-5139

Phone: (760) 943-0101

Fax: (760) 274-8416

After Hours Phone: (760)
943-0101

Provider Gender: Male

License number: A87655

NPI: 1174606016

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Memorial Hospital, Scripps
 Memorial Hospital Encinitas,
 Scripps Mercy Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ☯ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Health Excel Ipa Inc

Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group
COSMAN, BARD C
 Provider ID: 63746
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 1200 GARDEN VIEW RD STE
 200
 ENCINITAS, CA 92024-2475
 Phone: (760) 944-0223
 Fax:

Phone: (858) 657-8860
 Fax:
 After Hours Phone: (858)
 657-8860
 Provider Gender: Male
 License number: A99668
 NPI: 1265649966
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):

SURGERY GENERAL

ARMANI, AVA
 Provider ID: 282143
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 1200 GARDEN VIEW RD STE
 200
 ENCINITAS, CA 92024-2475
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 License number: A118231
 NPI: 1861759383
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Medical Ctr At
 Ucsf, Ucsf Medical Center At
 Mission Bay, Ucsf Medical
 Center At Mount Zion, Ucsd La
 Jolla John Sally Thornton, Ucsd
 Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ☯ Accessibility:
 Hours: M-SA 9AM-5PM

After Hours Phone: (760)
 944-0223
 Provider Gender: Male
 License number: G66321
 NPI: 1477513810
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ☯ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

No
 ☯ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group
KING, JUSTIN B
 Provider ID: 265214
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 700 GARDEN VIEW CT STE 102
 ENCINITAS, CA 92024-2478
 Phone: (760) 783-0441
 Fax: (760) 635-5972
 After Hours Phone: (760)
 783-0441
 Provider Gender: Male
 License number: A89447
 NPI: 1629262258
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Paradise
 Valley Hospital, Alvarado
 Hospital Llc, Sharp Memorial
 Hospital, Vibra Hospital Of San
 Diego, Sharp Coronado Hosp

JACOBSEN, GARTH R
 Provider ID: 201730
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 1200 GARDEN VIEW RD
 ENCINITAS, CA 92024-2477

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D. Directorio de proveedores de atención especializada

And Healthcare Ctr, Grossmont
Hospital, Scripps Memorial
Hospital

Medi-Cal Open Panel: Yes
Min/Max Age: 18/200
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

WALLACE, ANNE M

Provider ID: 64488
Board Certified Specialty: No
UCSD MEDICAL GROUP
1200 GARDEN VIEW RD STE
200
ENCINITAS, CA 92024-2475
Phone: (760) 944-0223
Fax:
After Hours Phone: (760)
944-0223
Provider Gender: Female
License number: G73000
NPI: 1699732941
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SURGERY NEUROLOGICAL

YOO, FRANK K , MD

Provider ID: 257374
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
477 N EL CAMINO REAL STE
D200
ENCINITAS, CA 92024-1375
Phone: (760) 452-3340
Fax: (760) 452-3344
After Hours Phone: (760)
452-3340
Provider Gender: Male
License number: G86513
NPI: 1295774545
Provider English Spoken: Yes
Provider Language(s) Spoken:
Korean, Spanish, Telugu,
Vietnamese
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Scripps
Memorial Hospital Encinitas, Tri
City Medical Ctr, Palomar Health
Downtown Campus, Pomerado
Hospital, Alvarado Hospital Llc,
Paradise Valley Hospital,
Southwest Healthcare System
Wildomar, Southwest Healthcare
System Murrieta, Scripps Mercy
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

SURGERY ORTHOPEDIC

CHANG, DOUGLAS G

Provider ID: 104611
Board Certified Specialty: No
UCSD MEDICAL GROUP
1200 GARDEN VIEW RD STE
200
ENCINITAS, CA 92024-2475
Phone: (858) 657-8200
Fax:
After Hours Phone: (858)
657-8200
Provider Gender: Male
License number: A77281
NPI: 1962450031
Provider English Spoken: Yes
Provider Language(s) Spoken:
German
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

COVEY, DANA C

Provider ID: 83309
Board Certified Specialty: No
UCSD MEDICAL GROUP
1200 GARDEN VIEW RD STE
200
ENCINITAS, CA 92024-2475

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (760) 944-0223

Fax:

After Hours Phone: (760)
944-0223

Provider Gender: Male

License number: G89432

NPI: 1780651794

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

MEINEKE, RYAN C

Provider ID: 284403

Board Certified Specialty: Yes

HEALTH EXCEL IPA INC

351 SANTA FE DR STE 100

ENCINITAS, CA 92024-5137

Phone: (760) 633-3130

Fax: (760) 633-3546

After Hours Phone: (760)
633-3130

Provider Gender: Male

License number: A101056

NPI: 1851579015

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps
Memorial Hospital Encinitas

Medi-Cal Open Panel: No

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

VITALE, KENNETH C

Provider ID: 104654

Board Certified Specialty: No

UCSD MEDICAL GROUP

1200 GARDEN VIEW RD STE
200

ENCINITAS, CA 92024-2475

Phone: (760) 536-7670

Fax:

After Hours Phone: (760)

536-7670

Provider Gender: Male

License number: C132964

NPI: 1730176868

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

WALLACE, CHARLES D

Provider ID: 52696

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED
FN D TN

477 N EL CAMINO REAL STE
D302

ENCINITAS, CA 92024-1374

Phone: (760) 944-5545

Fax:

After Hours Phone: (760)

944-5545

Provider Gender: Male

License number: G67953

NPI: 1144229600

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego,

Parkview Community Hospital
Medical Center

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

ZLOMISLIC, VINKO

Provider ID: 84071

Board Certified Specialty: No

UCSD MEDICAL GROUP

1200 GARDEN VIEW RD STE
200

ENCINITAS, CA 92024-2475

Phone: (760) 944-0223

Fax: (858) 657-8235

After Hours Phone: (760)
944-0223

Provider Gender: Male

License number: A112819

NPI: 1346351509

Provider English Spoken: Yes

Provider Language(s) Spoken:

Serbo-Croatian, Spanish

Cultural Competency: No

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

KLING, KAREN M

Provider ID: 206128

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

477 N EL CAMINO REAL STE D302

ENCINITAS, CA 92024-1374

Phone: (760) 944-5545

Fax: (760) 944-3927

After Hours Phone: (760)

944-5545

Provider Gender: Female

License number: A53583

NPI: 1982775144

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Sharp Mary Birch Hosp For Women And Newborns, National Naval Med Ctr, Sharp Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

REID, CHRISTOPHER M

Provider ID: 238130

Board Certified Specialty: No
UCSD MEDICAL GROUP

1200 GARDEN VIEW RD
ENCINITAS, CA 92024-2477

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A122947

NPI: 1982964276

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network, Ucsd Medical Group

SURGERY PEDIATRIC

FAIRBANKS, TIMOTHY J

Provider ID: 205497

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

477 N EL CAMINO REAL STE D302

ENCINITAS, CA 92024-1374

Phone: (760) 944-5545

Fax: (760) 944-3927

After Hours Phone: (760)

944-5545

Provider Gender: Male

License number: A80244

NPI: 1407010556

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Sharp

Memorial Hospital, Scripps

Memorial Hospital, Childrens

Hosp And Resrch Ctr At Oakland

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

Accessibility:

SURGERY PLASTIC

UROLOGY

BUTLER, PHILIP A , MD

Provider ID: 269433

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

320 SANTA FE DR STE 305
ENCINITAS, CA 92024-5140

Phone: (760) 436-4558

Fax: (858) 429-7926

After Hours Phone: (760)

436-4558

Provider Gender: Male

License number: G47129

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>NPI: 1184665911 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc</p>	<p><i>Accessibility:</i> P, EB, IB, E, R, T <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc</p>	<p>HEALTH EXCEL IPA INC 320 SANTA FE DR STE 108 ENCINITAS, CA 92024-5141 <i>Phone:</i> (760) 436-4558 <i>Fax:</i> (858) 429-7925 <i>After Hours Phone:</i> (760) 436-4558 <i>Provider Gender:</i> Male <i>License number:</i> G56844 <i>NPI:</i> 1093756827 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Ucsd Medical Ctr, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc</p>
<p>BUTLER, PHILIP A <i>Provider ID:</i> 55907 <i>Board Certified Specialty:</i> No GENESIS HEALTHCARE PARTNERS PC 320 SANTA FE DR STE 108 ENCINITAS, CA 92024-5141 <i>Phone:</i> (760) 436-4558 <i>Fax:</i> <i>After Hours Phone:</i> (760) 436-4558 <i>Provider Gender:</i> Male <i>License number:</i> G47129 <i>NPI:</i> 1184665911 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No</p>	<p>CHIANG, GEORGE <i>Provider ID:</i> 205942 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 477 N EL CAMINO REAL STE D302 ENCINITAS, CA 92024-1374 <i>Phone:</i> (760) 944-5545 <i>Fax:</i> (760) 944-3927 <i>After Hours Phone:</i> (760) 944-5545 <i>Provider Gender:</i> Male <i>License number:</i> A98687 <i>NPI:</i> 1093773954 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Doctors Hospital Of Riverside Llc <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network</p>	<p>COHEN, EDWARD S , MD <i>Provider ID:</i> 269340 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 320 SANTA FE DR STE 305 ENCINITAS, CA 92024-5140 <i>Phone:</i> (760) 436-4558 <i>Fax:</i> (760) 436-4832 <i>After Hours Phone:</i> (760) 436-4558 <i>Provider Gender:</i> Male <i>License number:</i> G56844 <i>NPI:</i> 1093756827 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i></p>
<p>COHEN, EDWARD S <i>Provider ID:</i> 260180 <i>Board Certified Specialty:</i> No</p>	<p>COHEN, EDWARD S <i>Provider ID:</i> 260180 <i>Board Certified Specialty:</i> No</p>	<p></p>

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D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Ucsd Medical Ctr, Scripps Mercy Hospital

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

COHEN, EDWARD S

Provider ID: 56014
Board Certified Specialty: No
 GENESIS HEALTHCARE PARTNERS PC
 320 SANTA FE DR STE 108 ENCINITAS, CA 92024-5141
Phone: (760) 436-4558

Fax:
After Hours Phone: (760) 436-4558

Provider Gender: Male
License number: G56844
NPI: 1093756827

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Ucsd Medical Ctr, Scripps Mercy Hospital

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:* P, EB, IB, E, R, T

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

JUMA, SAAD, MD

Provider ID: 244006
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 320 SANTA FE DR STE 108 ENCINITAS, CA 92024-5141
Phone: (760) 753-8373

Fax: (760) 753-9332
After Hours Phone: (760) 753-8373

Provider Gender: Male
License number: A42398
NPI: 1013931930
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Spanish

Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Tri City Medical Ctr, Scripps Memorial Hospital Encinitas

Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No

♿ *Accessibility:* P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

JUMA, SAAD

Provider ID: 40234
Board Certified Specialty: Yes
 GENESIS HEALTHCARE PARTNERS PC

320 SANTA FE DR STE 108 ENCINITAS, CA 92024-5141
Phone: (760) 753-8373

Fax:
After Hours Phone: (760) 753-8373

Provider Gender: Male
License number: A42398
NPI: 1013931930

Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Spanish

Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Tri City Medical Ctr, Scripps Memorial Hospital Encinitas

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

♿ *Accessibility:* P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

NAITOH, JOHN, MD

Provider ID: 269477
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 320 SANTA FE DR STE 305 ENCINITAS, CA 92024-5140
Phone: (760) 436-4558

Fax:
After Hours Phone: (760) 436-4558

Provider Gender: Male
License number: G82079
NPI: 1629010509

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

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

NAITOH, JOHN

Provider ID: 55261
Board Certified Specialty: No
GENESIS HEALTHCARE PARTNERS PC
320 SANTA FE DR STE 305
ENCINITAS, CA 92024-5140
Phone: (760) 436-4558
Fax: (858) 429-7925
After Hours Phone: (760) 436-4558
Provider Gender: Male
License number: G82079
NPI: 1629010509
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

NGUYEN, HUNG H

Provider ID: 260386
Board Certified Specialty: No
HEALTH EXCEL IPA INC
320 SANTA FE DR STE 108
ENCINITAS, CA 92024-5141
Phone: (760) 436-4558
Fax:
After Hours Phone: (760) 436-4558
Provider Gender: Male
License number: A142209
NPI: 1023488806
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

YUH, BENJAMIN J

Provider ID: 277018
Board Certified Specialty: No
HEALTH EXCEL IPA INC
320 SANTA FE DR STE 108
ENCINITAS, CA 92024-5141
Phone: (760) 436-4558
Fax: (858) 429-7926
After Hours Phone: (760) 436-4558

Provider Gender: Male
License number: A125637
NPI: 1487092417
Provider English Spoken: Yes
Provider Language(s) Spoken: Mandarin, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Methodist Hosp Of Southern California, City Of Hope National Med Ctr, Huntington Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

ESCONDIDO

ALLERGY IMMUNOLOGY

LAUBACH, SUSAN S

Provider ID: 277885
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY # 200
ESCONDIDO, CA 92029-4159
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760) 755-7600
Provider Gender: Female
License number: A114061
NPI: 1366656209
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital,
Childrens Hosp And Resrch Ctr
At Oakland

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

WELCH, MICHAEL J

Provider ID: 277878

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

2125 CITRACADO PKWY # 200
ESCONDIDO, CA 92029-4159

Phone: (760) 755-7600

Fax: (760) 755-7699

After Hours Phone: (760)
755-7600

Provider Gender: Male

License number: G34844

NPI: 1699794222

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

ANESTHESIOLOGY PAIN MANAGEMENT

COHEN, ZACHARY C , MD

Provider ID: 268178

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
2185 CITRACADO PKWY
ESCONDIDO, CA 92029-4159

Phone: (442) 281-5000

Fax:

After Hours Phone: (442)
281-5000

Provider Gender: Male

License number: A146733

NPI: 1598021982

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Palomar
Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

RICHARDSON, HENRY A

Provider ID: 268456

Board Certified Specialty: No
HEALTH EXCEL IPA INC
1340 W VALLEY PKWY STE
201

ESCONDIDO, CA 92029-2136

Phone: (760) 607-5350

Fax: (760) 607-5351

After Hours Phone: (760)
607-5350

Provider Gender: Male

License number: A105294

NPI: 1407052459

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

ANESTHESIOLOGY

KHATIBI, NIKAN H

Provider ID: 239611

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
160 N DATE ST
ESCONDIDO, CA 92025-3406

Phone: (888) 873-6220

Fax: (888) 873-6220

After Hours Phone: (888)
873-6220

Provider Gender: Male

License number: 20A11914

NPI: 1326363300

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Riverside
Community Hosp, Parkview

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Community Hospital Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

KHATIBI, NIKAN H

Provider ID: 270624
Board Certified Specialty: No
HEALTH EXCEL IPA INC
160 N DATE ST
ESCONDIDO, CA 92025-3406
Phone: (888) 873-6220
Fax: (888) 873-6220
After Hours Phone: (888) 873-6220
Provider Gender: Male
License number: 20A11914
NPI: 1326363300
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Riverside Community Hosp, Parkview Community Hospital Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

PRASAD, RUPA S

Provider ID: 283631
Board Certified Specialty: No
HEALTH EXCEL IPA INC
1955 CITRACADO PKWY STE 102
ESCONDIDO, CA 92029-4111
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760) 631-3000
Provider Gender: Female
License number: A152691
NPI: 1689037384
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Palomar Medical Center, Tri City Medical Ctr, Scripps Memorial Hospital Encinitas, Sharp Memorial Hospital, Scripps Green Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

CARDIOLOGY

ACHEATEL, ROGER J , MD

Provider ID: 269351
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1955 CITRACADO PKWY STE 300
ESCONDIDO, CA 92029-4113

Phone: (760) 743-0546
Fax: (760) 743-8837
After Hours Phone: (760) 743-0546
Provider Gender: Male
License number: G45947
NPI: 1730182619
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Pomerado Hospital, Palomar Medical Center, Palomar Health Downtown Campus
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

BAYAT, HAMED

Provider ID: 257491
Board Certified Specialty: No
BLUE SHIELD PROMISE HEALTH PLAN DIRECT
1955 CITRACADO PKWY STE 300
ESCONDIDO, CA 92029-4113
Phone: (760) 743-0546
Fax: (760) 743-8837
After Hours Phone: (760) 743-0546
Provider Gender: Male
License number: A61356
NPI: 1356344196
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi
Cultural Competency: No
Hospital Affiliation: Palomar

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D. Directorio de proveedores de atención especializada

Health Downtown Campus,
Pomerado Hospital, Palomar
Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health
Plan Direct, Community Care Ipa
Llc

BAYAT, HAMED, MD

Provider ID: 53687
Board Certified Specialty: No
ARCH HEALTH PARTNERS
1955 CITRACADO PKWY STE
300
ESCONDIDO, CA 92029-4113
Phone: (760) 743-0546
Fax: (760) 743-8837
After Hours Phone: (760)
743-0546
Provider Gender: Male
License number: A61356
NPI: 1356344196
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi
Cultural Competency: No
Hospital Affiliation: Palomar
Health Downtown Campus,
Pomerado Hospital, Palomar
Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Blue Shield Promise Health
Plan Direct, Community Care Ipa
Llc

CHEN, ANDREW K , MD

Provider ID: 269314
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1955 CITRACADO PKWY STE
300
ESCONDIDO, CA 92029-4113
Phone: (760) 743-0546
Fax: (760) 743-8837
After Hours Phone: (760)
743-0546
Provider Gender: Male
License number: A120866
NPI: 1134357007
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Green Hospital, Palomar Health
Downtown Campus, Pomerado
Hospital, Palomar Medical
Center

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

DAVIS, CHRISTOPHER K

Provider ID: 277811
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
2125 CITRACADO PKWY # 100

ESCONDIDO, CA 92029-4159
Phone: (760) 294-9260
Fax: (760) 294-9274
After Hours Phone: (760)
294-9260
Provider Gender: Male
License number: A100260
NPI: 1760691950
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Grossmont Hospital, Scripps
Memorial Hospital, Sharp
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

FAGAN, BRIAN T

Provider ID: 277840
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
2125 CITRACADO PKWY # 100
ESCONDIDO, CA 92029-4159
Phone: (760) 294-9260
Fax: (760) 294-9274
After Hours Phone: (760)
294-9260
Provider Gender: Male
License number: A82153
NPI: 1740308550
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Hospital Affiliation: San Gabriel Valley Med Ctr, California Hosp Med Ctr Los Angeles, Emanate Health Inter-Community Hospital, Rady Childrens Hospital San Diego, Huntington Memorial Hospital, Emanate Health Queen Of The Valley Hospital, Childrens Hosp And Resrch Ctr At Oakland, Childrens Hosp Of Los Angeles

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

GILBERT, CHRISTOPHER R , MD

Provider ID: 63549

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1955 CITRACADO PKWY STE 300

ESCONDIDO, CA 92029-4113

Phone: (760) 743-0546

Fax: (760) 743-8837

After Hours Phone: (760) 743-0546

Provider Gender: Male

License number: A35403

NPI: 1487657243

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency: No

Hospital Affiliation: Palomar Health Downtown Campus, Palomar Medical Center,

Pomerado Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

GORWIT, JEFFREY I , MD

Provider ID: 63540

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1955 CITRACADO PKWY STE 300

ESCONDIDO, CA 92029-4113

Phone: (760) 743-0546

Fax: (760) 743-8837

After Hours Phone: (760) 743-0546

Provider Gender: Male

License number: G25365

NPI: 1891798658

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency: No

Hospital Affiliation: Palomar Health Downtown Campus, Pomerado Hospital, Palomar Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

HALEY, JESSICA E

Provider ID: 277867

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

2125 CITRACADO PKWY # 100
ESCONDIDO, CA 92029-4159

Phone: (760) 294-9260

Fax: (760) 294-9274

After Hours Phone: (760) 294-9260

Provider Gender: Female

License number: A125568

NPI: 1023329885

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

HEGDE, SANJEET R

Provider ID: 277893

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

2125 CITRACADO PKWY # 100
ESCONDIDO, CA 92029-4159

Phone: (760) 294-9260

Fax: (760) 294-9274

After Hours Phone: (760) 294-9260

Provider Gender: Male

License number: A112326

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1306036884
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

LEE, YOUNG E

Provider ID: 269316
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1955 CITRACADO PKWY STE
300
ESCONDIDO, CA 92029-4113
Phone: (760) 743-0546
Fax: (760) 743-8837
After Hours Phone: (760)
743-0546
Provider Gender: Male
License number: A130275
NPI: 1285833764
Provider English Spoken: Yes
Provider Language(s) Spoken:
Korean
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Community Care Ipa Llc
MALEK, MIKHAIL R , MD
Provider ID: 269307
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1955 CITRACADO PKWY STE
300
ESCONDIDO, CA 92029-4113
Phone: (760) 743-0546
Fax: (760) 743-8837
After Hours Phone: (760)
743-0546
Provider Gender: Male
License number: A50952
NPI: 1467455212
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic
Cultural Competency: No
Hospital Affiliation: Palomar
Health Downtown Campus
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

NARAYAN, HARI K

Provider ID: 277846
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
2125 CITRACADO PKWY # 100
ESCONDIDO, CA 92029-4159
Phone: (760) 294-9260
Fax: (760) 294-9274
After Hours Phone: (760)
294-9260

Provider Gender: Male
License number: A144821
NPI: 1376705707
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

SAWHNEY, NAVINDER S , MD

Provider ID: 112701
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1955 CITRACADO PKWY STE
300
ESCONDIDO, CA 92029-4113
Phone: (760) 743-0546
Fax: (760) 743-8837
After Hours Phone: (760)
743-0546
Provider Gender: Male
License number: A86378
NPI: 1619174133
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Palomar
Health Downtown Campus,
Pomerado Hospital, Palomar
Medical Center, Scripps
Memorial Hospital, Scripps
Green Hospital, Ucsd Medical
Ctr, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SERRY, ROD D , MD

Provider ID: 54469
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1955 CITRACADO PKWY STE
300
ESCONDIDO, CA 92029-4113
Phone: (760) 743-0546
Fax: (760) 743-8837
After Hours Phone: (760)
743-0546
Provider Gender: Male
License number: A76061
NPI: 1912945130
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Portuguese, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

CARDIOVASCULAR DISEASE

CARLSON, STEVEN K

Provider ID: 278818

Board Certified Specialty: No
HEALTH EXCEL IPA INC
488 E VALLEY PKWY STE 107
ESCONDIDO, CA 92025-3363
Phone: (760) 294-0480
Fax: (760) 294-0481
After Hours Phone: (760)
294-0480
Provider Gender: Male
License number: A109957
NPI: 1467602946
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Garfield
Medical Center, Santa Monica
Ucla Med Ctr, Ronald Reagan
Ucla Med Ctr, Scripps Mercy
Hospital, Sharp Chula Vista Med
Ctr, Sharp Memorial Hospital,
Alvarado Hospital Llc, Grossmont
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/99
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

MOHAMEDALI, BURHAN

Provider ID: 278841
Board Certified Specialty: No
HEALTH EXCEL IPA INC
488 E VALLEY PKWY STE 107
ESCONDIDO, CA 92025-3363
Phone: (760) 294-0480
Fax: (760) 294-0481
After Hours Phone: (760)
294-0480

Provider Gender: Male
License number: A125669
NPI: 1831393289
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Swahili
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

MOUSSAVIAN, MEHRAN

Provider ID: 278815
Board Certified Specialty: No
HEALTH EXCEL IPA INC
488 E VALLEY PKWY STE 107
ESCONDIDO, CA 92025-3363
Phone: (760) 294-0480
Fax: (760) 294-0481
After Hours Phone: (760)
294-0480
Provider Gender: Male
License number: 20A7241
NPI: 1689788234
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr, Tri City Medical
Ctr, Sharp Memorial Hospital,
Alvarado Hospital Llc, Grossmont
Hospital, Scripps Mercy Hospital,
Scripps Memorial Hospital
Medi-Cal Open Panel: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: 16/120
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

NARAYANAN, MEENA R

Provider ID: 278830
Board Certified Specialty: No
HEALTH EXCEL IPA INC
488 E VALLEY PKWY STE 107
ESCONDIDO, CA 92025-3363
Phone: (760) 294-0480
Fax: (760) 294-0481
After Hours Phone: (760)
294-0480
Provider Gender: Female
License number: A113448
NPI: 1508170697
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Sharp Chula
Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/99
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

PARIKH, MILIND D

Provider ID: 278814

Board Certified Specialty: No
HEALTH EXCEL IPA INC
488 E VALLEY PKWY STE 107
ESCONDIDO, CA 92025-3363
Phone: (619) 486-6512
Fax: (760) 294-0481
After Hours Phone: (619)
486-6512
Provider Gender: Male
License number: 20A13745
NPI: 1194161406
Provider English Spoken: Yes
Provider Language(s) Spoken:
Gujarati, Hindi, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/99
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

SHETABI, KAMBIZ

Provider ID: 278853
Board Certified Specialty: No
HEALTH EXCEL IPA INC
488 E VALLEY PKWY STE 107
ESCONDIDO, CA 92025-3363
Phone: (760) 294-0480
Fax: (760) 294-0481
After Hours Phone: (760)
294-0480
Provider Gender: Male
License number: A126187
NPI: 1972827806
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish

Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/99
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

CERTIFIED NURSE PRACTITIONER

BARMACK, KIMBERLY M , NPA

Provider ID: 269270
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1955 CITRACADO PKWY STE
200
ESCONDIDO, CA 92029-4112
Phone: (760) 743-4789
Fax: (760) 743-4779
After Hours Phone: (760)
743-4789
Provider Gender: Female
License number: NP20705
NPI: 1881018067
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

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D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Community Care Ipa Llc

BATAK, NADINE M

Provider ID: 268445
Board Certified Specialty: No
HEALTH EXCEL IPA INC
1340 W VALLEY PKWY STE
201
ESCONDIDO, CA 92029-2136
Phone: (619) 325-1161
Fax: (619) 325-1717
After Hours Phone: (619)
325-1161
Provider Gender: Female
License number: NP21763
NPI: 1942657937
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

BISHOP, LESLIE A , NPA

Provider ID: 243219
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1955 CITRACADO PKWY STE
102
ESCONDIDO, CA 92029-4111
Phone: (760) 630-3000
Fax: (760) 631-3016
After Hours Phone: (760)
630-3000

Provider Gender: Female
License number: NP95010047
NPI: 1669941878
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Pomerado
Hospital, Tri City Medical Ctr,
Palomar Medical Center, Scripps
Memorial Hospital Encinitas
Medi-Cal Open Panel: No
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

BISHOP, LESLIE A

Provider ID: 277680
Board Certified Specialty: No
HEALTH EXCEL IPA INC
1955 CITRACADO PKWY STE
102
ESCONDIDO, CA 92029-4111
Phone: (760) 630-3000
Fax: (760) 631-3016
After Hours Phone: (760)
630-3000
Provider Gender: Female
License number: NP95010047
NPI: 1669941878
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Pomerado
Hospital, Tri City Medical Ctr,
Palomar Health Downtown
Campus, Scripps Memorial
Hospital Encinitas
Medi-Cal Open Panel: Yes

Min/Max Age: 18/110
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

CARNEY, AMY

Provider ID: 246869
Board Certified Specialty: No
HEALTH EXCEL IPA INC
1001 E GRAND AVE
ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (760) 741-2782
After Hours Phone: (760)
520-8200
Provider Gender: Female
License number: NP8169
NPI: 1164445227
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Palomar
Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

DICKINSON, NATASHA A

Provider ID: 283660
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

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D. Directorio de proveedores de atención especializada

2125 CITRACADO PKWY # 200
ESCONDIDO, CA 92029-4159

Phone: (858) 966-8801

Fax: (858) 966-8511

After Hours Phone: (858)
966-8801

Provider Gender: Female

License number: NP17677

NPI: 1073845327

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

FIELDS, KATHRYN S

Provider ID: 277861

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

2125 CITRACADO PKWY # 100
ESCONDIDO, CA 92029-4159

Phone: (760) 480-8770

Fax: (760) 480-8811

After Hours Phone: (760)
480-8770

Provider Gender: Female

License number: NP20720

NPI: 1679867782

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

HAASS, ADRIANNA M

Provider ID: 261044

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

625 CITRACADO PKWY STE
200

ESCONDIDO, CA 92025-6428

Phone: (760) 746-2641

Fax: (760) 740-2178

After Hours Phone: (760)
746-2641

Provider Gender: Female

License number: NP95005120

NPI: 1225588130

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Southwest
Healthcare System Wildomar,
Southwest Healthcare System

Murrieta

Medi-Cal Open Panel: No

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

HEAD, KRISTIN N

Provider ID: 277866

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

2125 CITRACADO PKWY # 100
ESCONDIDO, CA 92029-4159

Phone: (760) 294-9260

Fax: (760) 294-9274

After Hours Phone: (760)
294-9260

Provider Gender: Female

License number: NP20264

NPI: 1699078923

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

KONYN, CATHERINE L

Provider ID: 246834

Board Certified Specialty: No
HEALTH EXCEL IPA INC
1001 E GRAND AVE

ESCONDIDO, CA 92025-4604

Phone: (760) 520-8200

Fax: (858) 633-4695

After Hours Phone: (760)
520-8200

Provider Gender: Female

License number: NP19095

NPI: 1437488160

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D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

KROCHMAL, RACHEL E

Provider ID: 276935
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
488 E VALLEY PKWY STE 400
ESCONDIDO, CA 92025-3378
Phone: (760) 658-6101
Fax: (760) 658-6106
After Hours Phone: (760)
658-6101
Provider Gender: Female
License number: NP457272
NPI: 1326117920
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

KROCHMAL, RACHEL E
Provider ID: 276936
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
1955 CITRACADO PKWY STE
302
ESCONDIDO, CA 92029-4113
Phone: (760) 233-1896
Fax: (760) 233-1899
After Hours Phone: (760)
233-1896
Provider Gender: Female
License number: NP457272
NPI: 1326117920

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

LEVY, SHARON B

Provider ID: 277876
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY # 200
ESCONDIDO, CA 92029-4159
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760)
755-7600
Provider Gender: Female
License number: NP95003383

NPI: 1316396807
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

LIPMAN, RACHEL E

Provider ID: 265114
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
625 CITRACADO PKWY STE
200
ESCONDIDO, CA 92025-6428
Phone: (760) 746-2641
Fax: (760) 740-2178
After Hours Phone: (760)
746-2641
Provider Gender: Female
License number: NP95000707
NPI: 1871933879
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

IPA: Rady Childrens Health Network

MANCHESTER, KAREN L

Provider ID: 276926

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

488 E VALLEY PKWY STE 400
ESCONDIDO, CA 92025-3378

Phone: (760) 658-6101

Fax: (760) 658-6106

After Hours Phone: (760)
658-6101

Provider Gender: Female

License number: NP20883

NPI: 1801225941

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

MANCHESTER, KAREN L

Provider ID: 276927

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

1955 CITRACADO PKWY STE
302
ESCONDIDO, CA 92029-4113

Phone: (760) 233-1896

Fax: (760) 233-1899

After Hours Phone: (760)
233-1896

Provider Gender: Female

License number: NP20883

NPI: 1801225941

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

MEYERS, JUDITH S , NPA

Provider ID: 274695

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

1955 CITRACADO PKWY STE
300
ESCONDIDO, CA 92029-4113

Phone: (760) 743-4789

Fax: (760) 743-8005

After Hours Phone: (760)

743-4789

Provider Gender: Female

License number: NP95010314

NPI: 1538637194

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

MIRANDA, BRIDGET A

Provider ID: 277845

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

2125 CITRACADO PKWY # 100
ESCONDIDO, CA 92029-4159

Phone: (760) 294-9260

Fax: (760) 294-9274

After Hours Phone: (760)
294-9260

Provider Gender: Female

License number: NP95006082

NPI: 1225548159

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Northern Inyo Hosp

Medi-Cal Open Panel: No

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

MITRUKA, ANNE F , NPA

Provider ID: 269427

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

1955 CITRACADO PKWY STE
300
ESCONDIDO, CA 92029-4113

Phone: (760) 743-0546

Fax:

After Hours Phone: (760)
743-0546

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Female
License number: NP13563
NPI: 1083795843
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MURRAY, CARLA M , NPA

Provider ID: 242749
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1509 E VALLEY PKWY
ESCONDIDO, CA 92027-2315
Phone: (760) 520-8100
Fax:
After Hours Phone: (760)
520-8100
Provider Gender: Female
License number: NP12682
NPI: 1346453503
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

PIDDING, APRYL D

Provider ID: 269252
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
625 CITRACADO PKWY STE
110
ESCONDIDO, CA 92025-6428
Phone: (760) 747-8935
Fax: (760) 466-0078
After Hours Phone: (760)
747-8935
Provider Gender: Female
License number: NP20027
NPI: 1518259936
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

RAY, PEGGY L

Provider ID: 276880
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
488 E VALLEY PKWY STE 400
ESCONDIDO, CA 92025-3378
Phone: (760) 658-6101
Fax: (760) 658-6106
After Hours Phone: (760)
658-6101
Provider Gender: Female
License number: NP95004962
NPI: 1326583998

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

RAY, PEGGY L

Provider ID: 276881
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
1955 CITRACADO PKWY STE
302
ESCONDIDO, CA 92029-4113
Phone: (760) 233-1896
Fax: (760) 233-1899
After Hours Phone: (760)
233-1896
Provider Gender: Female
License number: NP95004962
NPI: 1326583998
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health

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D. Directorio de proveedores de atención especializada

Network

RUDISILL, PAMELA J

Provider ID: 276954
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
488 E VALLEY PKWY STE 400
ESCONDIDO, CA 92025-3378
Phone: (760) 658-6101
Fax: (760) 658-6106
After Hours Phone: (760) 658-6101
Provider Gender: Female
License number: NP21448
NPI: 1871608018
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

RUDISILL, PAMELA J

Provider ID: 276955
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
1955 CITRACADO PKWY STE 302
ESCONDIDO, CA 92029-4113
Phone: (760) 233-1896
Fax: (760) 233-1899
After Hours Phone: (760) 233-1896
Provider Gender: Female

License number: NP21448
NPI: 1871608018
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SCOTT, MARYLOU

Provider ID: 277892
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY # 100
ESCONDIDO, CA 92029-4159
Phone: (760) 480-8770
Fax: (760) 480-8811
After Hours Phone: (760) 480-8770
Provider Gender: Female
License number: NP10261
NPI: 1023223252
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Rady Childrens Health Network

SPAULDING, ENJOLI B

Provider ID: 129202
Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC
631 E GRAND AVE
ESCONDIDO, CA 92025-4402
Phone: (760) 294-1660
Fax:
After Hours Phone: (760) 294-1660
Provider Gender: Female
License number: NP21947
NPI: 1174828099

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

SPAULDING, ENJOLI B

Provider ID: 242014
Board Certified Specialty: No
HEALTH EXCEL IPA INC
631 E GRAND AVE
ESCONDIDO, CA 92025-4402

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D. Directorio de proveedores de atención especializada

Phone: (760) 294-1660
Fax: (760) 745-5016
After Hours Phone: (760) 294-1660
Provider Gender: Female
License number: NP21947
NPI: 1174828099
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/120
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

SPAULDING, ENJOLI B

Provider ID: 262456
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
631 E GRAND AVE
ESCONDIDO, CA 92025-4402
Phone: (760) 294-1660
Fax: (760) 745-5016
After Hours Phone: (760) 294-1660
Provider Gender: Female
License number: NP21947
NPI: 1174828099
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

SPAULDING, ENJOLI B , NPA

Provider ID: 269259
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
631 E GRAND AVE
ESCONDIDO, CA 92025-4402
Phone: (760) 294-1660
Fax: (760) 745-5016
After Hours Phone: (760) 294-1660
Provider Gender: Female
License number: NP21947
NPI: 1174828099
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

STEARNS, PHILIP H

Provider ID: 277882

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
2125 CITRACADO PKWY # 100
ESCONDIDO, CA 92029-4159
Phone: (760) 480-8770
Fax: (760) 480-8811
After Hours Phone: (760) 480-8770
Provider Gender: Male
License number: NP11899
NPI: 1609900810
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

VALLES, ELIZABETH A

Provider ID: 277847
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
2125 CITRACADO PKWY # 200
ESCONDIDO, CA 92029-4159
Phone: (858) 966-8801
Fax: (858) 966-8511
After Hours Phone: (858) 966-8801
Provider Gender: Female
License number: NP95002921
NPI: 1609235589
Provider English Spoken: Yes
Provider Language(s) Spoken:

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D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

CHIROPRACTOR

FONSECA, ROSANNA R
Provider ID: 279178
Board Certified Specialty: No
HEALTH EXCEL IPA INC
2065 S ESCONDIDO BLVD STE
105
ESCONDIDO, CA 92025-8221
Phone: (760) 565-2225
Fax: (760) 690-2212
After Hours Phone: (760)
565-2225
Provider Gender: Female
License number: DC30815
NPI: 1225320120
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Health Excel Ipa Inc
KEYS, ANNA G
Provider ID: 246582
Board Certified Specialty: No
HEALTH EXCEL IPA INC
240 W MISSION AVE STE C
ESCONDIDO, CA 92025-1700
Phone: (760) 839-3448
Fax: (760) 839-3405
After Hours Phone: (760)
839-3448
Provider Gender: Female
License number: DC27244
NPI: 1194897991

Provider English Spoken: Yes
Provider Language(s) Spoken:
Russian, Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

CLINICAL NEUROPSYCHOLOGIST

QUESNELL, TARA A
Provider ID: 253083
Board Certified Specialty: No
HEALTH EXCEL IPA INC
1955 CITRACADO PKWY STE
102
ESCONDIDO, CA 92029-4111
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760)
631-3000

Provider Gender: Female
License number: 20A13609
NPI: 1619288172
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr, Palomar Medical
Center, Pomerado Hospital,
Scripps Memorial Hospital
Encinitas, Palomar Health
Downtown Campus
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

DERMATOLOGY

BARRIO, VICTORIA R
Provider ID: 277856
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
2125 CITRACADO PKWY # 100
ESCONDIDO, CA 92029-4159
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760)
755-7600
Provider Gender: Female
License number: A91617
NPI: 1598836355
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No

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D. Directorio de proveedores de atención especializada

Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

BOIKO, SUSAN

Provider ID: 277158
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
2125 CITRACADO PKWY # 100
ESCONDIDO, CA 92029-4159
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760)
755-7600
Provider Gender: Female
License number: G41069
NPI: 1053488981
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

DOHIL, MAGDALENE A
Provider ID: 277243
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
2125 CITRACADO PKWY # 100
ESCONDIDO, CA 92029-4159
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760)
755-7600
Provider Gender: Female
License number: A86265
NPI: 1528139383
Provider English Spoken: Yes
Provider Language(s) Spoken:
German, Spanish
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr, Sharp
Memorial Hospital, Sharp Mary
Birch Hosp For Women And
Newborns
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

SCHAIRER, DAVID O
Provider ID: 277850
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
2125 CITRACADO PKWY # 100
ESCONDIDO, CA 92029-4159

Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760)
755-7600
Provider Gender: Male
License number: A148597
NPI: 1619311164
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Childrens Hospital Of Orange
County
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

SPRAGUE, JESSICA M

Provider ID: 277894
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
2125 CITRACADO PKWY # 100
ESCONDIDO, CA 92029-4159
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760)
755-7600
Provider Gender: Female
License number: A134345
NPI: 1437594884
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally

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D. Directorio de proveedores de atención especializada

Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

TOM, WYNNIS L
 Provider ID: 205488
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 625 CITRACADO PKWY STE
 206
 ESCONDIDO, CA 92025-6428
 Phone: (760) 755-7600
 Fax: (760) 755-7699
 After Hours Phone: (760)
 755-7600
 Provider Gender: Female
 License number: A99290
 NPI: 1922215045
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Chinese, Mandarin, Spanish,
 Yue Chinese
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Sharp Memorial Hospital, Ucsd
 Medical Ctr, Childrens Hosp And
 Resrch Ctr At Oakland
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/99
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:

Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network
TOM, WYNNIS L
 Provider ID: 51965
 Board Certified Specialty: No
 RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDTN
 625 CITRACADO PKWY STE
 206
 ESCONDIDO, CA 92025-6428
 Phone: (760) 294-9260
 Fax:
 After Hours Phone: (760)
 294-9260
 Provider Gender: Female
 License number: A99290
 NPI: 1922215045
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Chinese, Mandarin, Spanish,
 Yue Chinese
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr, Rady Childrens Hospital San
 Diego, Sharp Memorial Hospital,
 Childrens Hosp And Resrch Ctr
 At Oakland
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

EMERGENCY MEDICINE

KEARNEY, LAUREN K
 Provider ID: 277832
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 2125 CITRACADO PKWY # 100
 ESCONDIDO, CA 92029-4159
 Phone: (760) 739-1543
 Fax: (760) 294-9274
 After Hours Phone: (760)
 739-1543
 Provider Gender: Female
 License number: G83666
 NPI: 1740296268
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Palomar Medical Center
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

RILEY-HAGAN, MARGARET
 Provider ID: 277817
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 2125 CITRACADO PKWY # 100
 ESCONDIDO, CA 92029-4159
 Phone: (760) 739-1543
 Fax: (760) 294-9274
 After Hours Phone: (760)
 739-1543
 Provider Gender: Female
 License number: A49609

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D. Directorio de proveedores de atención especializada

NPI: 1548352388
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish
Cultural Competency: No
Hospital Affiliation: Palomar Medical Center, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

ROSE, OLGA D

Provider ID: 205955
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
625 CITRACADO PKWY STE 100
ESCONDIDO, CA 92025-6428
Phone: (760) 739-1543
Fax: (760) 294-9274
After Hours Phone: (760) 739-1543
Provider Gender: Female
License number: A143536
NPI: 1740560044
Provider English Spoken: Yes
Provider Language(s) Spoken: Russian
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas

Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

VAIDYA, KAMALA

Provider ID: 205812
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
625 CITRACADO PKWY STE 100
ESCONDIDO, CA 92025-6428
Phone: (760) 739-1543
Fax: (760) 294-9274
After Hours Phone: (760) 739-1543
Provider Gender: Female
License number: A124814
NPI: 1083840920
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

METABOLISM DIABETES

AIKEN, MARGOT J

Provider ID: 106005
Board Certified Specialty: No
ADVANCED METABOLIC CARE AND RESEARCH INC
625 CITRACADO PKWY STE 108
ESCONDIDO, CA 92025-6428
Phone: (760) 743-1431
Fax:
After Hours Phone: (760) 743-1431
Provider Gender: Female
License number: A40833
NPI: 1952476236
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website: amcrclinic.com
Email:
Medical Group(s):
IPA:

BAILEY, TIMOTHY S

Provider ID: 106006
Board Certified Specialty: No
ADVANCED METABOLIC CARE AND RESEARCH INC
625 CITRACADO PKWY STE 108
ESCONDIDO, CA 92025-6428

ENDOCRINOLOGY

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (760) 743-1431
 Fax: (760) 294-2902
 After Hours Phone: (760) 743-1431
 Provider Gender: Male
 License number: G60763
 NPI: 1194800052
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website: amcrclinic.com
 Email:
 Medical Group(s):
 IPA:

FAMILY PRACTICE SPORTS MEDICINE

KAUFMAN, ELIZABETH A
 Provider ID: 285906
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 2125 CITRACADO PKWY # 100
 ESCONDIDO, CA 92029-4159
 Phone: (760) 480-8770
 Fax: (760) 480-8811
 After Hours Phone: (760) 480-8770
 Provider Gender: Female
 License number: A135037
 NPI: 1942644679
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady

Childrens Hospital San Diego,
 Scripps Green Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

FAMILY PRACTICE

SCHULTZ, JAMES H
 Provider ID: 24795
 Board Certified Specialty: No
 NEIGHBORHOOD HEALTHCARE ESCONDIDO
 460 N ELM ST
 ESCONDIDO, CA 92025-3002
 Phone: (760) 520-8100
 Fax:
 After Hours Phone: (760) 520-8100
 Provider Gender: Male
 License number: G61829
 NPI: 1356376164
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Farsi, Greek, Spanish
 Cultural Competency: No
 Hospital Affiliation: Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Palomar Medical Center
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-F 8AM-5PM, SA

8AM-12PM
 Website: www.ihpsocal.org
 Email:
 Medical Group(s): Neighborhood Healthcare Escondido
 IPA:

GASTROENTEROLOGY

CHELIMILLA, HARITHA R , MD
 Provider ID: 269204
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 735 E OHIO AVE STE 204
 ESCONDIDO, CA 92025-3437
 Phone: (760) 294-7600
 Fax: (760) 294-7603
 After Hours Phone: (760) 294-7600
 Provider Gender: Female
 License number: A124727
 NPI: 1528235892
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Hindi, Telugu
 Cultural Competency: No
 Hospital Affiliation: Hemet Global Medical Center, Palomar Medical Center
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

CHOI, LILLIAN J
 Provider ID: 277813
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

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D. Directorio de proveedores de atención especializada

2125 CITRACADO PKWY # 100
ESCONDIDO, CA 92029-4159

Phone: (760) 294-9260

Fax: (760) 294-9274

After Hours Phone: (760)
294-9260

Provider Gender: Female

License number: A90646

NPI: 1831350453

Provider English Spoken: Yes

Provider Language(s) Spoken:
Korean

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

GARA, NAVEEN, MD

Provider ID: 269145

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

661 E PENNSYLVANIA AVE
ESCONDIDO, CA 92025-3003

Phone: (760) 690-2800

Fax: (760) 690-2801

After Hours Phone: (760)
690-2800

Provider Gender: Male

License number: A149265

NPI: 1942406533

Provider English Spoken: Yes

Provider Language(s) Spoken:

Hindi, Telugu

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla Network

John Sally Thornton, Palomar
Health Downtown Campus,
Palomar Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

GARCIA, MARY ABIGAIL S

Provider ID: 277804

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

2125 CITRACADO PKWY # 100
ESCONDIDO, CA 92029-4159

Phone: (760) 294-9260

Fax: (760) 294-9274

After Hours Phone: (760)
294-9260

Provider Gender: Female

License number: A89980

NPI: 1386805877

Provider English Spoken: Yes

Provider Language(s) Spoken:

Tagalog

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

HOM, XENIA B

Provider ID: 277854

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

2125 CITRACADO PKWY # 100
ESCONDIDO, CA 92029-4159

Phone: (760) 294-9260

Fax: (760) 294-9274

After Hours Phone: (760)
294-9260

Provider Gender: Female

License number: G86642

NPI: 1982775748

Provider English Spoken: Yes

Provider Language(s) Spoken:
Chinese (Family), Mandarin,
Spanish

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

SCHWARZ, KATHLEEN B

Provider ID: 283175

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

2125 CITRACADO PKWY # 100
ESCONDIDO, CA 92029-4159

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D. Directorio de proveedores de atención especializada

Phone: (760) 294-9260
Fax: (760) 294-9274
After Hours Phone: (760) 294-9260
Provider Gender: Female
License number: G152263
NPI: 1265465918
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE M , MD
Provider ID: 268690
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
330 W FELICITA AVE STE A4
ESCONDIDO, CA 92025-6531
Phone: (760) 489-1323
Fax: (760) 489-0975
After Hours Phone: (760) 489-1323
Provider Gender: Female
License number: HA7100
NPI: 1063558856
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

DANDURAND, JOHN M , MD
Provider ID: 269783
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
330 W FELICITA AVE STE A4
ESCONDIDO, CA 92025-6531
Phone: (760) 489-1323
Fax: (760) 489-0975
After Hours Phone: (760) 489-1323
Provider Gender: Male
License number: HA2056
NPI: 1497901680

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

WYMAN, WENDY A
Provider ID: 252976
Board Certified Specialty: No
HEALTH EXCEL IPA INC

330 W FELICITA AVE STE A4
ESCONDIDO, CA 92025-6531
Phone: (858) 259-4182
Fax: (858) 259-4853
After Hours Phone: (858) 259-4182
Provider Gender: Female
License number: HA8365
NPI: 1922668631
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

INTERNAL MEDICINE CRITICAL CARE MEDICINE

HIRSCH, GREGORY L , MD
Provider ID: 269143
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
488 E VALLEY PKWY STE 211
ESCONDIDO, CA 92025-3370
Phone: (760) 489-1458
Fax: (760) 489-1246
After Hours Phone: (760) 489-1458
Provider Gender: Male
License number: G40467
NPI: 1639287071
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Palomar

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D. Directorio de proveedores de atención especializada

Medical Center, Pomerado Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility: P, EB, IB, E, R, T
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

OTOSHI, JAMES S , MD

Provider ID: 269095
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 488 E VALLEY PKWY STE 201
 ESCONDIDO, CA 92025-3398
 Phone: (760) 489-1458
 Fax: (760) 489-1246
 After Hours Phone: (760) 489-1458
 Provider Gender: Male
 License number: G27763
 NPI: 1679681027
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Palomar Health Downtown Campus, Palomar Medical Center
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

INTERNAL MEDICINE

CHEN, MARGARET K
 Provider ID: 24685
 Board Certified Specialty: No
 NEIGHBORHOOD HEALTHCARE ESCONDIDO
 460 N ELM ST
 ESCONDIDO, CA 92025-3002
 Phone: (760) 520-8100
 Fax:
 After Hours Phone: (760) 520-8100
 Provider Gender: Female
 License number: A61751
 NPI: 1659305084
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Greek, Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-F 8AM-5PM, SA 8AM-12PM
 Website: www.ihapsocal.org
 Email:
 Medical Group(s): Neighborhood Healthcare Escondido
 IPA:

GREENSTEIN, JOSHUA K

Provider ID: 53809
 Board Certified Specialty: No
 BALBOA NEPHROLOGY MED GRP INC
 631 E GRAND AVE
 ESCONDIDO, CA 92025-4402
 Phone: (760) 294-1660
 Fax: (760) 745-5016
 After Hours Phone: (760) 294-1660
 Provider Gender: Male
 License number: A68100

NPI: 1104881457
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-F 9AM-5PM, SA 9AM-5PM
 Website: bnmg.org
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

GUERIN, CHRIS K

Provider ID: 106008
 Board Certified Specialty: No
 NORTH COUNTY ENDOCRINE MED GRP A MED CORP
 625 CITRACADO PKWY STE 108
 ESCONDIDO, CA 92025-6428
 Phone: (760) 743-1431
 Fax:
 After Hours Phone: (760) 743-1431
 Provider Gender: Male
 License number: G47081
 NPI: 1275648875
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Tri City Medical Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None

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D. Directorio de proveedores de atención especializada

American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website: amcrclinic.com
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KHAWAR, OSMAN S

Provider ID: 53715
Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC
631 E GRAND AVE
ESCONDIDO, CA 92025-4402
Phone: (760) 294-1660
Fax: (760) 745-5016
After Hours Phone: (760) 294-1660
Provider Gender: Male
License number: A92165
NPI: 1598813644
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Urdu
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

Accessibility: W
Hours: M-F 9AM-5PM, SA 9AM-5PM
Website: bnmg.org
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

TRESTMAN, KENNETH G , MD

Provider ID: 269147
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
488 E VALLEY PKWY STE 211
ESCONDIDO, CA 92025-3370
Phone: (760) 489-1458
Fax: (760) 489-1246
After Hours Phone: (760) 489-1458
Provider Gender: Male
License number: G69663
NPI: 1346358793
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MATERNAL AND FETAL MEDICINE

TARSA, MARYAM

Provider ID: 285855
Board Certified Specialty: No
UCSD MEDICAL GROUP
2125 CITRACADO PKWY # 210
ESCONDIDO, CA 92029-4159
Phone: (760) 739-2921
Fax:
After Hours Phone: (760) 739-2921
Provider Gender: Female
License number: A69894
NPI: 1295768638

Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Palomar Medical Center, Scripps Mercy Hospital, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr, Eisenhower Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

NEONATAL / PERINATAL MEDICINE

FATAYERJI, NABIL I

Provider ID: 205750
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
2185 CITRACADO PKWY
ESCONDIDO, CA 92029-4159
Phone: (442) 281-2850
Fax: (442) 281-2999
After Hours Phone: (442) 281-2850
Provider Gender: Male
License number: A63224
NPI: 1649341405
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic
Cultural Competency: No

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D. Directorio de proveedores de atención especializada

Hospital Affiliation: Rady Childrens Hospital San Diego, Palomar Health Downtown Campus, Pomerado Hospital, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Palomar Medical Center, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

GOLEMBESKI, DAVID J

Provider ID: 205893
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 2185 CITRACADO PKWY
 ESCONDIDO, CA 92029-4159
Phone: (442) 281-2850
Fax: (442) 281-2999
After Hours Phone: (442) 281-2850
Provider Gender: Male
License number: G63111
NPI: 1376614131
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Palomar Health Downtown Campus, Scripps Memorial

Hospital Encinitas, Pomerado Hospital, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Palomar Medical Center, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

LE, CRYSTAL N

Provider ID: 283707
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 2185 CITRACADO PKWY
 ESCONDIDO, CA 92029-4159
Phone: (442) 281-3193
Fax: (442) 281-3197
After Hours Phone: (442) 281-3193
Provider Gender: Female
License number: A97634
NPI: 1003028416
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):

No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MOYER, LAUREL B

Provider ID: 205400
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 2185 CITRACADO PKWY
 ESCONDIDO, CA 92029-4159
Phone: (442) 281-3193
Fax: (442) 281-3197
After Hours Phone: (442) 281-3193
Provider Gender: Female
License number: C144070
NPI: 1598970378
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SAUER, CHARLES W

Provider ID: 206163
Board Certified Specialty: No

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D. Directorio de proveedores de atención especializada

RADY CHILDRENS HEALTH NETWORK
 2185 CITRACADO PKWY
 ESCONDIDO, CA 92029-4159
Phone: (442) 281-2850
Fax: (442) 281-2999
After Hours Phone: (442) 281-2850
Provider Gender: Male
License number: 20A9535
NPI: 1538388988
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Scripps Memorial Hospital, Palomar Health Downtown Campus, Southwest Healthcare System Murrieta, Scripps Memorial Hospital Encinitas, Palomar Medical Center, Scripps Mercy Hospital Chula Vista, Pomerado Hospital, Southwest Healthcare System Wildomar
Medi-Cal Open Panel: Yes
Min/Max Age: 0/0
American Sign Language (ASL): No
 ☒ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SUTTNER, DENISE M
Provider ID: 206137
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 2185 CITRACADO PKWY
 ESCONDIDO, CA 92029-4159

Phone: (442) 281-2850
Fax: (442) 281-2999
After Hours Phone: (442) 281-2850
Provider Gender: Female
License number: A52313
NPI: 1457433799
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Scripps Memorial Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/0
American Sign Language (ASL): No
 ☒ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SWEENEY, NATHALY M
Provider ID: 283801
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 2185 CITRACADO PKWY
 ESCONDIDO, CA 92029-4159
Phone: (442) 281-3193
Fax: (442) 281-3197
After Hours Phone: (442) 281-3193
Provider Gender: Female
License number: A110761

NPI: 1164572632
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Palomar Medical Center, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☒ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

NEPHROLOGY

GREENSTEIN, JOSHUA K
Provider ID: 262222
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 631 E GRAND AVE
 ESCONDIDO, CA 92025-4402
Phone: (760) 294-1660
Fax: (760) 745-5016
After Hours Phone: (760) 294-1660
Provider Gender: Male
License number: A68100
NPI: 1104881457
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>No ☯ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>	<p><i>Provider ID:</i> 53809 <i>Board Certified Specialty:</i> No BALBOA NEPHROLOGY MED GRP INC 631 E GRAND AVE ESCONDIDO, CA 92025-4402 <i>Phone:</i> (760) 294-1660 <i>Fax:</i> (760) 745-5016 <i>After Hours Phone:</i> (760) 294-1660 <i>Provider Gender:</i> Male <i>License number:</i> A68100 <i>NPI:</i> 1104881457 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Palomar Health Downtown Campus <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>	<p><i>License number:</i> A93436 <i>NPI:</i> 1801868286 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Tagalog <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Palomar Medical Center, Temecula Valley Hospital Inc <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>
<p>GREENSTEIN, JOSHUA K <i>Provider ID:</i> 53809 <i>Board Certified Specialty:</i> No BALBOA NEPHROLOGY MED GRP INC 631 E GRAND AVE ESCONDIDO, CA 92025-4402 <i>Phone:</i> (760) 294-1660 <i>Fax:</i> (760) 745-5016 <i>After Hours Phone:</i> (760) 294-1660 <i>Provider Gender:</i> Male <i>License number:</i> A68100 <i>NPI:</i> 1104881457 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>	<p>HEBREO, JOSEPH D <i>Provider ID:</i> 108435 <i>Board Certified Specialty:</i> No BALBOA NEPHROLOGY MED GRP INC 631 E GRAND AVE ESCONDIDO, CA 92025-4402 <i>Phone:</i> (760) 294-1660 <i>Fax:</i> (760) 745-5016 <i>After Hours Phone:</i> (760) 294-1660 <i>Provider Gender:</i> Male <i>License number:</i> A93436 <i>NPI:</i> 1801868286 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Tagalog <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Palomar Medical Center, Temecula Valley Hospital Inc <i>Medi-Cal Open Panel:</i> No</p>	<p>HEBREO, JOSEPH D , MD <i>Provider ID:</i> 108435 <i>Board Certified Specialty:</i> Yes BALBOA NEPHROLOGY MED GRP INC 631 E GRAND AVE ESCONDIDO, CA 92025-4402 <i>Phone:</i> (760) 294-1660 <i>Fax:</i> (760) 745-5016 <i>After Hours Phone:</i> (760) 294-1660 <i>Provider Gender:</i> Male</p>
<p>GREENSTEIN, JOSHUA K , MD</p>	<p>HEBREO, JOSEPH D , MD</p>	<p>HEBREO, JOSEPH D</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 9AM-5PM, SA
9AM-5PM
Website: bnmg.org
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

HEBREO, JOSEPH D

Provider ID: 108435
Board Certified Specialty: Yes
BALBOA NEPHROLOGY MED
GRP INC
631 E GRAND AVE
ESCONDIDO, CA 92025-4402
Phone: (760) 294-1660
Fax: (760) 745-5016
After Hours Phone: (760)
294-1660
Provider Gender: Male
License number: A93436
NPI: 1801868286
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Palomar
Medical Center, Temecula Valley
Hospital Inc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,

Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd
HEBREO, JOSEPH D
Provider ID: 262130
Board Certified Specialty: Yes
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
631 E GRAND AVE
ESCONDIDO, CA 92025-4402
Phone: (760) 294-1660
Fax: (760) 745-5016
After Hours Phone: (760)
294-1660

Provider Gender: Male
License number: A93436
NPI: 1801868286
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Palomar
Medical Center, Temecula Valley
Hospital Inc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

KAYAL, ANAS

Provider ID: 262156
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
631 E GRAND AVE

ESCONDIDO, CA 92025-4402
Phone: (760) 294-1660
Fax: (760) 745-5016
After Hours Phone: (760)
294-1660
Provider Gender: Male
License number: A112450
NPI: 1851376917
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr, Palomar Medical
Center, Temecula Valley Hospital
Inc, Scripps Memorial Hospital
Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc,
Imperial Health Holdings Medical
Group-Sd

KHAWAR, OSMAN S

Provider ID: 262354
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
631 E GRAND AVE
ESCONDIDO, CA 92025-4402
Phone: (760) 294-1660
Fax: (760) 745-5016
After Hours Phone: (760)
294-1660
Provider Gender: Male
License number: A92165
NPI: 1598813644
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken: Spanish, Urdu
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Palomar Health Downtown Campus
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

KHAWAR, OSMAN S

Provider ID: 53715
Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC
631 E GRAND AVE
ESCONDIDO, CA 92025-4402
Phone: (760) 294-1660
Fax: (760) 745-5016
After Hours Phone: (760) 294-1660
Provider Gender: Male
License number: A92165
NPI: 1598813644

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Urdu
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Palomar Health Downtown Campus
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

KHAWAR, OSMAN S , MD

Provider ID: 53715
Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC
631 E GRAND AVE
ESCONDIDO, CA 92025-4402
Phone: (760) 294-1660
Fax: (760) 745-5016
After Hours Phone: (760) 294-1660

Provider Gender: Male
License number: A92165
NPI: 1598813644
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Urdu
Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

NEYAZ, MOHAMMED D

Provider ID: 108420
Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC
631 E GRAND AVE
ESCONDIDO, CA 92025-4402
Phone: (760) 294-1660
Fax: (760) 745-5016
After Hours Phone: (760) 294-1660

Provider Gender: Male
License number: 20A13534
NPI: 1245459973
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Spanish, Urdu
Cultural Competency: No
Hospital Affiliation: Pomerado Hospital, Palomar Health Downtown Campus
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

NEYAZ, MOHAMMED D

Provider ID: 108420
Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC
631 E GRAND AVE
ESCONDIDO, CA 92025-4402
Phone: (760) 294-1660
Fax: (760) 745-5016
After Hours Phone: (760) 294-1660

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Male
License number: 20A13534
NPI: 1245459973
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Spanish, Urdu
Cultural Competency: No
Hospital Affiliation: Pomerado Hospital, Palomar Health Downtown Campus
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

NEYAZ, MOHAMMED D

Provider ID: 108420
Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC
631 E GRAND AVE
ESCONDIDO, CA 92025-4402
Phone: (760) 294-1660
Fax: (760) 745-5016
After Hours Phone: (760) 294-1660

Provider Gender: Male
License number: 20A13534
NPI: 1245459973
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Spanish, Urdu
Cultural Competency: No
Hospital Affiliation: Pomerado Hospital
Medi-Cal Open Panel: No

Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 9AM-5PM, SA 9AM-5PM
Website: bnmg.org
Email:

Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

NEYAZ, MOHAMMED D

Provider ID: 262135
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
631 E GRAND AVE
ESCONDIDO, CA 92025-4402
Phone: (760) 294-1660
Fax: (760) 745-5016
After Hours Phone: (760) 294-1660

Provider Gender: Male
License number: 20A13534
NPI: 1245459973
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Spanish, Urdu
Cultural Competency: No
Hospital Affiliation: Pomerado Hospital, Palomar Health Downtown Campus
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,

Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

SHAPIRO, MARK H

Provider ID: 262182
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
631 E GRAND AVE
ESCONDIDO, CA 92025-4402
Phone: (760) 294-1660
Fax: (760) 745-5016
After Hours Phone: (760) 294-1660

Provider Gender: Male
License number: G65280
NPI: 1912962275
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Swahili
Cultural Competency: No
Hospital Affiliation: Palomar Medical Center, Tri City Medical Ctr

Medi-Cal Open Panel: No
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

SHAPIRO, MARK H

Provider ID: 54458
Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC
631 E GRAND AVE

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

ESCONDIDO, CA 92025-4402
 Phone: (760) 294-1660
 Fax: (760) 745-5016
 After Hours Phone: (760) 294-1660
 Provider Gender: Male
 License number: G65280
 NPI: 1912962275
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish, Swahili
 Cultural Competency: No
 Hospital Affiliation: Palomar Medical Center, Tri City Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-F 9AM-5PM, SA 9AM-5PM
 Website: bnmg.org
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

SHAPIRO, MARK H

Provider ID: 54458
 Board Certified Specialty: No
 BALBOA NEPHROLOGY MED GRP INC
 631 E GRAND AVE
 ESCONDIDO, CA 92025-4402
 Phone: (760) 294-1660
 Fax: (760) 745-5016
 After Hours Phone: (760) 294-1660
 Provider Gender: Male
 License number: G65280
 NPI: 1912962275
 Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish, Swahili
 Cultural Competency: No
 Hospital Affiliation: Palomar Medical Center, Tri City Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

NEUROLOGY CHILD

CRAWFORD, JOHN R

Provider ID: 206036
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 625 CITRACADO PKWY STE 100
 ESCONDIDO, CA 92025-6428
 Phone: (760) 294-9260
 Fax: (760) 294-9274
 After Hours Phone: (760) 294-9260
 Provider Gender: Male
 License number: A107230
 NPI: 1982790259
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Ucsd Medical Ctr

Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

GROSMANN, CARLA M

Provider ID: 205656
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 625 CITRACADO PKWY STE 100
 ESCONDIDO, CA 92025-6428
 Phone: (760) 294-9260
 Fax: (760) 294-9274
 After Hours Phone: (760) 294-9260
 Provider Gender: Female
 License number: G84717
 NPI: 1497826259
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

HAAS, RICHARD H

Provider ID: 205621
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
625 CITRACADO PKWY STE 100

ESCONDIDO, CA 92025-6428

Phone: (760) 294-9260

Fax: (760) 294-9274

After Hours Phone: (760)

294-9260

Provider Gender: Male

License number: A38555

NPI: 1700801867

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Ucsd Medical Ctr, Sharp Mary

Birch Hosp For Women And

Newborns

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

NESPECA, MARK P

Provider ID: 277823

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

2125 CITRACADO PKWY # 100

ESCONDIDO, CA 92029-4159

Phone: (760) 294-9260

Fax:

After Hours Phone: (760)

294-9260

Provider Gender: Male

License number: G65509

NPI: 1942371703

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Ucsd Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

SAHAGIAN, MICHELLE L

Provider ID: 206076

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

625 CITRACADO PKWY STE

100

ESCONDIDO, CA 92025-6428

Phone: (760) 294-9260

Fax: (760) 294-9274

After Hours Phone: (760)

294-9260

Provider Gender: Female

License number: A80990

NPI: 1275604035

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

SATTAR, SHIFTEH

Provider ID: 206180

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

625 CITRACADO PKWY STE

100

ESCONDIDO, CA 92025-6428

Phone: (760) 294-9260

Fax: (760) 294-9274

After Hours Phone: (760)

294-9260

Provider Gender: Female

License number: A103904

NPI: 1750407300

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

NEUROLOGY

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

DELANEY, MICHAEL W

Provider ID: 252865
Board Certified Specialty: No
HEALTH EXCEL IPA INC
1955 CITRACADO PKWY STE
102
ESCONDIDO, CA 92029-4111
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760)
631-3000
Provider Gender: Male
License number: C146015
NPI: 1710157920
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Palomar
Medical Center, Pomerado
Hospital, Scripps Memorial
Hospital Encinitas, Tri City
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

DELANEY, MICHAEL W , MD

Provider ID: 269104
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1955 CITRACADO PKWY STE
102
ESCONDIDO, CA 92029-4111

Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760)
631-3000
Provider Gender: Male
License number: C146015
NPI: 1710157920
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Palomar
Medical Center, Pomerado
Hospital, Scripps Memorial
Hospital Encinitas, Tri City
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/200
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

FRISHBERG, BENJAMIN M

Provider ID: 252877
Board Certified Specialty: No
HEALTH EXCEL IPA INC
1955 CITRACADO PKWY STE
102
ESCONDIDO, CA 92029-4111
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760)
631-3000
Provider Gender: Male
License number: G43493
NPI: 1952346348
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish

Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

FRISHBERG, BENJAMIN M , MD

Provider ID: 76522
Board Certified Specialty: No
THE NEUROLOGY CTR
1955 CITRACADO PKWY STE
102
ESCONDIDO, CA 92029-4111
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760)
631-3000
Provider Gender: Male
License number: G43493
NPI: 1952346348
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

GLEESON, JOSEPH G

Provider ID: 277852
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY # 100
ESCONDIDO, CA 92029-4159
Phone: (760) 294-9260
Fax: (760) 294-9274
After Hours Phone: (760) 294-9260
Provider Gender: Male
License number: G85292
NPI: 1689745440
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/999
American Sign Language (ASL): No
Ⓜ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GOLD, JEFFREY J

Provider ID: 277870
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY # 100
ESCONDIDO, CA 92029-4159
Phone: (760) 294-9260
Fax: (760) 294-9274
After Hours Phone: (760) 294-9260
Provider Gender: Male
License number: A111541

NPI: 1568773984
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Ⓜ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

JINDAL, ANUJA V

Provider ID: 277838
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY # 100
ESCONDIDO, CA 92029-4159
Phone: (760) 294-9260
Fax: (760) 294-9274
After Hours Phone: (760) 294-9260
Provider Gender: Female
License number: A149444
NPI: 1194046581
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Ⓜ *Accessibility:*
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

KIM MCMANUS, OLIVIA S

Provider ID: 277873
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY # 100
ESCONDIDO, CA 92029-4159
Phone: (760) 294-9260
Fax: (760) 294-9274
After Hours Phone: (760) 294-9260
Provider Gender: Female
License number: A120194
NPI: 1174870067
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: University Of California Irvine Med Ctr, Childrens Hospital Of Orange County, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

Ⓜ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

LAWLER, ABIGAIL C , MD

Provider ID: 125131
Board Certified Specialty: No
THE NEUROLOGY CTR

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

1955 CITRACADO PKWY STE
102
ESCONDIDO, CA 92029-4111
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760)
631-3000
Provider Gender: Female
License number: A152080
NPI: 1568789741

Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas, Tri
City Medical Ctr, Pomerado
Hospital, Palomar Medical
Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):

No
⌘ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

LAWLER, ABIGAIL C

Provider ID: 252956
Board Certified Specialty: No
HEALTH EXCEL IPA INC
1955 CITRACADO PKWY STE
102
ESCONDIDO, CA 92029-4111
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760)
631-3000
Provider Gender: Female
License number: A152080
NPI: 1568789741

Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Pomerado
Hospital, Palomar Medical
Center, Scripps Memorial
Hospital Encinitas, Tri City
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/200
American Sign Language (ASL):
No
⌘ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

NELSON, JAMES E

Provider ID: 277849
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
2125 CITRACADO PKWY # 100
ESCONDIDO, CA 92029-4159
Phone: (760) 294-9260
Fax: (760) 294-9274
After Hours Phone: (760)
294-9260

Provider Gender: Male
License number: C55868
NPI: 1568434546
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Valley
Childrens Hospital, Ucsd Medical
Ctr, Rady Childrens Hospital San
Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):

No
⌘ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

OH, IRENE J

Provider ID: 253018
Board Certified Specialty: No
HEALTH EXCEL IPA INC
1955 CITRACADO PKWY STE
102
ESCONDIDO, CA 92029-4111
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760)
631-3000

Provider Gender: Female
License number: A106450
NPI: 1306089008
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr, Scripps Memorial
Hospital Encinitas, Palomar
Health Downtown Campus,
Pomerado Hospital, Palomar
Medical Center

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
⌘ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

OH, IRENE J , MD

Provider ID: 76600

Board Certified Specialty: No

THE NEUROLOGY CTR

1955 CITRACADO PKWY STE
102

ESCONDIDO, CA 92029-4111

Phone: (760) 631-3000

Fax: (760) 631-3016

After Hours Phone: (760)

631-3000

Provider Gender: Female

License number: A106450

NPI: 1306089008

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Tri City

Medical Ctr, Scripps Memorial

Hospital Encinitas, Palomar

Health Downtown Campus,

Pomerado Hospital, Palomar

Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc

PADUGA, REMIA S

Provider ID: 285940

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

1955 CITRACADO PKWY STE

102

ESCONDIDO, CA 92029-4111

Phone: (760) 631-3000

Fax: (760) 631-3016

After Hours Phone: (760)

631-3000

Provider Gender: Female

License number: A113451

NPI: 1194933853

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Tagalog

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital Encinitas, Tri

City Medical Ctr, Pomerado

Hospital, Palomar Medical

Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc

PHAM, ALISE K

Provider ID: 285920

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

1955 CITRACADO PKWY STE

102

ESCONDIDO, CA 92029-4111

Phone: (760) 631-3000

Fax: (760) 361-3016

After Hours Phone: (760)

631-3000

Provider Gender: Female

License number: 20A18259

NPI: 1184011363

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Tri City

Medical Ctr, Pomerado Hospital,

Palomar Medical Center, Scripps

Memorial Hospital Encinitas

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

QUESNELL, TARA A

Provider ID: 109398

Board Certified Specialty: No

NORTH COUNTY NEUROLOGY

ASSOCS MED GRP

1955 CITRACADO PKWY STE

102

ESCONDIDO, CA 92029-4111

Phone: (760) 631-3000

Fax:

After Hours Phone: (760)

631-3000

Provider Gender: Female

License number: 20A13609

NPI: 1619288172

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Tri City

Medical Ctr, Scripps Memorial

Hospital Encinitas, Pomerado

Hospital, Palomar Medical

Center

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

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

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

QUESNELL, TARA A

Provider ID: 109398

Board Certified Specialty: No
NORTH COUNTY NEUROLOGY
ASSOCS MED GRP

1955 CITRACADO PKWY STE
102

ESCONDIDO, CA 92029-4111

Phone: (760) 631-3000

Fax: (760) 631-3016

After Hours Phone: (760)

631-3000

Provider Gender: Female

License number: 20A13609

NPI: 1619288172

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Tri City
Medical Ctr, Palomar Medical
Center, Pomerado Hospital,
Scripps Memorial Hospital
Encinitas, Palomar Health
Downtown Campus

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

ROSENBERG, JAY H

Provider ID: 94232

Board Certified Specialty: No

THE NEUROLOGY CTR
1955 CITRACADO PKWY STE
102

ESCONDIDO, CA 92029-4111

Phone: (760) 631-3000

Fax: (760) 631-3016

After Hours Phone: (760)

631-3000

Provider Gender: Male

License number: G17059

NPI: 1609804848

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Tri City
Medical Ctr, Scripps Memorial
Hospital Encinitas

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

SHAPIRO, MARK H

Provider ID: 284030

Board Certified Specialty: No

COMMUNITY CARE IPA LLC
631 E GRAND AVE
ESCONDIDO, CA 92025-4402

Phone: (760) 294-1660

Fax: (760) 745-5016

After Hours Phone: (760)

294-1660

Provider Gender: Male

License number: G65280

NPI: 1912962275

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Swahili

Cultural Competency: No

Hospital Affiliation: Palomar
Medical Center, Tri City Medical
Ctr

Medi-Cal Open Panel: No

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

TRAUNER, DORIS A

Provider ID: 205503

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

625 CITRACADO PKWY STE
100

ESCONDIDO, CA 92025-6428

Phone: (760) 294-9260

Fax: (760) 294-9274

After Hours Phone: (760)

294-9260

Provider Gender: Female

License number: G25519

NPI: 1124051420

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/99

American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	WANG, ANCHI, MD <i>Provider ID:</i> 99281 <i>Board Certified Specialty:</i> No THE NEUROLOGY CTR 1955 CITRACADO PKWY STE 102 ESCONDIDO, CA 92029-4111 <i>Phone:</i> (760) 631-3000 <i>Fax:</i> (760) 631-3016 <i>After Hours Phone:</i> (760) 631-3000 <i>Provider Gender:</i> Female <i>License number:</i> A79381 <i>NPI:</i> 1093744542 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Mandarin, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Palomar Health Downtown Campus, Scripps Memorial Hospital Encinitas, Tri City Medical Ctr, Pomerado Hospital, Palomar Medical Center <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc	<i>Phone:</i> (760) 631-3000 <i>Fax:</i> (760) 631-3016 <i>After Hours Phone:</i> (760) 631-3000 <i>Provider Gender:</i> Female <i>License number:</i> A105660 <i>NPI:</i> 1386890770 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Mandarin, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Palomar Health Downtown Campus, Scripps Memorial Hospital Encinitas, Tri City Medical Ctr, Pomerado Hospital, Scripps Memorial Hospital, Palomar Medical Center <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc
No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc	WANG, ANCHI <i>Provider ID:</i> 252992 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 1955 CITRACADO PKWY STE 102 ESCONDIDO, CA 92029-4111 <i>Phone:</i> (760) 631-3000 <i>Fax:</i> (760) 631-3016 <i>After Hours Phone:</i> (760) 631-3000 <i>Provider Gender:</i> Female <i>License number:</i> A79381 <i>NPI:</i> 1093744542 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Mandarin, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Palomar Health Downtown Campus, Scripps Memorial Hospital Encinitas, Tri City Medical Ctr, Pomerado Hospital, Palomar Medical Center <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc	WANG, CHUNYANG T , MD <i>Provider ID:</i> 84403 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 1955 CITRACADO PKWY STE 102 ESCONDIDO, CA 92029-4111 <i>Phone:</i> (760) 631-3000 <i>Fax:</i> (760) 631-3016 <i>After Hours Phone:</i> (760) 631-3000 <i>Provider Gender:</i> Female <i>License number:</i> A105660 <i>NPI:</i> 1386890770 <i>Provider English Spoken:</i> Yes
No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc	WANG, CHUNYANG T <i>Provider ID:</i> 277705 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 1955 CITRACADO PKWY STE 102 ESCONDIDO, CA 92029-4111	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken: Mandarin, Spanish
Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus, Scripps Memorial Hospital Encinitas, Tri City Medical Ctr, Pomerado Hospital, Scripps Memorial Hospital, Palomar Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Health Excel Ipa Inc

ZIMBRIC, MICHAEL R

Provider ID: 277891

Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

2125 CITRACADO PKWY # 100
 ESCONDIDO, CA 92029-4159

Phone: (760) 294-9260

Fax: (760) 294-9274

After Hours Phone: (760) 294-9260

Provider Gender: Male

License number: A95660

NPI: 1487819546

Provider English Spoken: Yes

Provider Language(s) Spoken: French

Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

OBSTETRICS / GYNECOLOGY

BABKINA, NATALIA

Provider ID: 277174

Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

1955 CITRACADO PKWY STE 302

ESCONDIDO, CA 92029-4113

Phone: (760) 233-1896

Fax: (760) 233-1899

After Hours Phone: (760) 233-1896

Provider Gender: Female

License number: A121142

NPI: 1396066635

Provider English Spoken: Yes

Provider Language(s) Spoken: French, Russian, Spanish

Cultural Competency: No

Hospital Affiliation: Pioneers Memorial Hospital, El Centro Regional Medical Center, Palomar Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

BABKINA, NATALIA

Provider ID: 277175

Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

488 E VALLEY PKWY STE 400
 ESCONDIDO, CA 92025-3378

Phone: (760) 658-6101

Fax: (760) 658-6106

After Hours Phone: (760) 658-6101

Provider Gender: Female

License number: A121142

NPI: 1396066635

Provider English Spoken: Yes

Provider Language(s) Spoken: French, Russian, Spanish

Cultural Competency: No

Hospital Affiliation: Pioneers Memorial Hospital, El Centro Regional Medical Center, Palomar Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

CHIARAPPA, ASHLEY M

Provider ID: 269149

Board Certified Specialty: No
 COMMUNITY CARE IPA LLC

488 E VALLEY PKWY STE 310

ESCONDIDO, CA 92025-3373

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>Phone: (760) 745-7060 Fax: (760) 294-7784 After Hours Phone: (760) 745-7060 Provider Gender: Female License number: A164036 NPI: 1760983092 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Sharp Memorial Hospital Medi-Cal Open Panel: Yes Min/Max Age: 16/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc</p>	<p>No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc</p>	<p>Provider ID: 278909 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 1955 CITRACADO PKWY STE 302 ESCONDIDO, CA 92029-4113 Phone: (760) 233-1896 Fax: (760) 233-1899 After Hours Phone: (760) 233-1896 Provider Gender: Male License number: A80606 NPI: 1679554372 Provider English Spoken: Yes Provider Language(s) Spoken: Italian, Slovak, Spanish Cultural Competency: No Hospital Affiliation: Pomerado Hospital, Palomar Health Downtown Campus, Tri City Medical Ctr, Palomar Medical Center, Rady Childrens Hospital San Diego Medi-Cal Open Panel: Yes Min/Max Age: 0/18 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network</p>
<p>CIZEK, STEPHANIE M Provider ID: 269235 Board Certified Specialty: No COMMUNITY CARE IPA LLC 347 W MISSION AVE ESCONDIDO, CA 92025-1729 Phone: (415) 833-9183 Fax: After Hours Phone: (415) 833-9183 Provider Gender: Female License number: A135224 NPI: 1346582921 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Stanford Health Care, Lucile Salter Packard Childrens Hosp Medi-Cal Open Panel: Yes Min/Max Age: 16/999 American Sign Language (ASL):</p>	<p>CIZMAR, BRANISLAV Provider ID: 278908 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 488 E VALLEY PKWY STE 400 ESCONDIDO, CA 92025-3378 Phone: (760) 658-6101 Fax: (760) 658-6106 After Hours Phone: (760) 658-6101 Provider Gender: Male License number: A80606 NPI: 1679554372 Provider English Spoken: Yes Provider Language(s) Spoken: Italian, Slovak, Spanish Cultural Competency: No Hospital Affiliation: Pomerado Hospital, Palomar Health Downtown Campus, Tri City Medical Ctr, Palomar Medical Center, Rady Childrens Hospital San Diego Medi-Cal Open Panel: Yes Min/Max Age: 0/18 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network</p>	<p>HINSHAW, PAUL W Provider ID: 269223 Board Certified Specialty: No COMMUNITY CARE IPA LLC 426 N DATE ST ESCONDIDO, CA 92025-3409</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (760) 690-5900
Fax: (858) 633-4693
After Hours Phone: (760) 690-5900
Provider Gender: Male
License number: 20A13379
NPI: 1215170717
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Palomar Medical Center
Medi-Cal Open Panel: No
Min/Max Age: 16/999
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Rady Childrens Health Network

HINSHAW, PAUL W

Provider ID: 277040
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
1955 CITRACADO PKWY STE 302
ESCONDIDO, CA 92029-4113
Phone: (760) 233-1896
Fax: (760) 233-1899
After Hours Phone: (760) 233-1896
Provider Gender: Male
License number: 20A13379
NPI: 1215170717
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Palomar Medical Center, Palomar Health Downtown Campus
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Rady Childrens Health Network

Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Rady Childrens Health Network

HINSHAW, PAUL W

Provider ID: 277041
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
488 E VALLEY PKWY STE 400
ESCONDIDO, CA 92025-3378
Phone: (760) 658-6101
Fax: (760) 658-6106
After Hours Phone: (760) 658-6101
Provider Gender: Male
License number: 20A13379
NPI: 1215170717
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Palomar Medical Center, Palomar Health Downtown Campus
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Rady Childrens Health Network

HINSHAW, PAUL W

Provider ID: 285628
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1955 CITRACADO PKWY STE 302
ESCONDIDO, CA 92029-4113
Phone: (760) 233-1896
Fax: (760) 233-1899
After Hours Phone: (760) 233-1896
Provider Gender: Male
License number: 20A13379
NPI: 1215170717
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Rady Childrens Health Network

HINSHAW, PAUL W

Provider ID: 285629
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
488 E VALLEY PKWY STE 400
ESCONDIDO, CA 92025-3378
Phone: (760) 658-6101
Fax: (760) 658-6106
After Hours Phone: (760) 658-6101
Provider Gender: Male
License number: 20A13379
NPI: 1215170717
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p><i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Palomar Medical Center <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 16/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Rady Childrens Health Network</p> <p>HUSKEY, DANA E <i>Provider ID:</i> 276946 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 1955 CITRACADO PKWY STE 302 ESCONDIDO, CA 92029-4113 <i>Phone:</i> (760) 233-1896 <i>Fax:</i> (760) 233-1899 <i>After Hours Phone:</i> (760) 233-1896 <i>Provider Gender:</i> Female <i>License number:</i> A99128 <i>NPI:</i> 1538146337 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Memorial Hospital, Sharp Mary Birch Hosp For Women And Newborns, Palomar Medical Center, Palomar Health Downtown Campus, Pomerado Hospital, Sierra Vista Regional Med Ctr, Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/99 <i>American Sign Language (ASL):</i></p>	<p>No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network</p> <p>HUSKEY, DANA E <i>Provider ID:</i> 276946 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 488 E VALLEY PKWY STE 400 ESCONDIDO, CA 92025-3378 <i>Phone:</i> (760) 658-6101 <i>Fax:</i> (760) 658-6106 <i>After Hours Phone:</i> (760) 658-6101 <i>Provider Gender:</i> Female <i>License number:</i> A99128 <i>NPI:</i> 1538146337 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Memorial Hospital, Sharp Mary Birch Hosp For Women And Newborns, Palomar Medical Center, Palomar Health Downtown Campus, Pomerado Hospital, Sierra Vista Regional Med Ctr, Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/99 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health</p>	<p>Network</p> <p>LAMALE-SMITH, LEAH M <i>Provider ID:</i> 285518 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 2125 CITRACADO PKWY # 210 ESCONDIDO, CA 92029-4159 <i>Phone:</i> (760) 739-2921 <i>Fax:</i> (760) 739-3162 <i>After Hours Phone:</i> (760) 739-2921 <i>Provider Gender:</i> Female <i>License number:</i> A135831 <i>NPI:</i> 1396904876 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 16/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group</p> <p>LEON, JOSUE D <i>Provider ID:</i> 205798 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 488 E VALLEY PKWY STE 400 ESCONDIDO, CA 92025-3378 <i>Phone:</i> (760) 658-6101 <i>Fax:</i> <i>After Hours Phone:</i> (760) 658-6101 <i>Provider Gender:</i> Male</p>
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D. Directorio de proveedores de atención especializada

License number: A80635
NPI: 1497799092
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

ABBOUD, JEAN-PAUL J
Provider ID: 214190
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
625 CITRACADO PKWY STE 206
ESCONDIDO, CA 92025-6428
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760) 755-7600
Provider Gender: Male
License number: A124825
NPI: 1760776728
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, French, Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Tri City Medical Ctr, Scripps

Memorial Hospital, Scripps
Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

ADAMS, MONA N
Provider ID: 277880
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY # 200
ESCONDIDO, CA 92029-4159
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760) 755-7600
Provider Gender: Female
License number: OPT14457
NPI: 1942564521
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

BANSAL, PREETI
Provider ID: 277883
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY # 200
ESCONDIDO, CA 92029-4159
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760) 755-7600
Provider Gender: Female
License number: A90890
NPI: 1871664631
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Grossmont Hospital, Sharp Mary Birch Hosp For Women And Newborns, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Tri City Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

BHATIA, SHAGUN K
Provider ID: 277877
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY # 200
ESCONDIDO, CA 92029-4159

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D. Directorio de proveedores de atención especializada

Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760) 755-7600
Provider Gender: Female
License number: A154902
NPI: 1104237353
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

BINDER, NICHOLAS R , MD
Provider ID: 268756
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
830 W VALLEY PKWY STE 300
ESCONDIDO, CA 92025-2529
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760) 743-5872
Provider Gender: Male
License number: A124698
NPI: 1306076716
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Grossmont Hospital

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

BINDER, NICHOLAS R
Provider ID: 285924
Board Certified Specialty: No
HEALTH EXCEL IPA INC
830 W VALLEY PKWY STE 300
ESCONDIDO, CA 92025-2529
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760) 743-5872
Provider Gender: Male
License number: A124698
NPI: 1306076716
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Grossmont Hospital
Medi-Cal Open Panel: No
Min/Max Age: 5/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical

Group-Sd
BOKOSKY, JOHN E
Provider ID: 54001
Board Certified Specialty: No
EYE CARE OF SAN DIEGO
MED OFFICE
700 W EL NORTE PKWY
ESCONDIDO, CA 92026-3923
Phone: (760) 738-7800
Fax: (619) 296-4622
After Hours Phone: (760) 738-7800
Provider Gender: Male
License number: G51651
NPI: 1245215748
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CHOPLIN, NEIL T
Provider ID: 54049
Board Certified Specialty: No
EYE CARE OF SAN DIEGO
MED OFFICE
700 W EL NORTE PKWY
ESCONDIDO, CA 92026-3923
Phone: (760) 738-7800
Fax: (619) 296-4622
After Hours Phone: (760) 738-7800

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Male
License number: G57042
NPI: 1144205642
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp
 Memorial Hospital, Scripps
 Mercy Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HUDSON, HENRY L

Provider ID: 279226
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 830 W VALLEY PKWY STE 300
 ESCONDIDO, CA 92025-2529
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800)
 898-2020
Provider Gender: Male
License number: G76091
NPI: 1851349195
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
 Memorial Hospital, Tri City
 Medical Ctr, Rady Childrens
 Hospital San Diego, Scripps
 Mercy Hospital, Scripps
 Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

MCGRAW, JOSEPH P , MD

Provider ID: 269705
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 830 W VALLEY PKWY STE 300
 ESCONDIDO, CA 92025-2529
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800)
 898-2020
Provider Gender: Male
License number: A155228
NPI: 1588624852
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No

☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc

MILLER, DOUGLAS G

Provider ID: 262446
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 830 W VALLEY PKWY STE 300
 ESCONDIDO, CA 92025-2529

Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760)
 743-5872
Provider Gender: Male
License number: G52627
NPI: 1982636031
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish, Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc, Imperial
 Health Holdings Medical
 Group-Sd

MILLER, DOUGLAS G , MD

Provider ID: 268956
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 830 W VALLEY PKWY STE 300
 ESCONDIDO, CA 92025-2529
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760)
 743-5872
Provider Gender: Male
License number: G52627
NPI: 1982636031
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish, Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

MOLL, ANGELA M

Provider ID: 205895

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

625 CITRACADO PKWY STE
206

ESCONDIDO, CA 92025-6428

Phone: (760) 755-7600

Fax:

After Hours Phone: (760)
755-7600

Provider Gender: Female

License number: A105472

NPI: 1861648602

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Grossmont Hospital, Sharp

Memorial Hospital, Childrens

Hosp And Resrch Ctr At

Oakland, Scripps Mercy Hospital,

Scripps Mercy Hospital Chula

Vista

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

MOLL, ANGELA M

Provider ID: 277824

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

2125 CITRACADO PKWY # 200
ESCONDIDO, CA 92029-4159

Phone: (760) 755-7600

Fax: (760) 755-7699

After Hours Phone: (760)

755-7600

Provider Gender: Female

License number: A105472

NPI: 1861648602

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Grossmont Hospital, Sharp

Memorial Hospital, Childrens

Hosp And Resrch Ctr At

Oakland, Scripps Mercy Hospital,

Scripps Mercy Hospital Chula

Vista

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

MORRISON-REYES, JOSHUA A

Provider ID: 107935

Board Certified Specialty: No

WEST COAST EYE CARE

ASSOCS MED GRP

830 W VALLEY PKWY STE 300

ESCONDIDO, CA 92025-2529

Phone: (760) 743-5872

Fax: (760) 743-5879

After Hours Phone: (760)

743-5872

Provider Gender: Male

License number: A125435

NPI: 1235366782

Provider English Spoken: Yes

Provider Language(s) Spoken:

Armenian, Cantonese, Chinese,

Indonesian, Mandarin, Spanish,

Tagalog, Vietnamese

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital, Scripps Memorial

Hospital, Sharp Memorial

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc, Imperial

Health Holdings Medical

Group-Sd

MORRISON-REYES, JOSHUA A , MD

Provider ID: 269179

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

830 W VALLEY PKWY STE 300

ESCONDIDO, CA 92025-2529

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760)
743-5872

Provider Gender: Male
License number: A125435
NPI: 1235366782

Provider English Spoken: Yes
Provider Language(s) Spoken:
Armenian, Cantonese, Chinese,
Indonesian, Mandarin, Spanish,
Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Scripps Memorial
Hospital, Sharp Memorial
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

MORRISON-REYES, JOSHUA A

Provider ID: 275515
Board Certified Specialty: No
HEALTH EXCEL IPA INC
830 W VALLEY PKWY STE 300
ESCONDIDO, CA 92025-2529
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760)
743-5872
Provider Gender: Male
License number: A125435
NPI: 1235366782

Provider English Spoken: Yes
Provider Language(s) Spoken:
Armenian, Cantonese, Chinese,
Indonesian, Mandarin, Spanish,
Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Scripps Memorial
Hospital, Sharp Memorial
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

MORTON, ASA D

Provider ID: 54311
Board Certified Specialty: No
EYE CARE OF SAN DIEGO
MED OFFICE
700 W EL NORTE PKWY
ESCONDIDO, CA 92026-3923
Phone: (760) 738-7800
Fax: (619) 296-4622
After Hours Phone: (760)
738-7800
Provider Gender: Male
License number: G68919
NPI: 1780669283
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital
Medi-Cal Open Panel: No

Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MOVAGHAR, MANSOOR

Provider ID: 277833
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
2125 CITRACADO PKWY # 200
ESCONDIDO, CA 92029-4159
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760)
755-7600
Provider Gender: Male
License number: A100897
NPI: 1497792220

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network, Ucsd Medical Group

OHALLORAN, HENRY S

Provider ID: 277869
Board Certified Specialty: No
RADY CHILDRENS HEALTH

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NETWORK

2125 CITRACADO PKWY # 200
ESCONDIDO, CA 92029-4159

Phone: (760) 755-7600

Fax: (760) 755-7699

After Hours Phone: (760)

755-7600

Provider Gender: Male

License number: A73282

NPI: 1235287947

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital, Scripps Mercy Hospital,

Scripps Mercy Hospital Chula

Vista

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

PATEL, GITANE

Provider ID: 262319

Board Certified Specialty: No

IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD

830 W VALLEY PKWY STE 300

ESCONDIDO, CA 92025-2529

Phone: (760) 743-5872

Fax:

After Hours Phone: (760)

743-5872

Provider Gender: Male

License number: A108603

NPI: 1710171434

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, Gujarati, Spanish,

Tagalog, Vietnamese

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital, Paradise Valley

Hospital, Scripps Memorial

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc, Imperial

Health Holdings Medical

Group-Sd

PATEL, GITANE, MD

Provider ID: 268741

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

830 W VALLEY PKWY STE 300

ESCONDIDO, CA 92025-2529

Phone: (760) 743-5872

Fax:

After Hours Phone: (760)

743-5872

Provider Gender: Male

License number: A108603

NPI: 1710171434

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, Gujarati, Spanish,

Tagalog, Vietnamese

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital, Paradise Valley

Hospital, Scripps Memorial

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc, Imperial

Health Holdings Medical

Group-Sd

PATEL, SARJAN H

Provider ID: 262407

Board Certified Specialty: No

IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD

830 W VALLEY PKWY STE 300

ESCONDIDO, CA 92025-2529

Phone: (800) 898-2020

Fax: (844) 897-3788

After Hours Phone: (800)

898-2020

Provider Gender: Male

License number: A114976

NPI: 1316199326

Provider English Spoken: Yes

Provider Language(s) Spoken:

Gujarati, Hindi, Spanish,

Tagalog, Vietnamese

Cultural Competency: No

Hospital Affiliation: Alvarado

Hospital Llc, Grossmont Hospital,

Scripps Memorial Hospital,

Paradise Valley Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

PATEL, SARJAN H , MD

Provider ID: 268802
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
830 W VALLEY PKWY STE 300
ESCONDIDO, CA 92025-2529
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800) 898-2020
Provider Gender: Male
License number: A114976
NPI: 1316199326
Provider English Spoken: Yes
Provider Language(s) Spoken: Gujarati, Hindi, Spanish, Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc, Grossmont Hospital, Scripps Memorial Hospital, Paradise Valley Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

PRABHU, SUJATA P

Provider ID: 262393
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD

830 W VALLEY PKWY STE 300
ESCONDIDO, CA 92025-2529
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800) 898-2020
Provider Gender: Female
License number: A115965
NPI: 1982872552
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog, Telugu, Vietnamese
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital, Alvarado Community Hospital, Scripps Memorial Hospital, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

PRABHU, SUJATA P , MD

Provider ID: 268920
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
830 W VALLEY PKWY STE 300
ESCONDIDO, CA 92025-2529
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800) 898-2020
Provider Gender: Female
License number: A115965

NPI: 1982872552
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog, Telugu, Vietnamese
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital, Alvarado Community Hospital, Scripps Memorial Hospital, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

SCHER, COLIN A

Provider ID: 277862
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY # 200
ESCONDIDO, CA 92029-4159
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760) 755-7600
Provider Gender: Male
License number: A42700
NPI: 1396816153
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Rady Childrens Hospital San Diego,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Palomar Medical Center,
Grossmont Hospital, Tri City
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

OTOLARYNGOLOGY / OTOLOGY / LARYNGOLOGY / RHINOLOGY

BLISS, MORGAN R

Provider ID: 206084
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
625 CITRACADO PKWY STE
206
ESCONDIDO, CA 92025-6428
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760)
755-7600
Provider Gender: Female
License number: A134647
NPI: 1760707657
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network
NATION, JAVAN J
Provider ID: 277844
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
2125 CITRACADO PKWY # 200
ESCONDIDO, CA 92029-4159
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760)
755-7600

Provider Gender: Male
License number: A125279
NPI: 1043478902
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Childrens Hosp And Resrch Ctr
At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

OTOLARYNGOLOGY

BLISS, MORGAN R

Provider ID: 277537
Board Certified Specialty: No
RADY CHILDRENS HEALTH

NETWORK
2125 CITRACADO PKWY # 200
ESCONDIDO, CA 92029-4159
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760)
755-7600
Provider Gender: Female
License number: A134647
NPI: 1760707657
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

FITZGERALD, PATRICK J , MD

Provider ID: 269266
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1955 CITRACADO PKWY STE
200
ESCONDIDO, CA 92029-4112
Phone: (858) 485-7870
Fax: (858) 485-6473
After Hours Phone: (858)
485-7870
Provider Gender: Male
License number: G80210
NPI: 1790882728
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Medical Ctr, Palomar Health
Downtown Campus, Pomerado
Hospital, Palomar Medical
Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

FRIESEN, TZYYNONG L
Provider ID: 277853
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
2125 CITRACADO PKWY # 200
ESCONDIDO, CA 92029-4159
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760)
755-7600
Provider Gender: Female
License number: A152327
NPI: 1952740177
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

JIANG, WEN A
Provider ID: 277860
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
2125 CITRACADO PKWY # 200
ESCONDIDO, CA 92029-4159
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760)
755-7600
Provider Gender: Female
License number: A99198
NPI: 1659305753
Provider English Spoken: Yes
Provider Language(s) Spoken:
Mandarin
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

LEUIN, SHELBY C
Provider ID: 206110
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
625 CITRACADO PKWY STE
206
ESCONDIDO, CA 92025-6428
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760)
755-7600

Provider Gender: Female
License number: A112930
NPI: 1124230909
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Childrens Hosp And Resrch Ctr
At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

PEDIATRIC CARDIOLOGY

HALEY, JESSICA E
Provider ID: 205689
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
625 CITRACADO PKWY STE
100
ESCONDIDO, CA 92025-6428
Phone: (760) 294-9260
Fax: (760) 294-9274
After Hours Phone: (760)
294-9260
Provider Gender: Female
License number: A125568
NPI: 1023329885
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SILVA SEPULVEDA, JOSE A

Provider ID: 206298
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
625 CITRACADO PKWY STE 100
ESCONDIDO, CA 92025-6428
Phone: (760) 294-9260
Fax: (760) 294-9274
After Hours Phone: (760) 294-9260
Provider Gender: Male
License number: A120119
NPI: 1417222472
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes

Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SUN, HEATHER Y

Provider ID: 206145

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
625 CITRACADO PKWY STE 100
ESCONDIDO, CA 92025-6428
Phone: (760) 294-9260
Fax: (760) 294-9274
After Hours Phone: (760) 294-9260
Provider Gender: Female
License number: A107943
NPI: 1811173883
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes

Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PEDIATRIC DERMATOLOGY

METTERLE, LAUREN M

Provider ID: 284661
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY # 100
ESCONDIDO, CA 92029-4159
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760) 755-7600
Provider Gender: Female
License number: A169271

NPI: 1033572391
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PEDIATRIC ORTHOPEDICS

UPASANI, VIDYADHAR V

Provider ID: 205918
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
625 CITRACADO PKWY STE 100
ESCONDIDO, CA 92025-6428
Phone: (855) 966-6789
Fax:
After Hours Phone: (855) 966-6789
Provider Gender: Male
License number: A97603
NPI: 1548417652
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

PEDIATRIC PULMONOLOGY

DUONG, THU A

Provider ID: 277857

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

2125 CITRACADO PKWY # 100
ESCONDIDO, CA 92029-4159

Phone: (760) 739-1543

Fax: (760) 294-9274

After Hours Phone: (760)
739-1543

Provider Gender: Female

License number: A127187

NPI: 1326309881

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

PEDIATRICS

AJAYI, TOLUWALASE A

Provider ID: 205718

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

2185 CITRACADO PKWY
ESCONDIDO, CA 92029-4159

Phone: (442) 281-2850

Fax: (442) 281-2999

After Hours Phone: (442)
281-2850

Provider Gender: Female

License number: A121454

NPI: 1316175912

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps
Memorial Hospital, Scripps

Mercy Hospital, Rady Childrens
Hospital San Diego, Scripps

Mercy Hospital Chula Vista,
Scripps Green Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

CAMERON, MELISSA A

Provider ID: 116006

Board Certified Specialty: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED
FNDTN

2185 CITRACADO PKWY
ESCONDIDO, CA 92029-4159

Phone: (442) 281-2850

Fax:

After Hours Phone: (442)

281-2850

Provider Gender: Female

License number: A125249

NPI: 1902983752

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego,

Palomar Medical Center

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

CAMERON, MELISSA A

Provider ID: 205966

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

2185 CITRACADO PKWY
ESCONDIDO, CA 92029-4159

Phone: (442) 281-2850

Fax: (442) 281-2999

After Hours Phone: (442)
281-2850

Provider Gender: Female

License number: A125249

NPI: 1902983752

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego,

Palomar Health Downtown

Campus, Palomar Medical

Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network</p>	<p>FATAYERJI, NABIL I <i>Provider ID:</i> 52508 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 2185 CITRACADO PKWY ESCONDIDO, CA 92029-4159 <i>Phone:</i> (442) 281-2850 <i>Fax:</i> <i>After Hours Phone:</i> (442) 281-2850 <i>Provider Gender:</i> Male <i>License number:</i> A63224 <i>NPI:</i> 1649341405 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Pomerado Hospital, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Palomar Medical Center, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Ucsd Medical Ctr</p>	<p><i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 2185 CITRACADO PKWY ESCONDIDO, CA 92029-4159 <i>Phone:</i> (442) 281-2850 <i>Fax:</i> <i>After Hours Phone:</i> (442) 281-2850 <i>Provider Gender:</i> Male <i>License number:</i> G63111 <i>NPI:</i> 1376614131 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Scripps Memorial Hospital Encinitas, Pomerado Hospital, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Palomar Medical Center, Scripps Memorial Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No</p>
<p>DE LA ROSA, IVONNE E <i>Provider ID:</i> 206029 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 2185 CITRACADO PKWY ESCONDIDO, CA 92029-4159 <i>Phone:</i> (442) 281-2850 <i>Fax:</i> (442) 281-2999 <i>After Hours Phone:</i> (442) 281-2850 <i>Provider Gender:</i> Female <i>License number:</i> A49734 <i>NPI:</i> 1174695795 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Sharp Memorial Hospital, Rady Childrens Hospital San Diego, El Centro Regional Medical Center, Valley Childrens Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No</p>	<p><i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network</p>	<p><i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network</p>
<p><i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network</p>	<p>GOLEMBESKI, DAVID J <i>Provider ID:</i> 52528</p>	<p>MOYER, LAUREL B <i>Provider ID:</i> 116076 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 2185 CITRACADO PKWY ESCONDIDO, CA 92029-4159</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (442) 281-2850
Fax:
After Hours Phone: (442) 281-2850
Provider Gender: Female
License number: C144070
NPI: 1598970378
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PARKER, PAUL C

Provider ID: 205757
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
2185 CITRACADO PKWY
ESCONDIDO, CA 92029-4159
Phone: (442) 281-2850
Fax: (442) 281-2999
After Hours Phone: (442) 281-2850
Provider Gender: Male
License number: A54747
NPI: 1841202710
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Marian Regional Medical Center, Rady

Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SAUER, CHARLES W

Provider ID: 52544
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
2185 CITRACADO PKWY
ESCONDIDO, CA 92029-4159
Phone: (442) 281-2850
Fax:
After Hours Phone: (442) 281-2850
Provider Gender: Male
License number: 20A9535
NPI: 1538388988
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Scripps Memorial Hospital Encinitas, Palomar Medical Center, Scripps Mercy Hospital Chula Vista, Pomerado Hospital, Scripps Memorial Hospital, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PHYSICAL MEDICINE / REHABILITATION

RYAN, KYLE

Provider ID: 275660
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
625 CITRACADO PKWY
ESCONDIDO, CA 92025-6428
Phone: (760) 294-9260
Fax: (760) 294-9274
After Hours Phone: (760) 294-9260
Provider Gender: Male
License number: A170177
NPI: 1447645742
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/25
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PHYSICIANS ASSISTANT

ASARO, AMANDA M

Provider ID: 277871

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D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY # 100
ESCONDIDO, CA 92029-4159
Phone: (760) 480-8770
Fax: (760) 480-8811
After Hours Phone: (760) 480-8770
Provider Gender: Female
License number: PA18493
NPI: 1306961313
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

BALDWIN, DONNA J

Provider ID: 268770
Board Certified Specialty: No
HEALTH EXCEL IPA INC
1035 E GRAND AVE STE 101
ESCONDIDO, CA 92025-4601
Phone: (760) 480-4747
Fax: (760) 480-0828
After Hours Phone: (760) 480-4747
Provider Gender: Female
License number: PA23310
NPI: 1649692369
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

BURNEY, MELISSA A

Provider ID: 285891
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1955 CITRACADO PKWY STE 102
ESCONDIDO, CA 92029-4111
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760) 631-3000
Provider Gender: Female
License number: PA58612
NPI: 1386260842
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

CHATFIELD, ALEXANDRA J

Provider ID: 276716
Board Certified Specialty: No

COMMUNITY CARE IPA LLC
1955 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029-4112
Phone: (760) 743-4789
Fax: (858) 673-5187
After Hours Phone: (760) 743-4789
Provider Gender: Female
License number: PA57107
NPI: 1215584628
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

DICKINSON, ALLISON J

Provider ID: 277863
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY # 100
ESCONDIDO, CA 92029-4159
Phone: (760) 480-8770
Fax: (760) 480-8811
After Hours Phone: (760) 480-8770
Provider Gender: Female
License number: PA17163
NPI: 1972655389
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

FLOCO, VIRGINIA A

Provider ID: 277864
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY # 200
ESCONDIDO, CA 92029-4159
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760) 755-7600
Provider Gender: Female
License number: PA20788
NPI: 1982798112
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

HUANG, STEPHANIE K

Provider ID: 252990

Board Certified Specialty: No
HEALTH EXCEL IPA INC
1955 CITRACADO PKWY STE 102
ESCONDIDO, CA 92029-4111
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760) 631-3000
Provider Gender: Female
License number: PA21008
NPI: 1073826210
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/200
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

INOCELDA, ANDREW G , NPA

Provider ID: 269090
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1955 CITRACADO PKWY STE 102
ESCONDIDO, CA 92029-4111
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760) 631-3000
Provider Gender: Male
License number: PA19207
NPI: 1497950208
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

LAZAR, ANITA A

Provider ID: 277805
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY # 200
ESCONDIDO, CA 92029-4159
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760) 755-7600
Provider Gender: Female
License number: PA55984
NPI: 1609208198
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MCCAULEY, KRISTINA R

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider ID: 277875
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY # 200
ESCONDIDO, CA 92029-4159
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760) 755-7600
Provider Gender: Female
License number: PA52100
NPI: 1063819944
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MUNCH, LINH D
Provider ID: 277843
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY # 100
ESCONDIDO, CA 92029-4159
Phone: (760) 480-8770
Fax: (760) 480-8811
After Hours Phone: (760) 480-8770
Provider Gender: Female
License number: PA14223
NPI: 1679792725
Provider English Spoken: Yes

Provider Language(s) Spoken: Network
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PAIK, CHRISTINA N
Provider ID: 277803
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY # 100
ESCONDIDO, CA 92029-4159
Phone: (760) 480-8770
Fax: (760) 480-8811
After Hours Phone: (760) 480-8770
Provider Gender: Female
License number: PA21680
NPI: 1174811475
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health

ROSS, ANNE T
Provider ID: 269221
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
425 N DATE ST
ESCONDIDO, CA 92025-3413
Phone: (760) 737-2035
Fax: (760) 520-8314
After Hours Phone: (760) 737-2035
Provider Gender: Female
License number: PA53359
NPI: 1447334883
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SANCHEZ, RAQUEL
Provider ID: 277886
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY # 100
ESCONDIDO, CA 92029-4159
Phone: (760) 480-8770
Fax: (760) 480-8811
After Hours Phone: (760) 480-8770
Provider Gender: Female
License number: PA14357
NPI: 1356560650
Provider English Spoken: Yes

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

VILLAPANDO, NORMA O

Provider ID: 277904

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

2125 CITRACADO PKWY # 100

ESCONDIDO, CA 92029-4159

Phone: (760) 755-7600

Fax: (760) 755-7699

After Hours Phone: (760)

755-7600

Provider Gender: Female

License number: PA56098

NPI: 1376947960

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

PODIATRIST

FARMER, STEVEN G

Provider ID: 268975

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

728 E VALLEY PKWY

ESCONDIDO, CA 92025-3052

Phone: (760) 737-6900

Fax: (360) 462-2748

After Hours Phone: (760)

737-6900

Provider Gender: Male

License number: DPM2895

NPI: 1215087770

Provider English Spoken: Yes

Provider Language(s) Spoken:

German, Spanish

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital Encinitas,

Scripps Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:* P, EB, IB, E, R

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

MORRIS, JASON B

Provider ID: 280080

Board Certified Specialty: No

HEALTH EXCEL IPA INC

736 E GRAND AVE

ESCONDIDO, CA 92025-4405

Phone: (760) 745-1226

Fax: (760) 745-6651

After Hours Phone: (760)

745-1226

Provider Gender: Male

License number: E4928

NPI: 1407012487

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Providence

Saint Johns Health Center,

Ronald Reagan UCLA Med Ctr,

Cedars Sinai Medical Center,

Palomar Health Downtown

Campus

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

NEGRON, RICARDO J , MD

Provider ID: 274646

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

1001 E GRAND AVE

ESCONDIDO, CA 92025-4604

Phone: (760) 520-8200

Fax: (360) 462-2749

After Hours Phone: (760)

520-8200

Provider Gender: Male

License number: DPM5260

NPI: 1932548393

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Providence St

Joseph Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

SMITH, COLLIN S

Provider ID: 276912

Board Certified Specialty: No
HEALTH EXCEL IPA INC

215 S HICKORY ST STE 118
ESCONDIDO, CA 92025-4304

Phone: (858) 485-1494

Fax: (858) 485-1515

After Hours Phone: (858)
485-1494

Provider Gender: Male

License number: DPM5268

NPI: 1801223896

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps
Memorial Hospital Encinitas

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

Phone: (760) 489-1458

Fax: (760) 489-1246

After Hours Phone: (760)
489-1458

Provider Gender: Male

License number: G33933

NPI: 1912015363

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Palomar
Medical Center, Pomerado

Hospital, Palomar Health
Downtown Campus

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Blue Shield Promise Health
Plan Direct, Community Care Ipa
Llc

BENDER, FRANK D , MD

Provider ID: 53988

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

488 E VALLEY PKWY STE 211
ESCONDIDO, CA 92025-3370

Phone: (760) 489-1458

Fax: (760) 489-1246

After Hours Phone: (760)
489-1458

Provider Gender: Male

License number: G33933

NPI: 1912015363

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Palomar
Medical Center, Pomerado
Hospital, Palomar Health
Downtown Campus

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Blue Shield Promise Health
Plan Direct, Community Care Ipa
Llc

POPPER, STEVEN T , MD

Provider ID: 204438

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

488 E VALLEY PKWY STE 211
ESCONDIDO, CA 92025-3370

Phone: (760) 489-1458

Fax: (760) 489-1246

After Hours Phone: (760)
489-1458

Provider Gender: Male

License number: A127156

NPI: 1679849012

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Palomar

Medical Center, Kaiser
Foundation Hospital Bellflower,
Scripps Mercy Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

PULMONARY DISEASES

BENDER, FRANK D

Provider ID: 257558

Board Certified Specialty: No
BLUE SHIELD PROMISE

HEALTH PLAN DIRECT

488 E VALLEY PKWY STE 211
ESCONDIDO, CA 92025-3370

Provider Gender: Male

License number: G33933

NPI: 1912015363

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Email:
Medical Group(s):
IPA: Community Care Ipa Llc

POPPER, STEVEN T

Provider ID: 276725
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
488 E VALLEY PKWY STE 201
ESCONDIDO, CA 92025-3398
Phone: (760) 489-1458
Fax: (760) 489-1246
After Hours Phone: (760)
489-1458
Provider Gender: Male
License number: A127156
NPI: 1679849012
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Palomar
Medical Center, Kaiser
Foundation Hospital Bellflower,
Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

RADIATION ONCOLOGY

COLEMAN, LORI A , MD

Provider ID: 221090
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
2125 CITRACADO PKWY # 110
ESCONDIDO, CA 92029-4159

Phone: (760) 735-7800
Fax: (760) 735-7810
After Hours Phone: (760)
735-7800
Provider Gender: Female
License number: G78635
NPI: 1053348920
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr, Sharp Memorial
Hospital, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 19/100
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

DEWITT, KELLY D , MD

Provider ID: 220044
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
2125 CITRACADO PKWY # 110
ESCONDIDO, CA 92029-4159
Phone: (760) 739-3371
Fax:
After Hours Phone: (760)
739-3371
Provider Gender: Female
License number: A74873
NPI: 1184668741
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Palomar
Medical Center, Sharp Chula

Vista Med Ctr, Grossmont
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 19/100
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

FULLER, DONALD B

Provider ID: 257140
Board Certified Specialty: No
HEALTH EXCEL IPA INC
701 E GRAND AVE STE 200
ESCONDIDO, CA 92025-4466
Phone: (760) 839-7370
Fax: (858) 429-7938
After Hours Phone: (760)
839-7370
Provider Gender: Male
License number: G62532
NPI: 1285632711
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital Chula Vista, Scripps
Memorial Hospital Encinitas,
Sharp Memorial Hospital, Scripps
Mercy Hospital, Alvarado
Hospital Llc, Scripps Memorial
Hospital, Scripps Green Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

FULLER, DONALD B , MD

Provider ID: 269237
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
701 E GRAND AVE STE 200
ESCONDIDO, CA 92025-4466
Phone: (760) 839-7370
Fax: (858) 429-7938
After Hours Phone: (760)
839-7370
Provider Gender: Male
License number: G62532
NPI: 1285632711
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital Chula Vista, Scripps
Memorial Hospital Encinitas,
Sharp Memorial Hospital, Scripps
Mercy Hospital, Alvarado
Hospital Llc, Scripps Memorial
Hospital, Scripps Green Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

IJAZ, TAHIR

Provider ID: 261914
Board Certified Specialty: No
HEALTH EXCEL IPA INC
701 E GRAND AVE STE 200
ESCONDIDO, CA 92025-4466

Phone: (760) 839-7370
Fax: (858) 429-7938
After Hours Phone: (760)
839-7370
Provider Gender: Male
License number: A52748
NPI: 1225036742
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: St Agnes
Medical Center, Palomar Health
Downtown Campus, Alvarado
Hospital Llc, Paradise Valley
Hospital, Scripps Mercy Hospital
Chula Vista, Scripps Memorial
Hospital Encinitas, Sharp
Memorial Hospital, Scripps
Memorial Hospital, Scripps
Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

IJAZ, TAHIR, MD

Provider ID: 269244
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
701 E GRAND AVE STE 200
ESCONDIDO, CA 92025-4466
Phone: (760) 839-7370
Fax: (858) 429-7938
After Hours Phone: (760)
839-7370
Provider Gender: Male
License number: A52748

NPI: 1225036742
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: St Agnes
Medical Center, Palomar Health
Downtown Campus, Alvarado
Hospital Llc, Paradise Valley
Hospital, Scripps Mercy Hospital
Chula Vista, Scripps Memorial
Hospital Encinitas, Sharp
Memorial Hospital, Scripps
Memorial Hospital, Scripps
Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

JABBARI, SIAVASH, MD

Provider ID: 268786
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
2125 CITRACADO PKWY # 110
ESCONDIDO, CA 92029-4159
Phone: (760) 739-3371
Fax: (760) 739-3779
After Hours Phone: (760)
739-3371
Provider Gender: Male
License number: A99269
NPI: 1720314107
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi
Cultural Competency: No
Hospital Affiliation: Sharp Chula

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Vista Med Ctr, Grossmont
Hospital, Sharp Memorial
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

PEJAVAR, SUNANDA M , MD
Provider ID: 221076
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
2125 CITRACADO PKWY # 110
ESCONDIDO, CA 92029-4159
Phone: (760) 739-3371
Fax:
After Hours Phone: (760)
739-3371
Provider Gender: Female
License number: A103733
NPI: 1912232513
Provider English Spoken: Yes
Provider Language(s) Spoken:
Kannada, Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Sharp Memorial
Hospital, Sharp Chula Vista Med
Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 19/100
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SHIRAZI, REZA
Provider ID: 262267
Board Certified Specialty: No
HEALTH EXCEL IPA INC
701 E GRAND AVE STE 200
ESCONDIDO, CA 92025-4466
Phone: (760) 839-7370
Fax: (858) 429-7938
After Hours Phone: (760)
839-7370
Provider Gender: Male
License number: A95800
NPI: 1336175272

Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Persian, Spanish
Cultural Competency: No
Hospital Affiliation: Palomar
Health Downtown Campus,
Pomerado Hospital, Scripps
Memorial Hospital Encinitas,
Scripps Mercy Hospital Chula
Vista, Scripps Memorial Hospital,
Scripps Mercy Hospital, Alvarado
Hospital Llc, Scripps Green
Hospital, Sharp Memorial
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

SHIRAZI, REZA, MD
Provider ID: 269248
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
701 E GRAND AVE STE 200

ESCONDIDO, CA 92025-4466
Phone: (760) 839-7370
Fax: (858) 429-7938
After Hours Phone: (760)
839-7370
Provider Gender: Male
License number: A95800
NPI: 1336175272
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Persian, Spanish
Cultural Competency: No
Hospital Affiliation: Palomar
Health Downtown Campus,
Pomerado Hospital, Scripps
Memorial Hospital Encinitas,
Scripps Mercy Hospital Chula
Vista, Scripps Memorial Hospital,
Scripps Mercy Hospital, Alvarado
Hospital Llc, Scripps Green
Hospital, Sharp Memorial
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

SHIRAZI, REZA
Provider ID: 54453
Board Certified Specialty: No
GENESIS HEALTHCARE
PARTNERS PC
701 E GRAND AVE STE 200
ESCONDIDO, CA 92025-4466
Phone: (760) 839-7370
Fax:
After Hours Phone: (760)
839-7370

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Male
License number: A95800
NPI: 1336175272
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Persian, Spanish
Cultural Competency: No
Hospital Affiliation: Pomerado Hospital, Scripps Memorial Hospital Encinitas, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Scripps Mercy Hospital, Alvarado Hospital Llc, Scripps Green Hospital, Sharp Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-4PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

UHL, BARRY M , MD
Provider ID: 243529
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
2125 CITRACADO PKWY # 110
ESCONDIDO, CA 92029-4159
Phone: (760) 739-3371
Fax: (760) 739-3779
After Hours Phone: (760) 739-3371
Provider Gender: Male
License number: A71969
NPI: 1811936693
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish

Cultural Competency: No
Hospital Affiliation: Palomar Medical Center, Sharp Chula Vista Med Ctr, Sharp Memorial Hospital, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 19/100
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

VAKILIAN, SIAVOSH
Provider ID: 279237
Board Certified Specialty: No
HEALTH EXCEL IPA INC
701 E GRAND AVE STE 200
ESCONDIDO, CA 92025-4466
Phone: (760) 839-7370
Fax: (858) 429-7938
After Hours Phone: (760) 839-7370
Provider Gender: Male
License number: A133482
NPI: 1427456151
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Pioneers Memorial Hospital, El Centro Regional Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,

Health Excel Ipa Inc
VOLPP, PAUL B , MD
Provider ID: 221103
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
2125 CITRACADO PKWY # 110
ESCONDIDO, CA 92029-4159
Phone: (760) 735-7800
Fax: (760) 735-7810
After Hours Phone: (760) 735-7800
Provider Gender: Male
License number: A86307
NPI: 1225186232
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Sharp Chula Vista Med Ctr, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 19/100
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

WEINSTEIN, GEOFFREY D , MD
Provider ID: 220041
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
2125 CITRACADO PKWY # 110
ESCONDIDO, CA 92029-4159
Phone: (760) 739-3371
Fax:
After Hours Phone: (760) 739-3371

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Male
License number: A54109
NPI: 1841233947
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
 Hospital, Sharp Memorial
 Hospital, Sharp Chula Vista Med
 Ctr

Medi-Cal Open Panel: Yes
Min/Max Age: 19/100
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

ZENTNER, PHILLIP G , MD
Provider ID: 221092
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 2125 CITRACADO PKWY # 110
 ESCONDIDO, CA 92029-4159
Phone: (760) 735-7800
Fax:
After Hours Phone: (760)
 735-7800
Provider Gender: Male
License number: G83516
NPI: 1063452415
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
 Memorial Hospital, Palomar
 Medical Center, Grossmont
 Hospital, Sharp Chula Vista Med
 Ctr, Mercy Medical Center
 Redding

Medi-Cal Open Panel: Yes
Min/Max Age: 19/100
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

RADIOLOGY DIAGNOSTIC X-RAY

NALBANDIAN, ALLEN B
Provider ID: 29148
Board Certified Specialty: No
 VALLEY RADIOLOGY
 CONSULTANTS MED GRP INC
 255 N ELM ST STE 102
 ESCONDIDO, CA 92025-3431
Phone: (760) 739-5400
Fax:
After Hours Phone: (760)
 739-5400
Provider Gender: Male
License number: A54742
NPI: 1619938099
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Pomerado Hospital, Palomar
 Medical Center, Scripps Green
 Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
♿ Accessibility: W
Hours: M-F 7AM-9PM, SA
 9AM-5PM
Website:
Email:
Medical Group(s):

IPA:
SUNG, RAYMOND Y
Provider ID: 123332
Board Certified Specialty: No
 VALLEY RADIOLOGY
 CONSULTANTS MED GRP INC
 255 N ELM ST STE 102
 ESCONDIDO, CA 92025-3431
Phone: (760) 739-5400
Fax:
After Hours Phone: (760)
 739-5400
Provider Gender: Male
License number: A63965
NPI: 1023079365
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Pomerado
 Hospital, Scripps Green Hospital,
 Palomar Medical Center
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
♿ Accessibility: W
Hours: M-F 7AM-9PM, SA
 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

RADIOLOGY

VAKILIAN, SIAVOSH
Provider ID: 283206
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 701 E GRAND AVE STE 200
 ESCONDIDO, CA 92025-4466

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (760) 839-7370
Fax: (858) 429-7938
After Hours Phone: (760) 839-7370
Provider Gender: Male
License number: A133482
NPI: 1427456151
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Pioneers Memorial Hospital, El Centro Regional Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

REGISTERED PHYSICAL THERAPIST

CULLISON, KALEB B
Provider ID: 269216
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
255 N ELM ST STE 202
ESCONDIDO, CA 92025-3431
Phone: (760) 504-0223
Fax: (760) 504-0224
After Hours Phone: (760) 504-0223
Provider Gender: Male
License number: PT38863
NPI: 1326306762
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No

Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

DE FARIA, GABRIEL J
Provider ID: 271017
Board Certified Specialty: No
HEALTH EXCEL IPA INC
255 N ELM ST STE 202
ESCONDIDO, CA 92025-3431
Phone: (442) 277-4142
Fax: (442) 277-4310
After Hours Phone: (442) 277-4142
Provider Gender: Male
License number: PT292374
NPI: 1134669120

Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

DESROSIERS, GARRETT R
Provider ID: 270991
Board Certified Specialty: No
HEALTH EXCEL IPA INC
255 N ELM ST STE 202

ESCONDIDO, CA 92025-3431
Phone: (442) 277-4142
Fax: (442) 277-4310
After Hours Phone: (442) 277-4142
Provider Gender: Male
License number: PT291404
NPI: 1679921084
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

DESROSIERS, KAYLEIGH A
Provider ID: 271013
Board Certified Specialty: No
HEALTH EXCEL IPA INC
255 N ELM ST STE 202
ESCONDIDO, CA 92025-3431
Phone: (442) 277-4142
Fax: (442) 277-4310
After Hours Phone: (442) 277-4142
Provider Gender: Female
License number: PT291392
NPI: 1689039349
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

DUENAS, STEVEN

Provider ID: 270983

Board Certified Specialty: No

HEALTH EXCEL IPA INC

255 N ELM ST STE 202

ESCONDIDO, CA 92025-3431

Phone: (442) 277-4142

Fax: (442) 277-4310

After Hours Phone: (442)

277-4142

Provider Gender: Male

License number: PT294820

NPI: 1457841165

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

MCGEE, JACQUELINE M

Provider ID: 252473

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

1815 E VALLEY PKWY STE 5

ESCONDIDO, CA 92027-2550

Phone: (760) 434-6100

Fax: (760) 434-4583

After Hours Phone: (760)

434-6100

Provider Gender: Female

License number: PT294790

NPI: 1194217133

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 8/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

MEISTER, SARAH

Provider ID: 269213

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

1815 E VALLEY PKWY STE 5

ESCONDIDO, CA 92027-2550

Phone: (760) 434-6100

Fax: (760) 434-4583

After Hours Phone: (760)

434-6100

Provider Gender: Female

License number: PT291898

NPI: 1376091561

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

PARKER, CORY

Provider ID: 269227

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

1815 E VALLEY PKWY STE 5

ESCONDIDO, CA 92027-2550

Phone: (760) 434-6100

Fax: (760) 434-4583

After Hours Phone: (760)

434-6100

Provider Gender: Male

License number: PT296440

NPI: 1194288126

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

RHEUMATOLOGY

CHIRASEVEENUPRAPUND, PETER

Provider ID: 277906

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

2125 CITRACADO PKWY # 100

ESCONDIDO, CA 92029-4159

Phone: (760) 294-9260

Fax: (760) 294-9274

After Hours Phone: (760)

294-9260

Provider Gender: Male

License number: A68277

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1467518209
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Childrens Hosp And Resrch Ctr
At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

RAO, SOUMYA G , MD

Provider ID: 269101
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
488 E VALLEY PKWY STE 211
ESCONDIDO, CA 92025-3370
Phone: (858) 675-3150
Fax: (858) 924-1775
After Hours Phone: (858)
675-3150
Provider Gender: Female
License number: A99911
NPI: 1033388616
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi, Kannada, Russian,
Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Sharp Chula
Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SHEETS, ROBERT M

Provider ID: 277890
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
2125 CITRACADO PKWY # 100
ESCONDIDO, CA 92029-4159
Phone: (760) 294-9260
Fax: (760) 294-9274
After Hours Phone: (760)
294-9260
Provider Gender: Male
License number: G31567
NPI: 1013088772
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

SURGERY CARDIOVASCULAR

LIN, YUAN H , MD

Provider ID: 241290
Board Certified Specialty: No
COMMUNITY CARE IPA LLC

1955 CITRACADO PKWY STE
300
ESCONDIDO, CA 92029-4113
Phone: (619) 823-3146
Fax: (619) 554-8500
After Hours Phone: (619)
823-3146
Provider Gender: Male
License number: A43050
NPI: 1487650412
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cantonese, Mandarin, Yue
Chinese
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr, Grossmont
Hospital, Palomar Health
Downtown Campus
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

ONAITIS, MARK

Provider ID: 210299
Board Certified Specialty: No
UCSD MEDICAL GROUP
2185 CITRACADO PKWY
ESCONDIDO, CA 92029-4159
Phone: (442) 281-5000
Fax:
After Hours Phone: (442)
281-5000
Provider Gender: Male
License number: C144886
NPI: 1841310638
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr, Tri City Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SURGERY GENERAL VASCULAR

BULKIN, ANATOLY J , MD
Provider ID: 51838
Board Certified Specialty: No
SURGICAL ASSOCS OF SAN
DIEGO PROF CORP
625 CITRACADO PKWY STE
203
ESCONDIDO, CA 92025-6428
Phone: (760) 739-7666
Fax: (760) 739-7633
After Hours Phone: (760)
739-7666
Provider Gender: Male
License number: G79826
NPI: 1275593154
Provider English Spoken: Yes
Provider Language(s) Spoken:
Russian, Spanish
Cultural Competency: No
Hospital Affiliation: Palomar
Health Downtown Campus,
Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc
CHANG, ALEXANDER T , MD
Provider ID: 75855
Board Certified Specialty: No
SURGICAL ASSOCS OF SAN
DIEGO PROF CORP
625 CITRACADO PKWY STE
203
ESCONDIDO, CA 92025-6428
Phone: (760) 739-7666
Fax: (760) 739-7633
After Hours Phone: (760)
739-7666

Provider Gender: Male
License number: A123245
NPI: 1376860056
Provider English Spoken: Yes
Provider Language(s) Spoken:
Korean
Cultural Competency: No
Hospital Affiliation: Palomar
Health Downtown Campus,
Pomerado Hospital, Palomar
Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

NEMCEFF, DENNIS, MD
Provider ID: 246553
Board Certified Specialty: No
COMMUNITY CARE IPA LLC

625 CITRACADO PKWY STE
203
ESCONDIDO, CA 92025-6428
Phone: (760) 739-7666
Fax: (760) 739-7633
After Hours Phone: (760)
739-7666
Provider Gender: Male
License number: A123910
NPI: 1427371228
Provider English Spoken: Yes
Provider Language(s) Spoken:
Russian
Cultural Competency: No
Hospital Affiliation: Palomar
Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SURGERY GENERAL

CHANG, ALEXANDER T
Provider ID: 75855
Board Certified Specialty: No
SURGICAL ASSOCS OF SAN
DIEGO PROF CORP
625 CITRACADO PKWY STE
203
ESCONDIDO, CA 92025-6428
Phone: (760) 739-7666
Fax:
After Hours Phone: (760)
739-7666
Provider Gender: Male
License number: A123245
NPI: 1376860056
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken: Korean
Cultural Competency: No
Hospital Affiliation: Pomerado Hospital, Palomar Medical Center
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-F 7AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

GROVE, JAY R , MD

Provider ID: 245226
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 2185 CITRACADO PKWY
 ESCONDIDO, CA 92029-4159
Phone: (760) 300-3647
Fax:
After Hours Phone: (760) 300-3647
Provider Gender: Male
License number: A60426
NPI: 1912971334
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Pomerado Hospital, Palomar Medical Center, Tri City Medical Ctr, Palomar Health Downtown Campus, Scripps Memorial Hospital Encinitas, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SURGERY HAND

PATEL, ARUSH A , MD

Provider ID: 77773
Board Certified Specialty: No
 ARCH HEALTH PARTNERS
 1955 CITRACADO PKWY STE 200
 ESCONDIDO, CA 92029-4112
Phone: (760) 743-4789
Fax: (760) 743-4779
After Hours Phone: (760) 743-4789
Provider Gender: Male
License number: A105982
NPI: 1487892352
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus, Pomerado Hospital, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SURGERY NEUROLOGICAL

NGUYEN, ANDREW D

Provider ID: 244140
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 1955 CITRACADO PKWY STE 102
 ESCONDIDO, CA 92029-4111
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A91563
NPI: 1720216542
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish, Vietnamese
Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus, Ucsd Medical Ctr, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

STERN, MARK S , MD

Provider ID: 243486
Board Certified Specialty: Yes
 COMMUNITY CARE IPA LLC
 705 E OHIO AVE
 ESCONDIDO, CA 92025-3418
Phone: (760) 489-9490
Fax: (760) 489-7638
After Hours Phone: (760) 489-9490
Provider Gender: Male
License number: G47596

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1649282765
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Pomerado Hospital, Palomar Medical Center, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SURGERY ORTHOPEDIC

BARBA, DANIEL, MD
Provider ID: 77895
Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC
1955 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029-4112
Phone: (760) 743-4789
Fax: (760) 743-4779
After Hours Phone: (760) 743-4789
Provider Gender: Male
License number: A119351
NPI: 1407128580
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Pomerado Hospital, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):

No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

CHAMBERS, HENRY G
Provider ID: 277814
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY # 100
ESCONDIDO, CA 92029-4159
Phone: (760) 480-8770
Fax: (760) 480-8811
After Hours Phone: (760) 480-8770
Provider Gender: Male
License number: A44985
NPI: 1205907060
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

EDMONDS, ERIC W
Provider ID: 277831
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY # 100

ESCONDIDO, CA 92029-4159
Phone: (760) 480-8770
Fax: (760) 480-8811
After Hours Phone: (760) 480-8770
Provider Gender: Male
License number: A86165
NPI: 1013048412
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

KIMBALL, MICHAEL P , MD
Provider ID: 122878
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
457 N ELM ST
ESCONDIDO, CA 92025-3001
Phone: (858) 455-6460
Fax: (858) 455-5362
After Hours Phone: (858) 455-6460
Provider Gender: Male
License number: G76060
NPI: 1588648653
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps

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D. Directorio de proveedores de atención especializada

Memorial Hospital, Scripps
 Mercy Hospital Chula Vista,
 Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc, Imperial
 Health Holdings Medical
 Group-Sd

KNUTSON, THOMAS R , MD
Provider ID: 31099
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 1955 CITRACADO PKWY STE
 200
 ESCONDIDO, CA 92029-4112
Phone: (760) 743-4789
Fax: (760) 743-4779
After Hours Phone: (760)
 743-4789
Provider Gender: Male
License number: G50268
NPI: 1962409938
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Palomar
 Health Downtown Campus,
 Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
 IPA: Community Care Ipa Llc
OWSLEY, KEVIN C , MD
Provider ID: 269326
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 1955 CITRACADO PKWY STE
 200
 ESCONDIDO, CA 92029-4112
Phone: (858) 485-0050
Fax: (858) 485-5071
After Hours Phone: (858)
 485-0050
Provider Gender: Male
License number: A98739
NPI: 1992714406
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Palomar
 Health Downtown Campus,
 Pomerado Hospital, Marina Del
 Rey Hospital, Palomar Medical
 Center, Adventist Health White
 Memorial
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc
PENNOCK, ANDREW T
Provider ID: 277874
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 2125 CITRACADO PKWY # 100
 ESCONDIDO, CA 92029-4159

Phone: (760) 480-8770
Fax: (760) 480-8811
After Hours Phone: (760)
 480-8770
Provider Gender: Male
License number: A90049
NPI: 1619151685
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Childrens Hosp And Resrch Ctr
 At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Rady Childrens Health
 Network

SHARP, LORRA M , MD
Provider ID: 243552
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 1955 CITRACADO PKWY STE
 200
 ESCONDIDO, CA 92029-4112
Phone: (760) 743-4789
Fax: (858) 673-5187
After Hours Phone: (760)
 743-4789
Provider Gender: Female
License number: A117353
NPI: 1689689176
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Pomona

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Valley Hosp Med Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

WALLACE, CHARLES D
 Provider ID: 277829
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 2125 CITRACADO PKWY # 100
 ESCONDIDO, CA 92029-4159
 Phone: (760) 480-8770
 Fax: (760) 480-8811
 After Hours Phone: (760) 480-8770
 Provider Gender: Male
 License number: G67953
 NPI: 1144229600
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Parkview Community Hospital
 Medical Center

Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

YASZAY, BURT
 Provider ID: 277839
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 2125 CITRACADO PKWY # 100
 ESCONDIDO, CA 92029-4159
 Phone: (760) 480-8770
 Fax: (760) 480-8811
 After Hours Phone: (760) 480-8770
 Provider Gender: Male
 License number: A100336
 NPI: 1770798647
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Sharp Memorial Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

SURGERY PEDIATRIC

KLING, KAREN M
 Provider ID: 206130
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 625 CITRACADO PKWY STE
 206
 ESCONDIDO, CA 92025-6428

Phone: (760) 755-7600
 Fax: (760) 755-7699
 After Hours Phone: (760) 755-7600
 Provider Gender: Female
 License number: A53583
 NPI: 1982775144
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Ucsd Medical Ctr, Sharp Mary
 Birch Hosp For Women And
 Newborns, National Naval Med
 Ctr, Sharp Memorial Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

UROLOGY

CHIANG, GEORGE
 Provider ID: 277830
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 2125 CITRACADO PKWY # 100
 ESCONDIDO, CA 92029-4159
 Phone: (760) 294-9260
 Fax: (760) 294-9274
 After Hours Phone: (760) 294-9260
 Provider Gender: Male
 License number: A98687
 NPI: 1093773954
 Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Parkview Community Hospital Medical Center, Northern Inyo Hosp

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

COHEN, EDWARD S

Provider ID: 260182
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 1955 CITRACADO PKWY STE 302
 ESCONDIDO, CA 92029-4113
Phone: (760) 743-5111
Fax:
After Hours Phone: (760) 743-5111
Provider Gender: Male
License number: G56844
NPI: 1093756827
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Ucsd Medical Ctr, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):

No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

COHEN, EDWARD S , MD

Provider ID: 269341
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 1955 CITRACADO PKWY STE 302
 ESCONDIDO, CA 92029-4113
Phone: (760) 743-5111
Fax:
After Hours Phone: (760) 743-5111
Provider Gender: Male
License number: G56844
NPI: 1093756827
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Ucsd Medical Ctr, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

JONES, THOMAS A , MD

Provider ID: 75512

Board Certified Specialty: No
 GENESIS HEALTHCARE PARTNERS PC
 1955 CITRACADO PKWY STE 302
 ESCONDIDO, CA 92029-4113
Phone: (760) 743-5111
Fax: (858) 429-7934
After Hours Phone: (760) 743-5111
Provider Gender: Male
License number: G51735
NPI: 1922005859
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus, Pomerado Hospital, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

NGUYEN, HUNG H

Provider ID: 260387
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 1955 CITRACADO PKWY STE 302
 ESCONDIDO, CA 92029-4113
Phone: (760) 436-4558
Fax:
After Hours Phone: (760) 436-4558
Provider Gender: Male
License number: A142209

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1023488806
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Scripps
Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

VAPNEK, EVAN M

Provider ID: 261601
Board Certified Specialty: No
HEALTH EXCEL IPA INC
1955 CITRACADO PKWY STE
302
ESCONDIDO, CA 92029-4113
Phone: (760) 743-5111
Fax:
After Hours Phone: (760)
743-5111
Provider Gender: Male
License number: G75357
NPI: 1811003411
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista, Sharp Coronado
Hosp And Healthcare Ctr, Sharp
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

FALLBROOK

CERTIFIED NURSE PRACTITIONER

BERRIOS, ALVARO

Provider ID: 245684
Board Certified Specialty: No
HEALTH EXCEL IPA INC
593 E ELDER ST STE B
FALLBROOK, CA 92028-5000
Phone: (760) 723-5900
Fax: (760) 723-5906
After Hours Phone: (760)
723-5900
Provider Gender: Male
License number: NP16355
NPI: 1972654879
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

DERMATOLOGY

ROSS, ANDREW L , MD

Provider ID: 269334
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1309 S MISSION RD STE A
FALLBROOK, CA 92028-4168
Phone: (760) 728-7546
Fax: (760) 723-6208
After Hours Phone: (760)
728-7546
Provider Gender: Male
License number: A140430
NPI: 1700140738
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SAMADY, JOSEPH A , MD

Provider ID: 269328
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1309 S MISSION RD STE A
FALLBROOK, CA 92028-4168
Phone: (760) 728-7546
Fax: (760) 723-6208
After Hours Phone: (760)
728-7546
Provider Gender: Male
License number: A71411
NPI: 1013954908
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City
Hospital West, Tri City Medical

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D. Directorio de proveedores de atención especializada

Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ☯ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

NEPHROLOGY

HEBREO, JOSEPH D
 Provider ID: 262131
 Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 591 E ELDER ST STE C
 FALLBROOK, CA 92028-5001
 Phone: (760) 294-1660
 Fax: (760) 745-5016
 After Hours Phone: (760)
 294-1660
 Provider Gender: Male
 License number: A93436
 NPI: 1801868286
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish, Tagalog
 Cultural Competency: No
 Hospital Affiliation: Palomar
 Medical Center, Temecula Valley
 Hospital Inc, Palomar Health
 Downtown Campus
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ☯ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):

IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc, Imperial
 Health Holdings Medical
 Group-Sd

PHYSICIANS ASSISTANT

GORDON, BENJAMIN S
 Provider ID: 261023
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 1107 S MISSION RD
 FALLBROOK, CA 92028-3224
 Phone: (760) 451-0070
 Fax: (760) 451-1499
 After Hours Phone: (760)
 451-0070
 Provider Gender: Male
 License number: PA17205
 NPI: 1821184078
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 ☯ Accessibility: P, EB, IB, E, R
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

SERING, MALIA A , NPA
 Provider ID: 269279
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 1309 S MISSION RD STE A
 FALLBROOK, CA 92028-4168

Phone: (760) 728-7546
 Fax: (760) 723-6208
 After Hours Phone: (760)
 728-7546
 Provider Gender: Female
 License number: PA19459
 NPI: 1013198720
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ☯ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

REGISTERED PHYSICAL THERAPIST

KAPLAN, CHRISTOPHER C
 Provider ID: 269187
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 521 E ELDER ST STE 106
 FALLBROOK, CA 92028-3082
 Phone: (760) 723-8337
 Fax: (760) 723-8337
 After Hours Phone: (760)
 723-8337
 Provider Gender: Male
 License number: PT292488
 NPI: 1144764820
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):

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D. Directorio de proveedores de atención especializada

No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

IMPERIAL BEACH

REGISTERED PHYSICAL THERAPIST

SHEFFIELD, TIFFANY
Provider ID: 255403
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
600 PALM AVE STE 126
IMPERIAL BEACH, CA
91932-1246
Phone: (619) 482-3000
Fax:
After Hours Phone: (619)
482-3000
Provider Gender: Female
License number: PT296953
NPI: 1134774342
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

LA JOLLA

CERTIFIED NURSE

PRACTITIONER

NORTON, SARAH E
Provider ID: 207058
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 MEDICAL CENTER DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: NP95010335
NPI: 1730659756
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Scripps
Mercy Hospital, Scripps Mercy
Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

FAMILY PRACTICE

CHEN, ALICE I
Provider ID: 207166
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: 20A16077
NPI: 1265810337
Provider English Spoken: Yes
Provider Language(s) Spoken:
Chinese
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

NEONATAL / PERINATAL MEDICINE

KO, KIMBERLY J
Provider ID: 214507
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 MEDICAL CENTER DR
LA JOLLA, CA 92037
Phone: (858) 657-7000
Fax:
After Hours Phone: (858)
657-7000
Provider Gender: Female
License number: A77120
NPI: 1437448917
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:

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D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

OBSTETRICS / GYNECOLOGY

RIVAS, RENEE N

Provider ID: 284296

Board Certified Specialty: No

UCSD MEDICAL GROUP

9333 GENESEE AVE, STE 340
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: A173043

NPI: 1295263861

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 16/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

LA MESA

UROLOGY

DATO, PAUL E , MD

Provider ID: 269142

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

655 EUCLID AVE, STE 301

LA MESA, CA 91942

Phone: (619) 697-2456

Fax: (858) 429-7930

After Hours Phone: (619)

697-2456

Provider Gender: Male

License number: A43540

NPI: 1588632715

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc

LA JOLLA

ADVANCED HEART FAILURE AND TRANSPLANT CARDIOLOGY

HONG, KIMBERLY N

Provider ID: 246312

Board Certified Specialty: No

UCSD MEDICAL GROUP

9434 MEDICAL CENTER DR FL

1

LA JOLLA, CA 92037-1337

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: A156242

NPI: 1346515442

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

SILVA ENCISO, JORGE E

Provider ID: 120489

Board Certified Specialty: No

UCSD MEDICAL GROUP

9434 MEDICAL CENTER DR FL

1

LA JOLLA, CA 92037-1337

Phone: (858) 657-8530

Fax:

After Hours Phone: (858)

657-8530

Provider Gender: Male

License number: A117426

NPI: 1639404031

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

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D. Directorio de proveedores de atención especializada

Ctr, Pioneers Memorial Hospital,
El Centro Regional Medical
Center, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ALLERGY IMMUNOLOGY

BROIDE, DAVID H
Provider ID: 65132
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8322
Fax: (858) 657-8723
After Hours Phone: (858)
657-8322
Provider Gender: Male
License number: A38964
NPI: 1760422992
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

DOHERTY, TAYLOR A
Provider ID: 65163
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8322
Fax: (858) 657-8723
After Hours Phone: (858)
657-8322
Provider Gender: Male
License number: A86650
NPI: 1225015845
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Scripps Green Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HOFFMAN, HAROLD M
Provider ID: 65192
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # 1A
LA JOLLA, CA 92037-1300
Phone: (858) 657-8000
Fax:
After Hours Phone: (858)
657-8000
Provider Gender: Male
License number: A53101
NPI: 1326074261
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Rady Childrens Hospital San
Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

MODENA, BRIAN D
Provider ID: 282075
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 420
LA JOLLA, CA 92037-1212
Phone: (858) 457-3270
Fax: (858) 457-5723
After Hours Phone: (858)
457-3270
Provider Gender: Male
License number: A103242
NPI: 1235379207
Provider English Spoken: Yes
Provider Language(s) Spoken:
Italian
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Scripps Memorial Hospital,
Scripps Mercy Hospital, Scripps
Mercy Hospital Chula Vista,
Scripps Green Hospital
Medi-Cal Open Panel: No
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Email:
 Medical Group(s):
 IPA: Health Excel Ipa Inc

SMITH, TUKISA D

Provider ID: 255602
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-5350
 Fax:
 After Hours Phone: (858)
 657-5350
 Provider Gender: Female
 License number: A165499
 NPI: 1205194198

Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

WASSERMAN, STEPHEN I

Provider ID: 65321
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (619) 543-2347
 Fax:
 After Hours Phone: (619)
 543-2347
 Provider Gender: Male

License number: A23431
 NPI: 1588612154
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

ZURAW, BRUCE L

Provider ID: 65331
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-8723
 Fax:
 After Hours Phone: (858)
 657-8723
 Provider Gender: Male
 License number: G47065
 NPI: 1780634261
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps
 Green Hospital
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

ANESTHESIOLOGY PAIN MANAGEMENT

CASTELLANOS, JOEL

Provider ID: 243554
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 License number: A154199
 NPI: 1700296514
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

MADHAV, SANDIP J

Provider ID: 277675
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 9850 GENESEE AVE STE 530
 LA JOLLA, CA 92037-1213
 Phone: (760) 631-3000
 Fax: (760) 631-3016
 After Hours Phone: (760)
 631-3000
 Provider Gender: Male
 License number: A128918
 NPI: 1780903492

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D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Gujarati
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas,
Scripps Memorial Hospital, Tri
City Medical Ctr, Scripps Green
Hospital, Palomar Medical
Center, Pomerado Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

ANESTHESIOLOGY

OSWALD, JESSICA C

Provider ID: 239601
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A130925
NPI: 1427315118
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

TRIVEDI, SURAJ S

Provider ID: 246750
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A122196
NPI: 1699057885

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

TZENG, ERIC

Provider ID: 284578
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A153819
NPI: 1801258264
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CARDIAC ELECTROPHYSIOLOGY

HAMZEI, ALI R

Provider ID: 272340
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 780
LA JOLLA, CA 92037-1232
Phone: (858) 824-2900
Fax: (858) 824-2910
After Hours Phone: (858)
824-2900
Provider Gender: Male
License number: A62682
NPI: 1376511188
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi
Cultural Competency: No
Hospital Affiliation: Scripps

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D. Directorio de proveedores de atención especializada

Memorial Hospital, Scripps
 Memorial Hospital Encinitas
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Health Excel Ipa Inc

Email:
 Medical Group(s):
 IPA: Health Excel Ipa Inc,
 Imperial Health Holdings Medical
 Group-Sd

UCSD MEDICAL GROUP
 9434 MEDICAL CENTER DR FL
 1
 LA JOLLA, CA 92037-1337
 Phone: (858) 657-8530

Fax:
 After Hours Phone: (858)
 657-8530
 Provider Gender: Male
 License number: A141418
 NPI: 1861623506
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Arabic

CARDIOLOGY

AIZIN, VITALI
 Provider ID: 124981
 Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 9834 GENESEE AVE STE 101
 LA JOLLA, CA 92037-1214
 Phone: (858) 430-8455
 Fax: (858) 433-6946
 After Hours Phone: (858)
 430-8455
 Provider Gender: Male
 License number: A82761
 NPI: 1366545733
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy
 Hospital Chula Vista, Sharp
 Chula Vista Med Ctr, Scripps
 Memorial Hospital Encinitas,
 Scripps Memorial Hospital,
 Scripps Mercy Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:

AL KHIAMI, BELAL O
 Provider ID: 127143
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9434 MEDICAL CENTER DR FL
 1
 LA JOLLA, CA 92037-1337
 Phone: (858) 657-8530
 Fax:

After Hours Phone: (858)
 657-8530
 Provider Gender: Male
 License number: A141418
 NPI: 1861623506
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Arabic
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr, Pioneers Memorial
 Hospital, El Centro Regional
 Medical Center, Loma Linda
 University Med Ctr Murrieta,
 Temecula Valley Hospital Inc
 Medi-Cal Open Panel: No

After Hours Phone: (858)
 657-8530
 Provider Gender: Male
 License number: A141418
 NPI: 1861623506
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Arabic
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr, Pioneers Memorial
 Hospital, El Centro Regional
 Medical Center, Loma Linda
 University Med Ctr Murrieta,
 Temecula Valley Hospital Inc
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No

Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

AL KHIAMI, BELAL O
 Provider ID: 275993
 Board Certified Specialty: No

COHEN, DAVID N
 Provider ID: 127778
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 9850 GENESEE AVE STE 940
 LA JOLLA, CA 92037-1220
 Phone: (858) 658-0020
 Fax: (858) 658-0084
 After Hours Phone: (858)
 658-0020
 Provider Gender: Male
 License number: A110351

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1184955767

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Tri City

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

COTTER, BRUNO R

Provider ID: 65154

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR # 1D

LA JOLLA, CA 92037-1300

Phone: (858) 657-8530

Fax:

After Hours Phone: (858)

657-8530

Provider Gender: Male

License number: A67069

NPI: 1205886389

Provider English Spoken: Yes

Provider Language(s) Spoken:

French, German

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

GREENBERG, BARRY H

Provider ID: 65180

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR # 1D

LA JOLLA, CA 92037-1300

Phone: (858) 657-8530

Fax:

After Hours Phone: (858)

657-8530

Provider Gender: Male

License number: G29316

NPI: 1093773137

Provider English Spoken: Yes

Provider Language(s) Spoken:

French

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

HOFFMAYER, KURT S

Provider ID: 110437

Board Certified Specialty: No

UCSD MEDICAL GROUP

9434 MEDICAL CENTER DR FL

1

LA JOLLA, CA 92037-1337

Phone: (858) 657-8530

Fax:

After Hours Phone: (858)

657-8530

Provider Gender: Male

License number: A98256

NPI: 1841322195

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

KIM, PAUL J

Provider ID: 120632

Board Certified Specialty: No

UCSD MEDICAL GROUP

9434 MEDICAL CENTER DR FL

1

LA JOLLA, CA 92037-1337

Phone: (858) 657-8530

Fax:

After Hours Phone: (858)

657-8530

Provider Gender: Male

License number: A109213

NPI: 1417104837

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

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D. Directorio de proveedores de atención especializada

<i>Website:</i>	<i>Phone:</i> (800) 926-8273	<i>American Sign Language (ASL):</i>
<i>Email:</i>	<i>Fax:</i>	No
<i>Medical Group(s):</i>	<i>After Hours Phone:</i> (800)	<i>Accessibility:</i>
<i>IPA:</i> Ucsd Medical Group	926-8273	<i>Hours:</i> M-SA 9AM-5PM
KIM, PAUL J	<i>Provider Gender:</i> Male	<i>Website:</i>
<i>Provider ID:</i> 210202	<i>License number:</i> A109213	<i>Email:</i>
<i>Board Certified Specialty:</i> No	<i>NPI:</i> 1417104837	<i>Medical Group(s):</i>
UCSD MEDICAL GROUP	<i>Provider English Spoken:</i> Yes	<i>IPA:</i> Ucsd Medical Group
9434 MEDICAL CENTER DR FL	<i>Provider Language(s) Spoken:</i>	
1	<i>Cultural Competency:</i> No	MIZZELL, ANNA M
LA JOLLA, CA 92037-1337	<i>Hospital Affiliation:</i> Ucsd Medical	<i>Provider ID:</i> 83365
<i>Phone:</i> (858) 657-8530	Ctr, Ucsd La Jolla John Sally	<i>Board Certified Specialty:</i> No
<i>Fax:</i>	Thornton	UCSD MEDICAL GROUP
<i>After Hours Phone:</i> (858)	<i>Medi-Cal Open Panel:</i> Yes	9300 CAMPUS POINT DR
657-8530	<i>Min/Max Age:</i> 0/999	LA JOLLA, CA 92037-1300
<i>Provider Gender:</i> Male	<i>American Sign Language (ASL):</i>	<i>Phone:</i> (858) 657-7000
<i>License number:</i> A109213	No	<i>Fax:</i>
<i>NPI:</i> 1417104837	<i>Accessibility:</i>	<i>After Hours Phone:</i> (858)
<i>Provider English Spoken:</i> Yes	<i>Hours:</i> M-SA 9AM-5PM	657-7000
<i>Provider Language(s) Spoken:</i>	<i>Website:</i>	<i>Provider Gender:</i> Female
<i>Cultural Competency:</i> No	<i>Email:</i>	<i>License number:</i> A112810
<i>Hospital Affiliation:</i> Ucsd Medical	<i>Medical Group(s):</i>	<i>NPI:</i> 1851561021
Ctr, Ucsd La Jolla John Sally	<i>IPA:</i> Ucsd Medical Group	<i>Provider English Spoken:</i> Yes
Thornton	MIZZELL, ANNA M	<i>Provider Language(s) Spoken:</i>
<i>Medi-Cal Open Panel:</i> Yes	<i>Provider ID:</i> 214021	<i>Cultural Competency:</i> No
<i>Min/Max Age:</i> 0/999	<i>Board Certified Specialty:</i> No	<i>Hospital Affiliation:</i> Ucsd Medical
<i>American Sign Language (ASL):</i>	UCSD MEDICAL GROUP	Ctr
No	9434 MEDICAL CENTER DR FL	<i>Medi-Cal Open Panel:</i> No
<i>Accessibility:</i>	1	<i>Min/Max Age:</i> None
<i>Hours:</i> M-SA 9AM-5PM	LA JOLLA, CA 92037-1337	<i>American Sign Language (ASL):</i>
<i>Website:</i>	<i>Phone:</i> (800) 926-8273	No
<i>Email:</i>	<i>Fax:</i>	<i>Accessibility:</i> W
<i>Medical Group(s):</i>	<i>After Hours Phone:</i> (800)	<i>Hours:</i> M-F 8AM-5PM, SA
<i>IPA:</i> Ucsd Medical Group	926-8273	9AM-5PM
KIM, PAUL J	<i>Provider Gender:</i> Female	<i>Website:</i>
<i>Provider ID:</i> 244997	<i>License number:</i> A112810	<i>Email:</i>
<i>Board Certified Specialty:</i> No	<i>NPI:</i> 1851561021	<i>Medical Group(s):</i>
UCSD MEDICAL GROUP	<i>Provider English Spoken:</i> Yes	<i>IPA:</i> Ucsd Medical Group
9300 CAMPUS POINT DR	<i>Provider Language(s) Spoken:</i>	
LA JOLLA, CA 92037-1300	<i>Cultural Competency:</i> No	MIZZELL, ANNA M
	<i>Hospital Affiliation:</i> Ucsd Medical	<i>Provider ID:</i> 84119
	Ctr	<i>Board Certified Specialty:</i> No
	<i>Medi-Cal Open Panel:</i> Yes	UCSD MEDICAL GROUP
	<i>Min/Max Age:</i> 0/999	9434 MEDICAL CENTER DR FL
		1

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D. Directorio de proveedores de atención especializada

LA JOLLA, CA 92037-1337
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A112810
 NPI: 1851561021
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

NAREZKINA, ANNA D

Provider ID: 110162
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9434 MEDICAL CENTER DR FL 1
 LA JOLLA, CA 92037-1337
 Phone: (858) 657-8530
 Fax: (858) 657-8814
 After Hours Phone: (858) 657-8530
 Provider Gender: Female
 License number: A113210
 NPI: 1891958773
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Russian
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Pioneers Memorial

Hospital, El Centro Regional Medical Center
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

PHREANER, NICHOLAS J

Provider ID: 224864
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9434 MEDICAL CENTER DR FL 1
 LA JOLLA, CA 92037-1337
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A126789
 NPI: 1023373040
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

TAUB, PAM R

Provider ID: 277681
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A89612
 NPI: 1346355161
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital Encinitas, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

TAUB, PAM R

Provider ID: 277682
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9434 MEDICAL CENTER DR FL 1
 LA JOLLA, CA 92037-1337
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A89612
 NPI: 1346355161
 Provider English Spoken: Yes
 Provider Language(s) Spoken:

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D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

UREY, MARCUS A

Provider ID: 120573
Board Certified Specialty: No
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR FL 1
LA JOLLA, CA 92037-1337
Phone: (858) 657-8530
Fax:
After Hours Phone: (858) 657-8530
Provider Gender: Male
License number: A148944
NPI: 1972820058
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA:
WALTERS, DANIEL
Provider ID: 240403
Board Certified Specialty: No
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR FL 1
LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A129565
NPI: 1659665461
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

WETTERSTEN, NICHOLAS W
Provider ID: 210604
Board Certified Specialty: No
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR FL 1
LA JOLLA, CA 92037-1337
Phone: (858) 657-8630
Fax: (858) 657-8814
After Hours Phone: (858) 657-8630
Provider Gender: Male

License number: A122511
NPI: 1063701068
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CARDIOVASCULAR DISEASE

ADLER, ERIC D

Provider ID: 64793
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8530
Fax: (858) 657-8021
After Hours Phone: (858) 657-8530
Provider Gender: Male
License number: A116525
NPI: 1477699601
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

ADLER, ERIC D

Provider ID: 65369

Board Certified Specialty: No

UCSD MEDICAL GROUP

9434 MEDICAL CENTER DR FL 1

LA JOLLA, CA 92037-1337

Phone: (800) 926-8273

Fax: (858) 657-8021

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A116525

NPI: 1477699601

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

AIZIN, VITALI

Provider ID: 101014

Board Certified Specialty: No

INTEGRATIVE

CARDIOVASCULAR CENTER OF LA JOLLA

9834 GENESEE AVE STE 101

LA JOLLA, CA 92037-1214

Phone: (858) 430-8455

Fax:

After Hours Phone: (858)

430-8455

Provider Gender: Male

License number: A82761

NPI: 1366545733

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital Chula Vista, Sharp

Chula Vista Med Ctr, Scripps

Memorial Hospital Encinitas,

Scripps Memorial Hospital,

Scripps Mercy Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

AVALOS, ROY T

Provider ID: 272508

Board Certified Specialty: No

HEALTH EXCEL IPA INC

9850 GENESEE AVE STE 780

LA JOLLA, CA 92037-1232

Phone: (858) 824-2900

Fax: (858) 824-2910

After Hours Phone: (858)

824-2900

Provider Gender: Male

License number: A68893

NPI: 1154399632

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Scripps

Memorial Hospital Encinitas

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

BAHADORANI, JOHN N

Provider ID: 101235

Board Certified Specialty: No

UCSD MEDICAL GROUP

9434 MEDICAL CENTER DR FL 1

LA JOLLA, CA 92037-1337

Phone: (858) 657-8530

Fax:

After Hours Phone: (858)

657-8530

Provider Gender: Male

License number: A123767

NPI: 1780883082

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi, Persian, Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

BARNARD, DENISE D

Provider ID: 65123

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR # 1D
 LA JOLLA, CA 92037-1300
Phone: (858) 657-8530
Fax: (858) 657-8021
After Hours Phone: (858) 657-8530
Provider Gender: Female
License number: G65241
NPI: 1669497731
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BEN YEHUDA, ORI

Provider ID: 65125
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR # 1D
 LA JOLLA, CA 92037-1300
Phone: (858) 657-8530
Fax:
After Hours Phone: (858) 657-8530
Provider Gender: Male
License number: A51936
NPI: 1508912387
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None

American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BERMAN, BRETT J

Provider ID: 101016
Board Certified Specialty: No
 INTEGRATIVE
 CARDIOVASCULAR CENTER
 OF LA JOLLA
 9834 GENESEE AVE STE 101
 LA JOLLA, CA 92037-1214
Phone: (858) 430-8455
Fax:
After Hours Phone: (858) 430-8455
Provider Gender: Female
License number: A78854
NPI: 1457446684
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital, Ucsd Medical Ctr,
 Scripps Memorial Hospital,
 Scripps Mercy Hospital Chula
 Vista, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health
 Plan Direct, Community Care Ipa
 Llc, Health Excel Ipa Inc, Imperial

Health Holdings Medical
 Group-Sd

BERMAN, BRETT J

Provider ID: 101016
Board Certified Specialty: No
 INTEGRATIVE
 CARDIOVASCULAR CENTER
 OF LA JOLLA
 9834 GENESEE AVE STE 101
 LA JOLLA, CA 92037-1214
Phone: (858) 430-8455
Fax: (858) 433-6943
After Hours Phone: (858) 430-8455
Provider Gender: Female
License number: A78854
NPI: 1457446684
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital, Ucsd Medical Ctr,
 Scripps Memorial Hospital,
 Scripps Mercy Hospital Chula
 Vista, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health
 Plan Direct, Community Care Ipa
 Llc, Health Excel Ipa Inc, Imperial
 Health Holdings Medical
 Group-Sd

BUCHBINDER, MAURICE

Provider ID: 257957
Board Certified Specialty: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 780
LA JOLLA, CA 92037-1232
Phone: (858) 625-4488
Fax: (858) 625-7995
After Hours Phone: (858)
625-4488
Provider Gender: Male
License number: A38176
NPI: 1851369813
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Stanford
Health Care, Sharp Chula Vista
Med Ctr, Paradise Valley
Hospital
Medi-Cal Open Panel: No
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

CARTER, STEPHANIE

Provider ID: 283975
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 870
LA JOLLA, CA 92037-1233
Phone: (760) 452-6334
Fax: (760) 634-9755
After Hours Phone: (760)
452-6334
Provider Gender: Female
License number: C171841
NPI: 1497997407
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps

Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

CHARLAT, MARTIN L

Provider ID: 272332
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 780
LA JOLLA, CA 92037-1232
Phone: (858) 824-2900
Fax: (858) 824-2910
After Hours Phone: (858)
824-2900
Provider Gender: Male
License number: G64921
NPI: 1790753770
Provider English Spoken: Yes
Provider Language(s) Spoken:
French
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Scripps
Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

DAMANI, SAMIR B
Provider ID: 275125
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 650
LA JOLLA, CA 92037-1231
Phone: (858) 800-2480
Fax: (858) 216-1908
After Hours Phone: (858)
800-2480
Provider Gender: Male
License number: A88989
NPI: 1457379372
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps

COSTELLO, DENNIS L

Provider ID: 259911

Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 430
LA JOLLA, CA 92037-1212
Phone: (858) 450-3388
Fax: (858) 450-3157
After Hours Phone: (858)
450-3388
Provider Gender: Male
License number: G33998
NPI: 1679584551
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Green Hospital, Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

DANIELS, LORI B

Provider ID: 65157
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # 1D
LA JOLLA, CA 92037-1300
Phone: (858) 657-8530
Fax:
After Hours Phone: (858)
657-8530
Provider Gender: Female
License number: A74503
NPI: 1295755080
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

DEMARIA, ANTHONY N

Provider ID: 65160

Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # 1D
LA JOLLA, CA 92037-1300
Phone: (858) 657-8530
Fax:
After Hours Phone: (858)
657-8530
Provider Gender: Male
License number: G20471
NPI: 1124043948
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FELD, GREGORY K

Provider ID: 70155
Board Certified Specialty: No
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR FL
1
LA JOLLA, CA 92037-1337
Phone: (858) 657-8530
Fax:
After Hours Phone: (858)
657-8530
Provider Gender: Male
License number: G37258
NPI: 1720003924
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd

Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FOGHI, ARMIN

Provider ID: 281967
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 410
LA JOLLA, CA 92037-1212
Phone: (858) 550-0330
Fax: (858) 550-0676
After Hours Phone: (858)
550-0330
Provider Gender: Male
License number: C171852
NPI: 1952358376
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

HARRINGTON, JOHN C

Provider ID: 284848
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 870

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

LA JOLLA, CA 92037-1233
Phone: (760) 633-2334
Fax: (858) 452-7137
After Hours Phone: (760) 633-2334
Provider Gender: Male
License number: A45573
NPI: 1346251451
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

HONG, ERIC A
Provider ID: 272353
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 780
LA JOLLA, CA 92037-1232
Phone: (858) 824-2900
Fax: (858) 824-2910
After Hours Phone: (858) 824-2900
Provider Gender: Male
License number: A101767
NPI: 1013162452
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

JACOBY, RICHARD M
Provider ID: 283998
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 870
LA JOLLA, CA 92037-1233
Phone: (760) 452-6334
Fax: (760) 634-9755
After Hours Phone: (760) 452-6334
Provider Gender: Male
License number: G161416
NPI: 1053353029
Provider English Spoken: Yes
Provider Language(s) Spoken: French

Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

KRUMMEN, DAVID E
Provider ID: 65223
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # 1D
LA JOLLA, CA 92037-1300

Phone: (858) 657-8530
Fax:
After Hours Phone: (858) 657-8530
Provider Gender: Male
License number: A81261
NPI: 1235152885
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MAHMUD, EHTISHAM
Provider ID: 65244
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # 1D
LA JOLLA, CA 92037-1300
Phone: (858) 657-8530
Fax:
After Hours Phone: (858) 657-8530
Provider Gender: Male
License number: G75925
NPI: 1730112335
Provider English Spoken: Yes
Provider Language(s) Spoken: Urdu
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MEHBOOB, SALMAN

Provider ID: 284182
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 870
LA JOLLA, CA 92037-1233
Phone: (760) 452-6334
Fax: (760) 634-9755
After Hours Phone: (760) 452-6334

Provider Gender: Male
License number: A119955
NPI: 1497841795
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Urdu

Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

MENDENHALL, GEORGE S

Provider ID: 127795
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 940

LA JOLLA, CA 92037-1220
Phone: (858) 658-0020
Fax: (858) 658-0084
After Hours Phone: (858) 658-0020
Provider Gender: Male
License number: C152874
NPI: 1699925545
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

PATEL, MITUL P

Provider ID: 65009
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000

Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Male
License number: A95406
NPI: 1457572448
Provider English Spoken: Yes
Provider Language(s) Spoken: Gujarati, Spanish

Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None

American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

PATEL, MITUL P

Provider ID: 65376
Board Certified Specialty: No
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR FL 1

LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax:

After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A95406
NPI: 1457572448

Provider English Spoken: Yes
Provider Language(s) Spoken: Gujarati, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

RUSSO, ROBERT J

Provider ID: 105088
Board Certified Specialty: No
HEALTH EXCEL IPA INC

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

9850 GENESEE AVE STE 350
LA JOLLA, CA 92037-1227

Phone: (858) 886-7595

Fax: (858) 522-9959

After Hours Phone: (858)
886-7595

Provider Gender: Male

License number: G62682

NPI: 1730144064

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Green Hospital, Scripps

Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

TSIMIKAS, SOTIRIOS

Provider ID: 65312

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR # 1D

LA JOLLA, CA 92037-1300

Phone: (858) 657-8530

Fax:

After Hours Phone: (858)

657-8530

Provider Gender: Male

License number: G73170

NPI: 1629124417

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

WHITWAM, WAYNE B

Provider ID: 65744

Board Certified Specialty: No

HEALTH EXCEL IPA INC

9850 GENESEE AVE STE 780

LA JOLLA, CA 92037-1232

Phone: (858) 824-2900

Fax: (858) 824-2910

After Hours Phone: (858)

824-2900

Provider Gender: Male

License number: A90625

NPI: 1114048741

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Ucsd La Jolla

John Sally Thornton, Scripps

Memorial Hospital Encinitas,

Temecula Valley Hospital Inc,

Southwest Healthcare System

Wildomar, Southwest Healthcare

System Murrieta

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

CERTIFIED NURSE PRACTITIONER

AGYEMANG, ALBERTA A

Provider ID: 265130

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR # 2B

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: NP95002195

NPI: 1023400082

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

AGYEMANG, ALBERTA A

Provider ID: 265131

Board Certified Specialty: No

UCSD MEDICAL GROUP

8939 VILLA LA JOLLA DR

LA JOLLA, CA 92037-1732

Phone: (858) 657-8000

Fax: (858) 657-8387

After Hours Phone: (858)

657-8000

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: NP95002195
NPI: 1023400082
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

ATTIA, JILL M

Provider ID: 83197
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-2124
Fax: (858) 534-4813
After Hours Phone: (858)
822-2124
Provider Gender: Female
License number: NP16882
NPI: 1275598591
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA:
ATTIA, JILL M
Provider ID: 83198
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 822-2124
Fax: (858) 534-4813
After Hours Phone: (858)
822-2124
Provider Gender: Female
License number: NP16882
NPI: 1275598591
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BALL, KELLY R

Provider ID: 125572
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858)
657-7000
Provider Gender: Female
License number: NP95004819
NPI: 1902343833
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BAMEL, KASEY C

Provider ID: 126321
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6100
Fax:
After Hours Phone: (858)
822-6100
Provider Gender: Female
License number: NP95004824
NPI: 1487106886
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BELL, KAREN L

Provider ID: 83215

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6040
Fax: (858) 822-1669
After Hours Phone: (858)
822-6040
Provider Gender: Female
License number: NP349853
NPI: 1982632758
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BILENKAYA, IRINA

Provider ID: 83241
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8322
Fax: (858) 657-8269
After Hours Phone: (858)
657-8322
Provider Gender: Female
License number: NP15880
NPI: 1801030267
Provider English Spoken: Yes
Provider Language(s) Spoken:
Russian, Ukrainian
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No

Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BOTTA, LAUREN M

Provider ID: 256368
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: NP95012577
NPI: 1730726563
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BOUTELLE, AMY L

Provider ID: 243485
Board Certified Specialty: No
UCSD MEDICAL GROUP
8910 VILLA LA JOLLA DR # 200

LA JOLLA, CA 92037-1701
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: NP9500140
NPI: 1609117704
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BRADY, KATELYN A

Provider ID: 209017
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: NP95004809
NPI: 1952797540
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BUCKLEY, PATRICIA J

Provider ID: 279062
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 560
LA JOLLA, CA 92037-1229
Phone: (858) 552-1410
Fax: (858) 552-0929
After Hours Phone: (858)
552-1410
Provider Gender: Female
License number: NP95015705
NPI: 1700470200
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 17/120
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

BUENROSTRO, CHRISTINA

Provider ID: 243717
Board Certified Specialty: No
UCSD MEDICAL GROUP
8910 VILLA LA JOLLA DR # 200
LA JOLLA, CA 92037-1701
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273

Provider Gender: Female
License number: NP95004366
NPI: 1851749253
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BYRNE, JENNIFER M

Provider ID: 113432
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6600
Fax: (958) 822-6395
After Hours Phone: (858)
822-6600
Provider Gender: Female
License number: NP23295
NPI: 1568804326
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA:

CAIN, JULIA M

Provider ID: 83251
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6100
Fax: (858) 822-6277
After Hours Phone: (858)
822-6100
Provider Gender: Female
License number: NP18867
NPI: 1457593808
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CAPOZZI, JENNIFER E

Provider ID: 241030
Board Certified Specialty: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: NP11056
NPI: 1336258276

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Tagalog
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CASTANO, NEREMIAH J

Provider ID: 83257
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6100
Fax: (858) 822-6188
After Hours Phone: (858)
822-6100
Provider Gender: Male
License number: NP18985
NPI: 1437190071
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CHRISTIANSON, ELIZABETH S

Provider ID: 247329
Board Certified Specialty: No
UCSD MEDICAL GROUP
8910 VILLA LA JOLLA DR # 100
LA JOLLA, CA 92037-1701
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: NP95002903
NPI: 1750722666
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, University
Of California Irvine Med Ctr,
Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CIASCHI, CYNTHIA M

Provider ID: 110389
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-3115
Fax: (858) 822-1669
After Hours Phone: (858)
822-3115
Provider Gender: Female
License number: NP5263
NPI: 1750391512

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

COLLINS, CYNTHIA M

Provider ID: 83300
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-6303
Fax: (619) 543-5717
After Hours Phone: (619)
543-6303
Provider Gender: Female
License number: NP17358
NPI: 1780869164
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CONNOR, CAROLINE L

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider ID: 279834
Board Certified Specialty: No
UCSD MEDICAL GROUP
8910 VILLA LA JOLLA DR # 200
LA JOLLA, CA 92037-1701
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: NP13032
NPI: 1609081710
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CONNOR, CAROLINE L

Provider ID: 83304
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8745
Fax:
After Hours Phone: (858)
657-8745
Provider Gender: Female
License number: NP13032
NPI: 1609081710
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CRAMER, ARLENE

Provider ID: 116535
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 534-7079
Fax: (858) 822-1186
After Hours Phone: (858)
534-7079
Provider Gender: Female
License number: NP14879
NPI: 1083815575
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CZYPULL, MONICA

Provider ID: 284662
Board Certified Specialty: No

UCSD MEDICAL GROUP
9850 GENESEE AVE STE 320
LA JOLLA, CA 92037-1208
Phone: (858) 554-1212
Fax: (858) 795-1195
After Hours Phone: (858)
554-1212
Provider Gender: Female
License number: NP95016815
NPI: 1831784842
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

DAVIES, SUMMER R

Provider ID: 238922
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7600
Fax:
After Hours Phone: (858)
657-7600
Provider Gender: Female
License number: NP21519
NPI: 1679850671
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

DAVIES, SUMMER R

Provider ID: 253691
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8910 VILLA LA JOLLA DR # 100
 LA JOLLA, CA 92037-1701
 Phone: (858) 249-6800
 Fax: (858) 657-6420
 After Hours Phone: (858)
 249-6800
 Provider Gender: Female
 License number: NP21519
 NPI: 1679850671

Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

DELA VINA, JANELLE P

Provider ID: 125314
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300
 Phone: (858) 657-8322
 Fax:
 After Hours Phone: (858)
 657-8322
 Provider Gender: Female
 License number: NP17592
 NPI: 1821232778
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

DEUTSCH, ELIANA J

Provider ID: 121229
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8910 VILLA LA JOLLA DR # 200
 LA JOLLA, CA 92037-1701
 Phone: (858) 657-8745
 Fax:
 After Hours Phone: (858)
 657-8745
 Provider Gender: Female
 License number: NP19666
 NPI: 1770807000
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility:

Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

DIMAIRA, FRANCESCA

Provider ID: 245579
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 License number: NP95011770
 NPI: 1346670718
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

DIMAIRA, FRANCESCA

Provider ID: 245580
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NP95011770
NPI: 1346670718
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

DOVE, JANET H

Provider ID: 83368
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8322
Fax:
After Hours Phone: (858) 657-8322
Provider Gender: Female
License number: NP8210
NPI: 1982860664
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:
DRCAR, THAO T
Provider ID: 83373
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-5257
Fax: (858) 657-7107
After Hours Phone: (858) 657-5257
Provider Gender: Female
License number: NP14165
NPI: 1710958798
Provider English Spoken: Yes
Provider Language(s) Spoken:
Vietnamese
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

DRISCOLL, KARRIE

Provider ID: 110193
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503

Phone: (858) 822-6277
Fax: (858) 228-1731
After Hours Phone: (858) 822-6277
Provider Gender: Female
License number: NP22651
NPI: 1396085098
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

DUONG, MICHELLE T

Provider ID: 126862
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6600
Fax:
After Hours Phone: (858) 822-6600
Provider Gender: Female
License number: NP95004623
NPI: 1659821080
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<i>Website:</i>	9300 CAMPUS POINT DR	Medical Ctr
<i>Email:</i>	LA JOLLA, CA 92037-1300	<i>Medi-Cal Open Panel:</i> No
<i>Medical Group(s):</i>	<i>Phone:</i> (858) 657-7000	<i>Min/Max Age:</i> None
<i>IPA:</i>	<i>Fax:</i> (619) 543-7785	<i>American Sign Language (ASL):</i>
	<i>After Hours Phone:</i> (858)	No
ELAMPARO, KAYE L , NPA	657-7000	<i>♿ Accessibility:</i>
<i>Provider ID:</i> 258928	<i>Provider Gender:</i> Male	<i>Hours:</i> M-SA 9AM-5PM
<i>Board Certified Specialty:</i> No	<i>License number:</i> NP18199	<i>Website:</i>
COMMUNITY CARE IPA LLC	<i>NPI:</i> 1568620375	<i>Email:</i>
9834 GENESEE AVE # 560	<i>Provider English Spoken:</i> Yes	<i>Medical Group(s):</i>
LA JOLLA, CA 92037-1223	<i>Provider Language(s) Spoken:</i>	<i>IPA:</i>
<i>Phone:</i> (858) 552-1710	<i>Cultural Competency:</i> No	
<i>Fax:</i> (858) 429-4009	<i>Hospital Affiliation:</i> Ucsd Medical	FEELY, HOMIRA
<i>After Hours Phone:</i> (858)	Ctr, Ucsd La Jolla John Sally	<i>Provider ID:</i> 83426
552-1710	Thornton	<i>Board Certified Specialty:</i> No
<i>Provider Gender:</i> Female	<i>Medi-Cal Open Panel:</i> No	UCSD MEDICAL GROUP
<i>License number:</i> NP20795	<i>Min/Max Age:</i> None	3855 HEALTH SCIENCES DR
<i>NPI:</i> 1851673610	<i>American Sign Language (ASL):</i>	LA JOLLA, CA 92093-1503
<i>Provider English Spoken:</i> Yes	No	<i>Phone:</i> (858) 822-6040
<i>Provider Language(s) Spoken:</i>	<i>♿ Accessibility:</i>	<i>Fax:</i>
Korean, Tagalog	<i>Hours:</i> M-SA 9AM-5PM	<i>After Hours Phone:</i> (858)
<i>Cultural Competency:</i> No	<i>Website:</i>	822-6040
<i>Hospital Affiliation:</i> Tri City	<i>Email:</i>	<i>Provider Gender:</i> Female
Medical Ctr, Scripps Mercy	<i>Medical Group(s):</i>	<i>License number:</i> NP19711
Hospital Chula Vista, Scripps	<i>IPA:</i>	<i>NPI:</i> 1972839975
Memorial Hospital, Scripps		<i>Provider English Spoken:</i> Yes
Memorial Hospital Encinitas,	ESPEJO, MARISSA C	<i>Provider Language(s) Spoken:</i>
Scripps Green Hospital, Scripps	<i>Provider ID:</i> 121412	Farsi
Mercy Hospital, Alvarado Hosp	<i>Board Certified Specialty:</i> No	<i>Cultural Competency:</i> No
Med Ctr	UCSD RADIOLOGY AT LA	<i>Hospital Affiliation:</i>
<i>Medi-Cal Open Panel:</i> Yes	JOLLA	<i>Medi-Cal Open Panel:</i> No
<i>Min/Max Age:</i> 0/999	9300 CAMPUS POINT DR	<i>Min/Max Age:</i> None
<i>American Sign Language (ASL):</i>	LA JOLLA, CA 92037-1300	<i>American Sign Language (ASL):</i>
No	<i>Phone:</i> (619) 471-0320	No
<i>♿ Accessibility:</i>	<i>Fax:</i>	<i>♿ Accessibility:</i> W
<i>Hours:</i> M-SA 9AM-5PM	<i>After Hours Phone:</i> (619)	<i>Hours:</i> M-SA 9AM-5PM
<i>Website:</i>	471-0320	<i>Website:</i>
<i>Email:</i>	<i>Provider Gender:</i> Female	<i>Email:</i>
<i>Medical Group(s):</i>	<i>License number:</i> NP20343	<i>Medical Group(s):</i>
<i>IPA:</i> Community Care Ipa Llc	<i>NPI:</i> 1508112590	<i>IPA:</i>
	<i>Provider English Spoken:</i> Yes	
ELMORE, DUDLEY G	<i>Provider Language(s) Spoken:</i>	FRIEBEN, CODY J
<i>Provider ID:</i> 83411	<i>Cultural Competency:</i> No	<i>Provider ID:</i> 244096
<i>Board Certified Specialty:</i> No	<i>Hospital Affiliation:</i> Ucsd La Jolla	<i>Board Certified Specialty:</i> No
UCSD MEDICAL GROUP	John Sally Thornton, Ucsd	UCSD MEDICAL GROUP

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D. Directorio de proveedores de atención especializada

9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: NP95008175
NPI: 1992179162
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

GARCIA, DAVID
Provider ID: 83446
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-6222
Fax: (619) 543-7785
After Hours Phone: (619)
543-6222
Provider Gender: Male
License number: NP9111
NPI: 1851544480
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:
GARTH, MELISSA A
Provider ID: 268991
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: NP95011870
NPI: 1689232977
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

GELUZ, JAYDEE ROSE F
Provider ID: 117074
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 534-7079
Fax:
After Hours Phone: (858)
534-7079
Provider Gender: Female
License number: NP95004002
NPI: 1861854622
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

GARTH, MELISSA A
Provider ID: 268992
Board Certified Specialty: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093-1350

Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: NP95011870
NPI: 1689232977
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

GELUZ, JAYDEE ROSE F
Provider ID: 117074
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 534-7079
Fax:
After Hours Phone: (858)
534-7079
Provider Gender: Female
License number: NP95004002
NPI: 1861854622
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

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D. Directorio de proveedores de atención especializada

♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GERNHOFER, YAN K

Provider ID: 83661
Board Certified Specialty: No
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR FL
1
LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: NP22280
NPI: 1205185915
Provider English Spoken: Yes
Provider Language(s) Spoken:

Mandarin, Yue Chinese
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GERNHOFER, YAN K

Provider ID: 83662
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

Phone: (619) 437-7777
Fax: (858) 657-5058
After Hours Phone: (619)
437-7777
Provider Gender: Female
License number: NP22280
NPI: 1205185915

Provider English Spoken: Yes
Provider Language(s) Spoken:
Mandarin, Yue Chinese
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GILBERT, TARI L

Provider ID: 125238
Board Certified Specialty: No
UCSD MEDICAL GROUP
8910 VILLA LA JOLLA DR # 100
LA JOLLA, CA 92037-1701
Phone: (858) 249-6800
Fax:
After Hours Phone: (858)
249-6800
Provider Gender: Female
License number: NP10378
NPI: 1811248347

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GIOVANNETTI, ERIN R

Provider ID: 276002
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: NP22803
NPI: 1013317767

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

GOODMAN, MEAGAN L

Provider ID: 275825
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 320
LA JOLLA, CA 92037-1208

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 554-1212
Fax: (858) 795-1195
After Hours Phone: (858) 554-1212
Provider Gender: Female
License number: NP95005125
NPI: 1376925974
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

GORDON, CAITLIN R

Provider ID: 246042
Board Certified Specialty: No
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR FL 1
LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NP23078
NPI: 1063842078
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

GORDON, DEBBIE

Provider ID: 128662
Board Certified Specialty: No
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR FL 1
LA JOLLA, CA 92037-1337
Phone: (858) 657-8530
Fax:
After Hours Phone: (858) 657-8530
Provider Gender: Female
License number: NP13438
NPI: 1730315532

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GOSHEN, KIRSTEN

Provider ID: 257188
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 570

LA JOLLA, CA 92037-1229
Phone: (858) 457-4917
Fax:
After Hours Phone: (858) 457-4917
Provider Gender: Female
License number: NP95005769
NPI: 1447795661
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

HALEY, KATHLEEN M , NPA

Provider ID: 253506
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9850 GENESEE AVE STE 560
LA JOLLA, CA 92037-1229
Phone: (858) 552-1410
Fax:
After Hours Phone: (858) 552-1410
Provider Gender: Female
License number: NP11124
NPI: 1992869739
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/125
American Sign Language (ASL): No

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D. Directorio de proveedores de atención especializada

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

HALEY, KATHLEEN M

Provider ID: 262439
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
9850 GENESEE AVE STE 560
LA JOLLA, CA 92037-1229
Phone: (858) 552-1410
Fax:
After Hours Phone: (858)
552-1410
Provider Gender: Female
License number: NP11124
NPI: 1992869739

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

HARKNESS, RUMIKO

Provider ID: 208840
Board Certified Specialty: No
UCSD MEDICAL GROUP
8910 VILLA LA JOLLA DR # 200

LA JOLLA, CA 92037-1701
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: NP11566
NPI: 1487785093
Provider English Spoken: Yes
Provider Language(s) Spoken:
Japanese
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HERMAN, HEATHER G

Provider ID: 83590
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 534-7079
Fax: (858) 822-0872
After Hours Phone: (858)
534-7079
Provider Gender: Female
License number: NP15024
NPI: 1407064728
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HORNFELD, COURTNEY A

Provider ID: 277360
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (619) 543-7128
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: NP95013375
NPI: 1982234027
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HUYNH, HOAI HUONG K

Provider ID: 83606
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8540
Fax: (858) 657-8549
After Hours Phone: (858)
657-8540

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Female
License number: NP19793
NPI: 1194035501
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

IYER, VICTORIA G
Provider ID: 265624
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # 2B
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: NP18782
NPI: 1871738864
Provider English Spoken: Yes
Provider Language(s) Spoken:
Tagalog
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Ucsd Medical Group
JONES, CHRISTA E
Provider ID: 275564
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (800) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: NP95914220
NPI: 1396371431
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KHUAT, LIEN M
Provider ID: 83653
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-6380
Fax: (858) 657-6904
After Hours Phone: (858)
657-6380
Provider Gender: Female
License number: NP13634
NPI: 1366558678

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KIM, JENNIFER S
Provider ID: 112495
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 534-7079
Fax: (858) 822-6186
After Hours Phone: (858)
534-7079
Provider Gender: Female
License number: NP19867
NPI: 1851601819
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KIRK, MARY P
Provider ID: 83657

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D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (619) 471-0701
Fax: (619) 543-7785
After Hours Phone: (619)
 471-0701

Provider Gender: Female
License number: NP17276
NPI: 1760668073
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA:

KLEIN, SUSAN H

Provider ID: 262457
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 9850 GENESEE AVE STE 560
 LA JOLLA, CA 92037-1229
Phone: (760) 432-3340
Fax:
After Hours Phone: (760)
 432-3340
Provider Gender: Female
License number: NP23266
NPI: 1831522010
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Health Excel Ipa Inc,
 Imperial Health Holdings Medical
 Group-Sd

KNECHEL, NANCY A

Provider ID: 83660
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858)
 657-7000
Provider Gender: Female
License number: NP17401
NPI: 1871757211
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA:

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA:

KOMIYA, ASAKO

Provider ID: 279183
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK

4150 REGENTS PARK ROW
 STE 355
 LA JOLLA, CA 92037-9102
Phone: (858) 457-2043
Fax: (858) 457-2092
After Hours Phone: (858)
 457-2043
Provider Gender: Female
License number: NP13504
NPI: 1144797895
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Rady Childrens Health
 Network

KORMANIK, PATRICIA A

Provider ID: 282070
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
 926-8273
Provider Gender: Female
License number: NP9707
NPI: 1093895047
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group	9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Male <i>License number:</i> NP95004227 <i>NPI:</i> 1376732685 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group	<i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group
KORMANIK, PATRICIA A <i>Provider ID:</i> 83665 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 3855 HEALTH SCIENCES DR LA JOLLA, CA 92093-1503 <i>Phone:</i> (858) 822-6100 <i>Fax:</i> (858) 822-6395 <i>After Hours Phone:</i> (858) 822-6100 <i>Provider Gender:</i> Female <i>License number:</i> NP9707 <i>NPI:</i> 1093895047 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group	LEE, HEE J <i>Provider ID:</i> 274644 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female <i>License number:</i> NP95006499 <i>NPI:</i> 1497275705 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Korean <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> Yes	LEITHEM, DESIREE S <i>Provider ID:</i> 121150 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 8910 VILLA LA JOLLA DR # 200 LA JOLLA, CA 92037-1701 <i>Phone:</i> (858) 657-8745 <i>Fax:</i> <i>After Hours Phone:</i> (858) 657-8745 <i>Provider Gender:</i> Female <i>License number:</i> NP18324 <i>NPI:</i> 1952564320 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>
LEBLANC, ALLYN E <i>Provider ID:</i> 275539 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP	LIEBMAN, RACHAEL R <i>Provider ID:</i> 280390 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR	

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D. Directorio de proveedores de atención especializada

LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NP95007834
NPI: 1396130050
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LITTRELL, MICHELE
Provider ID: 83709
Board Certified Specialty: No
UCSD MEDICAL GROUP
9415 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (858) 534-8235
Fax: (858) 534-0064
After Hours Phone: (858) 534-8235
Provider Gender: Female
License number: NP13577
NPI: 1740471978
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):

No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:
MARTINEZ, JOYCELLE C
Provider ID: 84008
Board Certified Specialty: No
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR FL 1
LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax: (858) 657-8530
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NP16021
NPI: 1891906228
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MATTHESS, JANETTE E
Provider ID: 122010
Board Certified Specialty: No
UCSD MEDICAL GROUP
8910 VILLA LA JOLLA DR # 200
LA JOLLA, CA 92037-1701

Phone: (858) 657-8745
Fax:
After Hours Phone: (858) 657-8745
Provider Gender: Female
License number: NP22833
NPI: 1457694549
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MCALPIN, REBECCA A
Provider ID: 84012
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6040
Fax: (858) 822-1634
After Hours Phone: (858) 822-6040
Provider Gender: Female
License number: NP17151
NPI: 1063662153
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

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D. Directorio de proveedores de atención especializada

♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MCCALLION, DANIELLE D

Provider ID: 283793
Board Certified Specialty: No
HEALTH EXCEL IPA INC
4225 EXECUTIVE SQ STE 450
LA JOLLA, CA 92037-8411
Phone: (858) 810-8000
Fax: (858) 268-1911
After Hours Phone: (858)
810-8000

Provider Gender: Female
License number: NP95015530
NPI: 1568060622
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

MCGHEE, SARAH L

Provider ID: 113363
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-5182
Fax: (858) 822-6186
After Hours Phone: (858)
822-5182

Provider Gender: Female
License number: NP18236
NPI: 1043467020
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MCPHERSON, SAMANTHA J

Provider ID: 283540
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 320
LA JOLLA, CA 92037-1208
Phone: (858) 554-1212
Fax: (858) 795-1195
After Hours Phone: (858)
554-1212

Provider Gender: Female
License number: NP95011848
NPI: 1457918583
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Green Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Health Excel Ipa Inc

MEDIANO, FERNANDO

Provider ID: 116093
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8540

Fax:
After Hours Phone: (858)
657-8540
Provider Gender: Male
License number: NP95005764
NPI: 1730558743
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MICK, SHARON L

Provider ID: 84133
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8590

Fax:
After Hours Phone: (858)
657-8590
Provider Gender: Female
License number: NP10449
NPI: 1891061966

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MIRALLES, ARA

Provider ID: 84273
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8322
Fax:
After Hours Phone: (858)
657-8322
Provider Gender: Female
License number: NP22052
NPI: 1457697567
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MOHEBBI, ATHENA

Provider ID: 282231
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: NP19120
NPI: 1952627176
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MWAURA, WAIRIMU R

Provider ID: 280181
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 560
LA JOLLA, CA 92037-1229
Phone: (858) 552-1410
Fax: (858) 552-0929
After Hours Phone: (858)
552-1410
Provider Gender: Female
License number: NP95009639
NPI: 1598320996
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

NACOSTE, LAKEISHA

Provider ID: 272935
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-5210
Fax:
After Hours Phone: (858)
822-5210
Provider Gender: Female
License number: NP95007600
NPI: 1194139634
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

NINCHAK, VIOLA M

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D. Directorio de proveedores de atención especializada

Provider ID: 285896
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9850 GENESEE AVE STE 530
LA JOLLA, CA 92037-1213
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760)
631-3000
Provider Gender: Female
License number: NP95010549
NPI: 1275007403
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

ODONNELL, SIOBHAN M

Provider ID: 110904
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 822-6600
Fax:
After Hours Phone: (858)
822-6600
Provider Gender: Female
License number: NP21367
NPI: 1760745947
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

PAULSON, KERRY L

Provider ID: 201269
Board Certified Specialty: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (619) 543-3000
Fax:
After Hours Phone: (619)
543-3000
Provider Gender: Female
License number: NP95002615
NPI: 1518363407
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

PHILBRICK, MEGAN M

Provider ID: 270401
Board Certified Specialty: No
UCSD MEDICAL GROUP

9434 MEDICAL CENTER DR FL
1
LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: NP95012381
NPI: 1871074633
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

PHILLIPS, KELLY M

Provider ID: 84328
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8322
Fax:
After Hours Phone: (858)
657-8322
Provider Gender: Female
License number: NP18868
NPI: 1336370543
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>	<p>9434 MEDICAL CENTER DR FL 1 LA JOLLA, CA 92037-1337 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female <i>License number:</i> NP21444 <i>NPI:</i> 1689006876 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> University Of California Irvine Med Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group</p>	<p><i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>
<p>PODSADA, KIMBERLY C <i>Provider ID:</i> 121756 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9350 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (858) 822-6135 <i>Fax:</i> (858) 657-6644 <i>After Hours Phone:</i> (858) 822-6135 <i>Provider Gender:</i> Female <i>License number:</i> NP19181 <i>NPI:</i> 1891011078 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>	<p>RICHARDS, LISA M <i>Provider ID:</i> 84583 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9350 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (858) 657-8322 <i>Fax:</i> (619) 471-3242 <i>After Hours Phone:</i> (858) 657-8322 <i>Provider Gender:</i> Female <i>License number:</i> NP8458 <i>NPI:</i> 1720247612 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i></p>	<p>RIVIELLO, GABRIELA <i>Provider ID:</i> 84588 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (619) 543-7162 <i>Fax:</i> (619) 543-6954 <i>After Hours Phone:</i> (619) 543-7162 <i>Provider Gender:</i> Female <i>License number:</i> NP13576 <i>NPI:</i> 1871758508 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>
<p>RALEIGH, DEBORAH J <i>Provider ID:</i> 215016 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP</p>	<p>ROCHE, CHELSEA E <i>Provider ID:</i> 270706 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300</p>	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NP95012534
NPI: 1063040384
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SERRATO, ANTHONY J
Provider ID: 278974
Board Certified Specialty: No
UCSD MEDICAL GROUP
8910 VILLA LA JOLLA DR # 200
LA JOLLA, CA 92037-1701
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: NP95016430
NPI: 1376138388
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SMITH, HEIDI A
Provider ID: 84816
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax: (619) 543-7785
After Hours Phone: (858) 657-7000
Provider Gender: Female
License number: NP8236
NPI: 1992950539
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SOLDANO, DEBBIE A
Provider ID: 123422
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

Phone: (858) 657-8322
Fax:
After Hours Phone: (858) 657-8322
Provider Gender: Female
License number: NP95001088
NPI: 1174923072
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SRILASAK, MICHELE
Provider ID: 281855
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NP13694
NPI: 1265487326
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SRILASAK, MICHELE

Provider ID: 84899
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6040
Fax:
After Hours Phone: (858)
822-6040
Provider Gender: Female
License number: NP13694
NPI: 1265487326
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

STEVENSON, REHEIA A

Provider ID: 210795
Board Certified Specialty: No
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR FL
1
LA JOLLA, CA 92037-1337

Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: NP95003341
NPI: 1346696044
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SUN, CHENG

Provider ID: 84911
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858)
657-7000
Provider Gender: Female
License number: NP9759
NPI: 1437358892
Provider English Spoken: Yes
Provider Language(s) Spoken:
Chinese
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):

No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

TANGTUMNU, RUNGFA

Provider ID: 84923
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-6502
Fax: (619) 543-7785
After Hours Phone: (619)
543-6502
Provider Gender: Female
License number: NP17451
NPI: 1689828741
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

TAWFILIS, AMY C

Provider ID: 275701
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 440
LA JOLLA, CA 92037-1212

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 453-5944
Fax: (858) 429-7925
After Hours Phone: (858) 453-5944
Provider Gender: Female
License number: NP95013902
NPI: 1144855107
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

TAWFILIS, AMY C
Provider ID: 276749
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9850 GENESEE AVE STE 440
LA JOLLA, CA 92037-1212
Phone: (858) 453-5944
Fax: (858) 429-7925
After Hours Phone: (858) 453-5944
Provider Gender: Female
License number: NP95013902
NPI: 1144855107
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc
TOMICICH, STEPHANIE S
Provider ID: 115348
Board Certified Specialty: No
CALIFORNIA CANCER ASSOCS FOR RESEARCH AND EXCELL
9834 GENESEE AVE STE 416
LA JOLLA, CA 92037-1264
Phone: (858) 458-0099
Fax:
After Hours Phone: (858) 458-0099
Provider Gender: Female
License number: NP95002402
NPI: 1316333792
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 16/120
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

TOMICICH, STEPHANIE S
Provider ID: 262398
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
9850 GENESEE AVE STE 560
LA JOLLA, CA 92037-1229
Phone: (559) 447-4949
Fax: (559) 447-4925
After Hours Phone: (559) 447-4949
Provider Gender: Female
License number: NP95002402
NPI: 1316333792
Provider English Spoken: Yes
Provider Language(s) Spoken:

TOMICICH, STEPHANIE S , NPA
Provider ID: 248026
Board Certified Specialty: No

COMMUNITY CARE IPA LLC
9834 GENESEE AVE STE 416
LA JOLLA, CA 92037-1264
Phone: (858) 458-0099
Fax:
After Hours Phone: (858) 458-0099
Provider Gender: Female
License number: NP95002402
NPI: 1316333792
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/125
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

TOMICICH, STEPHANIE S
Provider ID: 262398
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
9850 GENESEE AVE STE 560
LA JOLLA, CA 92037-1229
Phone: (559) 447-4949
Fax: (559) 447-4925
After Hours Phone: (559) 447-4949
Provider Gender: Female
License number: NP95002402
NPI: 1316333792
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

TOMICICH, STEPHANIE S
Provider ID: 275677
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 440
LA JOLLA, CA 92037-1212
Phone: (858) 453-5944
Fax: (858) 429-7925
After Hours Phone: (858) 453-5944
Provider Gender: Female
License number: NP95002402
NPI: 1316333792
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,

Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd
TOPPEN, LAURA
Provider ID: 215475
Board Certified Specialty: No
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR FL 1
LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NP95010163
NPI: 1326563495
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

TOPPEN, LAURA
Provider ID: 215476
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NP95010163
NPI: 1326563495
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

TOPPEN, LAURA
Provider ID: 215476
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NP95010163
NPI: 1326563495
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

NPI: 1326563495
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

TRAN, DAPHNE D
Provider ID: 265396
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 900
LA JOLLA, CA 92037-1220
Phone: (858) 452-1279
Fax: (858) 587-1642
After Hours Phone: (858) 452-1279
Provider Gender: Female
License number: NP95011984
NPI: 1497159776
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

TRUJILLO, DALE M

Provider ID: 278428
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR # 2B
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: PT18136
NPI: 1003104423
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

TRUJILLO, DALE M

Provider ID: 278428
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR # 2B
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: NP95009664
NPI: 1003104423

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

VERA, ABIGAIL M

Provider ID: 119436
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-7073
Fax:
After Hours Phone: (858) 657-7073
Provider Gender: Female
License number: NP23547
NPI: 1932462785
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA:

WATERS, VALERIE L

Provider ID: 121214
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8910 VILLA LA JOLLA DR # 200
 LA JOLLA, CA 92037-1701
Phone: (858) 657-8745
Fax:
After Hours Phone: (858) 657-8745
Provider Gender: Female
License number: NP95007374
NPI: 1770002313
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

WAX, VIVIKA S

Provider ID: 84957
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9434 MEDICAL CENTER DR FL 1
 LA JOLLA, CA 92037-1337
Phone: (858) 657-8530
Fax: (858) 657-5054
After Hours Phone: (858) 657-8530
Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: NP12765
NPI: 1497881197
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

WHEELER, LAURA G

Provider ID: 262453
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
4150 REGENTS PARK ROW
STE 355
LA JOLLA, CA 92037-9102
Phone: (858) 457-2043
Fax: (858) 457-2092
After Hours Phone: (858)
457-2043
Provider Gender: Female
License number: NP13812
NPI: 1306857255
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Rady Childrens Health
Network
WILLEY, MARTI L
Provider ID: 280144
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 560
LA JOLLA, CA 92037-1229
Phone: (858) 552-1410
Fax: (858) 552-0929
After Hours Phone: (858)
552-1410
Provider Gender: Female
License number: NP22548
NPI: 1144574062

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 17/120
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

YARTSEVA, YULIYA

Provider ID: 213716
Board Certified Specialty: No
HEALTH EXCEL IPA INC
7855 IVANHOE AVE # 101
LA JOLLA, CA 92037-4500
Phone: (858) 554-1212
Fax: (858) 554-1222
After Hours Phone: (858)
554-1212
Provider Gender: Female

License number: NP95007558
NPI: 1750881843
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

YOAKUM, STEPHANIE H

Provider ID: 125317
Board Certified Specialty: No
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR FL
1
LA JOLLA, CA 92037-1337
Phone: (858) 657-8530
Fax:
After Hours Phone: (858)
657-8530
Provider Gender: Female
License number: NP12624
NPI: 1386609386
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>IPA:</p> <hr/> <p>CERTIFIED REGISTERED NURSE MIDWIFE</p> <hr/> <p>BECERRA, AMANDA J <i>Provider ID:</i> 110463 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 8910 VILLA LA JOLLA DR # 200 LA JOLLA, CA 92037-1701 <i>Phone:</i> (858) 657-8745 <i>Fax:</i> <i>After Hours Phone:</i> (858) 657-8745 <i>Provider Gender:</i> Female <i>License number:</i> NM235778 <i>NPI:</i> 1386037299 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA:</p>	<p><i>License number:</i> NM1689 <i>NPI:</i> 1477644417 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA:</p> <p>DOLLAND, STEVEN C <i>Provider ID:</i> 280553 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Male <i>License number:</i> NA95000632 <i>NPI:</i> 1982059044 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Kern Medical Center, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i></p>	<p><i>Email:</i> <i>Medical Group(s):</i> IPA: Ucsd Medical Group</p> <p>GARRETT BROWN, REBECCA C <i>Provider ID:</i> 83459 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9350 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (858) 657-8745 <i>Fax:</i> (858) 657-8666 <i>After Hours Phone:</i> (858) 657-8745 <i>Provider Gender:</i> Female <i>License number:</i> NMW862 <i>NPI:</i> 1659344224 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA:</p> <p>GOODWIN, RACHEL K <i>Provider ID:</i> 126235 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 8910 VILLA LA JOLLA DR # 200 LA JOLLA, CA 92037-1701 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female</p>
<p>COOPER, ANNE S <i>Provider ID:</i> 83305 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9350 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (858) 657-8745 <i>Fax:</i> (858) 657-8666 <i>After Hours Phone:</i> (858) 657-8745 <i>Provider Gender:</i> Female</p>		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: NM1908
NPI: 1518274919
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

GOODWIN, RACHEL K
Provider ID: 210017
Board Certified Specialty: No
UCSD MEDICAL GROUP
8910 VILLA LA JOLLA DR # 200
LA JOLLA, CA 92037-1701
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NM1908
NPI: 1518274919
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

GREAR MANN, MELISSA P
Provider ID: 210051
Board Certified Specialty: No
UCSD MEDICAL GROUP
8910 VILLA LA JOLLA DR # 200
LA JOLLA, CA 92037-1701
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NMW1830
NPI: 1255384475
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

GUNTHER, HOPE R
Provider ID: 210040
Board Certified Specialty: No
UCSD MEDICAL GROUP
8910 VILLA LA JOLLA DR # 200
LA JOLLA, CA 92037-1701
Phone: (858) 657-8745
Fax:
After Hours Phone: (858) 657-8745
Provider Gender: Female

License number: NM1421
NPI: 1285667741
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HIRSCH, JENNIFER S
Provider ID: 210056
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8745
Fax:
After Hours Phone: (858) 657-8745
Provider Gender: Female
License number: NMW970
NPI: 1891752069
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

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D. Directorio de proveedores de atención especializada

HIRSCH, JENNIFER S

Provider ID: 210057
Board Certified Specialty: No
UCSD MEDICAL GROUP
8910 VILLA LA JOLLA DR # 200
LA JOLLA, CA 92037-1701
Phone: (858) 657-8745
Fax:
After Hours Phone: (858) 657-8745
Provider Gender: Female
License number: NMW970
NPI: 1891752069
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HIRSCH, JENNIFER S

Provider ID: 83597
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8745
Fax: (619) 543-6792
After Hours Phone: (858) 657-8745
Provider Gender: Female
License number: NMW970
NPI: 1891752069
Provider English Spoken: Yes
Provider Language(s) Spoken:

Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LAUNDY, JOAN P

Provider ID: 83683
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8745
Fax:
After Hours Phone: (858) 657-8745
Provider Gender: Female
License number: NMW1273
NPI: 1134152887
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

PERDION, KAREN L

Provider ID: 210135
Board Certified Specialty: No

UCSD MEDICAL GROUP
8910 VILLA LA JOLLA DR # 200
LA JOLLA, CA 92037-1701
Phone: (858) 657-8745
Fax:
After Hours Phone: (858) 657-8745
Provider Gender: Female
License number: NM1061
NPI: 1518916857
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

PERDION, KAREN L

Provider ID: 210136
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NM1061
NPI: 1518916857
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: Yes

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D. Directorio de proveedores de atención especializada

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

PERDION, KAREN L

Provider ID: 84325

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 657-8745

Fax: (619) 543-2366

After Hours Phone: (858)

657-8745

Provider Gender: Female

License number: NM1061

NPI: 1518916857

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

WARD, PAMELA R

Provider ID: 84953

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 657-8745

Fax: (858) 657-8666

After Hours Phone: (858)

657-8745

Provider Gender: Female

License number: NM757

NPI: 1912063199

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc

GALLO, RICHARD L

Provider ID: 65173

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 657-8322

Fax: (858) 657-8723

After Hours Phone: (858)

657-8322

Provider Gender: Male

License number: C50273

NPI: 1679598890

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

HATA, TISSA R

Provider ID: 65186

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

DERMATOLOGY

CROWLEY, CHRISTOPHER S , MD

Provider ID: 269668

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 657-8322

Fax:

After Hours Phone: (858)

657-8322

Provider Gender: Male

License number: A134188

NPI: 1962836783

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 657-8322

Fax:

After Hours Phone: (858)
657-8322

Provider Gender: Female

License number: G63547

NPI: 1558313916

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

MIREMADI, ARJAMG K

Provider ID: 122520

Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC

7702 IVANHOE AVE

LA JOLLA, CA 92037-4520

Phone: (858) 456-1840

Fax: (858) 456-9341

After Hours Phone: (858)
456-1840

Provider Gender: Male

License number: A31016

NPI: 1497849418

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi, Spanish

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Blue Shield Promise Health
Plan Direct, Community Care Ipa
Llc

MIREMADI, ARJAMG K

Provider ID: 257630

Board Certified Specialty: Yes

BLUE SHIELD PROMISE

HEALTH PLAN DIRECT

7702 IVANHOE AVE

LA JOLLA, CA 92037-4520

Phone: (858) 456-1840

Fax: (858) 456-9341

After Hours Phone: (858)

456-1840

Provider Gender: Male

License number: A31016

NPI: 1497849418

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi, Spanish

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Blue Shield Promise Health
Plan Direct, Community Care Ipa
Llc

YU, BENJAMIN D

Provider ID: 65328

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 657-8322

Fax:

After Hours Phone: (858)

657-8322

Provider Gender: Male

License number: A80119

NPI: 1831103084

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

EMERGENCY MEDICINE

AMANN, CHRISTOPHER J

Provider ID: 270914

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: C132360

NPI: 1134326895

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BARRY, JEFFREY R

Provider ID: 271131
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A149215
NPI: 1801207006
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BELLINGHAUSEN, AMY

Provider ID: 270335

Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A143164
NPI: 1801206354
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp
Coronado Hosp And Healthcare
Ctr, Sharp Memorial Hospital,
Ucsd La Jolla John Sally
Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LI, JINGHONG

Provider ID: 255937
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7125
Fax: (858) 657-7107
After Hours Phone: (858)
657-7125
Provider Gender: Female
License number: A107000
NPI: 1619014479
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LI, JINGHONG

Provider ID: 255938
Board Certified Specialty: No
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR FL
1
LA JOLLA, CA 92037-1337
Phone: (858) 657-7125
Fax: (858) 657-7107
After Hours Phone: (858)
657-7125
Provider Gender: Female
License number: A107000
NPI: 1619014479
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

PADDOCK, DIANA L

Provider ID: 256121
Board Certified Specialty: No
UCSD MEDICAL GROUP
8910 VILLA LA JOLLA DR # 100
LA JOLLA, CA 92037-1701
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: PA52175
NPI: 1447657804
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

Provider Gender: Male
License number: A129134
NPI: 1477808285
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

Website:
Email:
Medical Group(s):
IPA:

DULEBA, ANTONI J

Provider ID: 83386
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 543-2347
Fax:
After Hours Phone: (858)
543-2347
Provider Gender: Male
License number: C52680
NPI: 1659354702
Provider English Spoken: Yes
Provider Language(s) Spoken:
Polish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

DILLMANN, WOLFGANG

Provider ID: 65162
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-6886
Fax:
After Hours Phone: (619)
543-6886
Provider Gender: Male
License number: A33658
NPI: 1386675445
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM

EDELMAN, STEVEN V

Provider ID: 83396
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-1636
Fax:
After Hours Phone: (858)
657-1636

ENDOCRINOLOGY METABOLISM DIABETES

BOEDER, SCHAFER C

Provider ID: 255612
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273

Provider Gender: Male
License number: A33658
NPI: 1386675445
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Male
License number: G51578
NPI: 1477585248
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GUERIN, CHRIS K

Provider ID: 284645
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: G47081
NPI: 1275648875
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr, Ucsd Medical Ctr,
Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Ucsd Medical Group
HAMIDI, VALA
Provider ID: 121429
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-2347
Fax:
After Hours Phone: (619)
543-2347
Provider Gender: Female
License number: A150069
NPI: 1316231681
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

JUANG, PATRICIA S

Provider ID: 255606
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female

License number: A110217
NPI: 1265695795
Provider English Spoken: Yes
Provider Language(s) Spoken:
Mandarin
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

JUANG, PATRICIA S

Provider ID: 83552
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858)
657-7000
Provider Gender: Female
License number: A110217
NPI: 1265695795
Provider English Spoken: Yes
Provider Language(s) Spoken:
Mandarin
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Hours: M-F 8AM-5PM, SA
9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

KULASA, KRISTEN M

Provider ID: 255623

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 962-8273

Fax: (888) 539-8781

After Hours Phone: (800)

962-8273

Provider Gender: Female

License number: A96293

NPI: 1932324175

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

MAFONG, DEREK D

Provider ID: 65242

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR # C

LA JOLLA, CA 92037-1300

Phone: (858) 657-8440

Fax: (858) 657-8989

After Hours Phone: (858)

657-8440

Provider Gender: Male

License number: A89536

NPI: 1699781633

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton, Tri City Medical Ctr,

Palomar Medical Center

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

SANTOS CAVAIOLA, TRICIA

Provider ID: 256092

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: A108282

NPI: 1518163799

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

WOODS, GINA N

Provider ID: 110869

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR # 1A

LA JOLLA, CA 92037-1300

Phone: (858) 657-8000

Fax:

After Hours Phone: (858)

657-8000

Provider Gender: Female

License number: A81848

NPI: 1467401521

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

FAMILY PRACTICE

BOYD, JAMES E

Provider ID: 212698

Board Certified Specialty: No

HEALTH EXCEL IPA INC

9850 GENESEE AVE STE 900

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D. Directorio de proveedores de atención especializada

LA JOLLA, CA 92037-1220
Phone: (858) 626-7780
Fax: (858) 626-4604
After Hours Phone: (858) 626-7780
Provider Gender: Male
License number: A75335
NPI: 1811906654
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

CHEN, ALICE I
Provider ID: 207165
Board Certified Specialty: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: 20A16077
NPI: 1265810337
Provider English Spoken: Yes
Provider Language(s) Spoken: Chinese
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

EASTMAN, AMELIA S
Provider ID: 83393
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8200
Fax:
After Hours Phone: (858) 657-8200
Provider Gender: Female
License number: 20A11643
NPI: 1336393990
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish

Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Alvarado Hospital Llc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FEMALE PELVIC MED AND RECONSTRUCTIVE SURG

LUKACZ, EMILY S
Provider ID: 256953
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8745
Fax:
After Hours Phone: (858) 657-8745
Provider Gender: Female
License number: A63540
NPI: 1750339446
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LUKACZ, EMILY S
Provider ID: 256954
Board Certified Specialty: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A63540
NPI: 1750339446
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 16/999

American Sign Language (ASL): No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

ANAND, GOBIND S

Provider ID: 272836

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (619) 543-2347

Fax: (858) 657-7259

After Hours Phone: (619)

543-2347

Provider Gender: Male

License number: A120739

NPI: 1861626814

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL): No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

GASTROENTEROLOGY

ANAND, GOBIND S

Provider ID: 110471

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 657-1636

Fax:

After Hours Phone: (858)

657-1636

Provider Gender: Male

License number: A120739

NPI: 1861626814

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

BORTNIKER, ETHAN I

Provider ID: 209550

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A155188

NPI: 1396905576

Provider English Spoken: Yes

Provider Language(s) Spoken:

BRENNER, DAVID A

Provider ID: 64823

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 657-8381

Fax: (858) 657-8989

After Hours Phone: (858)

657-8381

Provider Gender: Male

License number: G54658

NPI: 1679649024

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

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

9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

COPUR DAHI, NEDRET

Provider ID: 64853
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR # 2C
LA JOLLA, CA 92037-1300
Phone: (619) 543-2347

Fax:
After Hours Phone: (619)
543-2347
Provider Gender: Female
License number: A99701
NPI: 1932290145

Provider English Spoken: Yes
Provider Language(s) Spoken:
Turkish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

DAVE, SHRAVAN S

Provider ID: 270448
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 925-8273
Fax: (888) 539-8781
After Hours Phone: (800)
925-8273
Provider Gender: Male
License number: A139385
NPI: 1588081814

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

DAVE, SHRAVAN S

Provider ID: 270449
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR # 2C
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A139385
NPI: 1588081814
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:

Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

DILAURO, STEVEN C , MD

Provider ID: 269298

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9850 GENESEE AVE STE 440
LA JOLLA, CA 92037-1212
Phone: (858) 373-0211
Fax: (760) 635-5972
After Hours Phone: (858)
373-0211

Provider Gender: Male
License number: A104332
NPI: 1629117643
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

DOCHERTY, MICHAEL J

Provider ID: 64859
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR # 2C
LA JOLLA, CA 92037-1300
Phone: (619) 543-2347
Fax:

After Hours Phone: (619)
543-2347
Provider Gender: Male
License number: A74870
NPI: 1841230935
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<i>Hospital Affiliation:</i>	UCSD MEDICAL GROUP	<i>Min/Max Age:</i> 0/999
<i>Medi-Cal Open Panel:</i> No	9350 CAMPUS POINT DR	<i>American Sign Language (ASL):</i>
<i>Min/Max Age:</i> None	LA JOLLA, CA 92037-1300	No
<i>American Sign Language (ASL):</i>	<i>Phone:</i> (800) 926-8273	♿ <i>Accessibility:</i>
No	<i>Fax:</i> (800) 926-8273	<i>Hours:</i> M-SA 9AM-5PM
♿ <i>Accessibility:</i>	<i>After Hours Phone:</i> (800)	<i>Website:</i>
<i>Hours:</i> M-SA 9AM-5PM	926-8273	<i>Email:</i>
<i>Website:</i>	<i>Provider Gender:</i> Female	<i>Medical Group(s):</i>
<i>Email:</i>	<i>License number:</i> A149205	<i>IPA:</i> Ucsd Medical Group
<i>Medical Group(s):</i>	<i>NPI:</i> 1205240959	GOLDKLANG, ROBERT H , MD
<i>IPA:</i>	<i>Provider English Spoken:</i> Yes	<i>Provider ID:</i> 269271
FEHMI, SYED M	<i>Provider Language(s) Spoken:</i>	<i>Board Certified Specialty:</i> No
<i>Provider ID:</i> 64876	<i>Cultural Competency:</i> No	COMMUNITY CARE IPA LLC
<i>Board Certified Specialty:</i> No	<i>Hospital Affiliation:</i> Ucsd La Jolla	9850 GENESEE AVE STE 440
UCSD MEDICAL GROUP	John Sally Thornton	LA JOLLA, CA 92037-1212
9300 CAMPUS POINT DR # 2C	<i>Medi-Cal Open Panel:</i> Yes	<i>Phone:</i> (858) 373-0211
LA JOLLA, CA 92037-1300	<i>Min/Max Age:</i> 0/999	<i>Fax:</i> (760) 635-5972
<i>Phone:</i> (619) 543-2347	<i>American Sign Language (ASL):</i>	<i>After Hours Phone:</i> (858)
<i>Fax:</i>	No	373-0211
<i>After Hours Phone:</i> (619)	♿ <i>Accessibility:</i>	<i>Provider Gender:</i> Male
543-2347	<i>Hours:</i> M-SA 9AM-5PM	<i>License number:</i> G69237
<i>Provider Gender:</i> Male	<i>Website:</i>	<i>NPI:</i> 1275527657
<i>License number:</i> A107838	<i>Email:</i>	<i>Provider English Spoken:</i> Yes
<i>NPI:</i> 1942320288	<i>Medical Group(s):</i>	<i>Provider Language(s) Spoken:</i>
<i>Provider English Spoken:</i> Yes	<i>IPA:</i> Ucsd Medical Group	Spanish
<i>Provider Language(s) Spoken:</i>	FEJLEH, MOHAMMAD P	<i>Cultural Competency:</i> No
<i>Cultural Competency:</i> No	<i>Provider ID:</i> 271043	<i>Hospital Affiliation:</i> Scripps
<i>Hospital Affiliation:</i> Ucsd Medical	<i>Board Certified Specialty:</i> No	Memorial Hospital, Scripps
Ctr, Ucsd La Jolla John Sally	UCSD MEDICAL GROUP	Memorial Hospital Encinitas,
Thornton	9300 CAMPUS POINT DR # 2C	Ucsd Medical Ctr
<i>Medi-Cal Open Panel:</i> No	LA JOLLA, CA 92037-1300	<i>Medi-Cal Open Panel:</i> Yes
<i>Min/Max Age:</i> None	<i>Phone:</i> (800) 926-8273	<i>Min/Max Age:</i> 0/999
<i>American Sign Language (ASL):</i>	<i>Fax:</i> (888) 539-8781	<i>American Sign Language (ASL):</i>
No	<i>After Hours Phone:</i> (800)	No
♿ <i>Accessibility:</i>	926-8273	♿ <i>Accessibility:</i>
<i>Hours:</i> M-SA 9AM-5PM	<i>Provider Gender:</i> Female	<i>Hours:</i> M-SA 9AM-5PM
<i>Website:</i>	<i>License number:</i> A149205	<i>Website:</i>
<i>Email:</i>	<i>NPI:</i> 1205240959	<i>Email:</i>
<i>Medical Group(s):</i>	<i>Provider English Spoken:</i> Yes	<i>Medical Group(s):</i>
<i>IPA:</i>	<i>Provider Language(s) Spoken:</i>	<i>IPA:</i> Community Care Ipa Llc,
FEJLEH, MOHAMMAD P	<i>Cultural Competency:</i> No	Health Excel Ipa Inc
<i>Provider ID:</i> 271042	<i>Hospital Affiliation:</i> Ucsd La Jolla	GUPTA, SAMIR
<i>Board Certified Specialty:</i> No	John Sally Thornton	<i>Provider ID:</i> 83525
	<i>Medi-Cal Open Panel:</i> Yes	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (619) 543-2347
Fax: (619) 543-7480
After Hours Phone: (619) 543-2347
Provider Gender: Male
License number: A78715
NPI: 1023127057
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HEMPERLY, AMY V

Provider ID: 239551
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: 20A14741
NPI: 1881960888
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally Thornton, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network, Ucsd Medical Group

HOLMER, ARIELA K

Provider ID: 273216
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A149594
NPI: 1083032544

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KALMAZ, DENISE

Provider ID: 64931

Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR # 2C
 LA JOLLA, CA 92037-1300
Phone: (619) 543-2347
Fax:
After Hours Phone: (619) 543-2347
Provider Gender: Female
License number: A87252
NPI: 1275700973
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KLAPHEKE, ROBERT W

Provider ID: 283347
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A154916
NPI: 1891113288
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla

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D. Directorio de proveedores de atención especializada

John Sally Thornton, Ucsd
Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

KLAPHEKE, ROBERT W

Provider ID: 283348

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

License number: A154916

NPI: 1891113288

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

KONO, YUKO

Provider ID: 65218

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR # 2B

LA JOLLA, CA 92037-1300

Phone: (858) 657-8010

Fax:

After Hours Phone: (858)

657-8010

Provider Gender: Female

License number: A111039

NPI: 1982628665

Provider English Spoken: Yes

Provider Language(s) Spoken:

Japanese

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* P, EB, IB, E, R, T

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

KRINSKY, MARY L

Provider ID: 83674

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR # 2C

LA JOLLA, CA 92037-1300

Phone: (619) 543-2347

Fax:

After Hours Phone: (619)

543-2347

Provider Gender: Female

License number: 20A7425

NPI: 1588765085

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

KWONG, WILSON T

Provider ID: 84283

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (619) 543-2347

Fax:

After Hours Phone: (619)

543-2347

Provider Gender: Male

License number: A114763

NPI: 1134389653

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

LAJOIE, ADRIANNE M , MD

Provider ID: 269300

Board Certified Specialty: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

COMMUNITY CARE IPA LLC
9850 GENESEE AVE STE 440
LA JOLLA, CA 92037-1212
Phone: (858) 373-0211
Fax: (760) 635-5972
After Hours Phone: (858)
373-0211
Provider Gender: Female
License number: A84301
NPI: 1225253651

Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

MAYER, ANDREW G

Provider ID: 65728
Board Certified Specialty: No
LA JOLLA
GASTROENTEROLOGY
MEDICAL GROUP INC
9850 GENESEE AVE STE 820
LA JOLLA, CA 92037-1219
Phone: (858) 453-5200
Fax: (858) 453-5160
After Hours Phone: (858)
453-5200
Provider Gender: Male
License number: A77759
NPI: 1215949201
Provider English Spoken: Yes
Provider Language(s) Spoken:

Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

MENDLER, MICHEL H

Provider ID: 210290
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-5415
Fax:
After Hours Phone: (619)
543-5415
Provider Gender: Male
License number: A78316
NPI: 1134232051
Provider English Spoken: Yes
Provider Language(s) Spoken:
French
Cultural Competency: No
Hospital Affiliation: Keck Hospital
Of Usc, Ucsd Medical Ctr, Usc
Kenneth Norris Jr Cancer
Hospital, Lac Usc Medical
Center, Lac Rancho Los Amigos
National Rehab Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Ucsd Medical Group

MENDLER, MICHEL H

Provider ID: 65247
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-5415
Fax:
After Hours Phone: (619)
543-5415
Provider Gender: Male
License number: A78316
NPI: 1134232051
Provider English Spoken: Yes
Provider Language(s) Spoken:
French
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Lac Usc Medical Center, Lac
Rancho Los Amigos National
Rehab Center
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MITTAL, RAVINDER K

Provider ID: 65255
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

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D. Directorio de proveedores de atención especializada

Phone: (619) 543-2347

Fax:

After Hours Phone: (619)
543-2347

Provider Gender: Male

License number: C50204

NPI: 1376567255

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

NGUYEN, NGHIA H

Provider ID: 283295

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A144052

NPI: 1154718997

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

NGUYEN, NGHIA H

Provider ID: 283296

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 657-7423

Fax: (888) 539-8781

After Hours Phone: (858)

657-7423

Provider Gender: Male

License number: A144052

NPI: 1154718997

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

PAREDEZ, EDWARD C

Provider ID: 65734

Board Certified Specialty: No

LA JOLLA

GASTROENTEROLOGY

MEDICAL GROUP INC

9850 GENESEE AVE STE 820

LA JOLLA, CA 92037-1219

Phone: (858) 453-5200

Fax: (858) 453-5160

After Hours Phone: (858)
453-5200

Provider Gender: Male

License number: A87900

NPI: 1518951714

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

PATEL, DEREK R

Provider ID: 65008

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR # 2C

LA JOLLA, CA 92037-1300

Phone: (619) 543-2347

Fax:

After Hours Phone: (619)

543-2347

Provider Gender: Male

License number: A69111

NPI: 1073538385

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>No ☯ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>	<p><i>Phone:</i> (619) 543-2347 <i>Fax:</i> <i>After Hours Phone:</i> (619) 543-2347 <i>Provider Gender:</i> Male <i>License number:</i> C54808 <i>NPI:</i> 1437228079 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>	<p><i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>
<p>PATTON, HEATHER M <i>Provider ID:</i> 65274 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9350 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (619) 543-2347 <i>Fax:</i> <i>After Hours Phone:</i> (619) 543-2347 <i>Provider Gender:</i> Female <i>License number:</i> A75284 <i>NPI:</i> 1396796124 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: No <i>Hospital Affiliation:</i> Palomar Health Downtown Campus, Ucsd Medical Ctr, Palomar Medical Center <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>	<p>RIVERA NIEVES, JESUS <i>Provider ID:</i> 65287 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9350 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (619) 543-6886 <i>Fax:</i> <i>After Hours Phone:</i> (619) 543-6886 <i>Provider Gender:</i> Male <i>License number:</i> C54808 <i>NPI:</i> 1437228079 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None</p>	<p>SANDBORN, WILLIAM J <i>Provider ID:</i> 65293 <i>Board Certified Specialty:</i> Yes UCSD MEDICAL GROUP 9350 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (619) 543-2347 <i>Fax:</i> <i>After Hours Phone:</i> (619) 543-2347 <i>Provider Gender:</i> Male <i>License number:</i> G63853 <i>NPI:</i> 1639157563 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: No <i>Hospital Affiliation:</i> Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>
<p>RIVERA NIEVES, JESUS <i>Provider ID:</i> 65030 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR # 2C LA JOLLA, CA 92037-1300</p>	<p><i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None</p>	<p>SAVIDES, THOMAS J <i>Provider ID:</i> 65048 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR # 2C LA JOLLA, CA 92037-1300</p>

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D. Directorio de proveedores de atención especializada

Phone: (619) 543-2347
Fax:
After Hours Phone: (619) 543-2347
Provider Gender: Male
License number: G64139
NPI: 1588649081
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SHAH, SHAILJA C
Provider ID: 283897
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A125800
NPI: 1073803243
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):

No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SHAH, SHAILJA C
Provider ID: 283898
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A125800
NPI: 1073803243
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

TSAI, MATTHEW
Provider ID: 252368
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A138084
NPI: 1285051177
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

TSAI, MATTHEW
Provider ID: 252369
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A138084
NPI: 1285051177
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

American Sign Language (ASL): No
Accessibility: ☯
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

TSE, CHUNG S

Provider ID: 282879
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A171036
NPI: 1417336215
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
Accessibility: ☯
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

TSE, CHUNG S

Provider ID: 282880
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A171036
NPI: 1417336215
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
Accessibility: ☯
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

YANG, EDWARD

Provider ID: 283163
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A154057
NPI: 1437545654
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999

American Sign Language (ASL): No
Accessibility: ☯
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

YANG, EDWARD

Provider ID: 283164
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A154057
NPI: 1437545654
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
Accessibility: ☯
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

GENETICS MEDICAL

JONES, KENNETH L

Provider ID: 244714
Board Certified Specialty: No
RADY CHILDRENS HEALTH

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NETWORK

9500 GILMAN DR DEPT 828
LA JOLLA, CA 92093-0828
Phone: (858) 246-0047

Fax:

After Hours Phone: (858)
246-0047

Provider Gender: Male

License number: G29045

NPI: 1962550673

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network, Ucsd Medical Group

JONES, MARILYN C

Provider ID: 202347

Board Certified Specialty: No

UCSD MEDICAL GROUP

3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: G30850

NPI: 1295806040

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,
Ucsd Medical Ctr, Ucsd La Jolla
John Sally Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network, Ucsd Medical Group

JONES, MARILYN C

Provider ID: 280121

Board Certified Specialty: No

UCSD MEDICAL GROUP

9434 MEDICAL CENTER DR FL
1

LA JOLLA, CA 92037-1337

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: G30850

NPI: 1295806040

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,
Ucsd Medical Ctr, Ucsd La Jolla
John Sally Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network, Ucsd Medical Group

SCIOSCIA, ANGELA L

Provider ID: 65298

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (619) 543-2347

Fax:

After Hours Phone: (619)

543-2347

Provider Gender: Female

License number: G64765

NPI: 1902839335

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

GYNECOLOGIC ONCOLOGY

COAKLEY, KATHERINE E

Provider ID: 269296

Board Certified Specialty: No

UCSD MEDICAL GROUP

3855 HEALTH SCIENCES DR

LA JOLLA, CA 92093-1503

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Female

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: A148457
NPI: 1427438605
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: University Of California Irvine Med Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

ESKANDER, RAMEZ N

Provider ID: 282165
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A102482
NPI: 1144486929
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: University Of California Irvine Med Ctr, Earl And Lorraine Miller Childrens Hsp, Long Beach Memorial Med Ctr, Providence St Joseph Hospital, Providence St Jude Medical Center, Orange Coast Mem Med Ctr, Fountain Valley Regional Hosp And Med Ctr,

Corona Regional Med Ctr, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HEMATOLOGY / ONCOLOGY

ASIMAKOPOULOS, FOTIOS A

Provider ID: 246594
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A115772
NPI: 1518134923
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BALL, EDWARD D

Provider ID: 64405
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6100
Fax:
After Hours Phone: (858) 822-6100
Provider Gender: Male
License number: G84752
NPI: 1093740110
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BANERJEE, PUSHPENDU, MD

Provider ID: 257619
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9850 GENESEE AVE STE 560
LA JOLLA, CA 92037-1229
Phone: (858) 552-1410
Fax: (858) 552-0929
After Hours Phone: (858) 552-1410
Provider Gender: Male
License number: A69490
NPI: 1164497855
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hindi
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Rady Childrens Hospital San Diego, Scripps Green Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

BANERJEE, PUSHPENDU
Provider ID: 54041
Board Certified Specialty: No CALIFORNIA CANCER ASSOCS FOR RESEARCH AND EXCELL
 9850 GENESEE AVE STE 560 LA JOLLA, CA 92037-1229
Phone: (858) 552-1410
Fax:
After Hours Phone: (858) 552-1410
Provider Gender: Male
License number: A69490
NPI: 1164497855
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Rady Childrens Hospital San Diego, Scripps Green Hospital
Medi-Cal Open Panel: No
Min/Max Age: None

American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

BANERJEE, PUSHPENDU
Provider ID: 54041
Board Certified Specialty: No CALIFORNIA CANCER ASSOCS FOR RESEARCH AND EXCELL
 9850 GENESEE AVE STE 560 LA JOLLA, CA 92037-1229
Phone: (858) 552-1410
Fax: (858) 552-0929
After Hours Phone: (858) 552-1410
Provider Gender: Male
License number: A69490
NPI: 1164497855
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Rady Childrens Hospital San Diego, Scripps Green Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,

Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

BAZHENOVA, LYUDMILA A
Provider ID: 64408
Board Certified Specialty: No UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR LA JOLLA, CA 92093-1503
Phone: (858) 822-6100
Fax:

After Hours Phone: (858) 822-6100
Provider Gender: Female
License number: A76755
NPI: 1093791006
Provider English Spoken: Yes
Provider Language(s) Spoken: Russian
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BEJAR, RAFAEL
Provider ID: 64409
Board Certified Specialty: No UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR LA JOLLA, CA 92093-1503
Phone: (858) 822-6100
Fax:
After Hours Phone: (858) 822-6100
Provider Gender: Male

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D. Directorio de proveedores de atención especializada

License number: A121394
NPI: 1720051493
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BOTTA, GREGORY P

Provider ID: 242346
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A140495
NPI: 1881006955
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Green Hospital, Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CHOI, MICHAEL Y
Provider ID: 64417
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6100
Fax: (858) 534-5620
After Hours Phone: (858)
822-6100
Provider Gender: Male
License number: A100104
NPI: 1912181173
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

COHEN, EZRA

Provider ID: 112498
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 534-3804
Fax:
After Hours Phone: (858)
534-3804
Provider Gender: Male

License number: C132549
NPI: 1518029065
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

DANIELS, GREGORY A

Provider ID: 64422
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6100
Fax:
After Hours Phone: (858)
822-6100
Provider Gender: Male
License number: A92515
NPI: 1164480943
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

FANTA, PAUL T

Provider ID: 64428
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6135
Fax: (858) 822-6186
After Hours Phone: (858) 822-6135
Provider Gender: Male
License number: A81637
NPI: 1467661496
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FLORES, EDNA I , MD

Provider ID: 256366
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9850 GENESEE AVE STE 830
LA JOLLA, CA 92037-1219
Phone: (858) 552-1410
Fax: (858) 429-4009
After Hours Phone: (858) 552-1410
Provider Gender: Female
License number: A114373
NPI: 1396994604
Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Pioneers Memorial Hospital, Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

GOLD, KATHRYN A

Provider ID: 109559
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-5182
Fax: (858) 534-6186
After Hours Phone: (858) 822-5182
Provider Gender: Female
License number: C139391
NPI: 1306909791
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA:

GOODMAN, AARON M

Provider ID: 121426
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6173
Fax:
After Hours Phone: (858) 822-6173
Provider Gender: Male
License number: A130400
NPI: 1851603559
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

GOODMAN, AARON M

Provider ID: 216894
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6200
Fax:
After Hours Phone: (858) 822-6200
Provider Gender: Male
License number: A130400
NPI: 1851603559

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

GOPAL, SRILA

Provider ID: 127731

Board Certified Specialty: No

UCSD MEDICAL GROUP

3855 HEALTH SCIENCES DR

LA JOLLA, CA 92093-1503

Phone: (858) 822-6276

Fax:

After Hours Phone: (858)

822-6276

Provider Gender: Female

License number: A151332

NPI: 1831323369

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

HAMDAN, AYAD

Provider ID: 241429

Board Certified Specialty: No

UCSD MEDICAL GROUP

3800-3899 HEALTH SCIENCES

DR

LA JOLLA, CA 92093-1503

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: C162882

NPI: 1144431230

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, French

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

HEYMAN, BENJAMIN M

Provider ID: 128684

Board Certified Specialty: No

UCSD MEDICAL GROUP

3855 HEALTH SCIENCES DR

LA JOLLA, CA 92093-1503

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A157684

NPI: 1982995809

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

HEYMAN, BENJAMIN M

Provider ID: 128685

Board Certified Specialty: No

UCSD MEDICAL GROUP

9400 CAMPUS POINT DR

LA JOLLA, CA 92093-1350

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A157684

NPI: 1982995809

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Ucsd Medical Group

HEYMAN, BENJAMIN M

Provider ID: 128686
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A157684
NPI: 1982995809
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HEYMAN, BENJAMIN M

Provider ID: 202662
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male

License number: A157684
NPI: 1982995809
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HEYMAN, BENJAMIN M

Provider ID: 202663
Board Certified Specialty: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A157684
NPI: 1982995809
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Ucsd Medical Group

HEYMAN, BENJAMIN M

Provider ID: 202664
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A157684
NPI: 1982995809
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

JAMIESON, CATRIONA H

Provider ID: 64436
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6276
Fax:
After Hours Phone: (858)
822-6276
Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: A67419
NPI: 1841223617
Provider English Spoken: Yes
Provider Language(s) Spoken:
French, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KATO, SHU M

Provider ID: 113897
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-3115
Fax:
After Hours Phone: (858)
822-3115
Provider Gender: Male
License number: A111322
NPI: 1609025865
Provider English Spoken: Yes
Provider Language(s) Spoken:
Japanese
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA:
KOURA, DIVYA T
Provider ID: 83672
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6100
Fax: (858) 822-6844
After Hours Phone: (858)
822-6100
Provider Gender: Female
License number: A125774
NPI: 1053471318
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi

Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KU, GRACE H

Provider ID: 64444
Board Certified Specialty: No
UC SAN DIEGO CANCER CTR
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6100
Fax:
After Hours Phone: (858)
822-6100

Provider Gender: Female
License number: A92382
NPI: 1538145719
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton, Uc Davis Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MILLARD, FREDERICK E

Provider ID: 64454
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6100
Fax:
After Hours Phone: (858)
822-6100
Provider Gender: Male
License number: G52424
NPI: 1922056373
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<i>Email:</i>	<i>NPI:</i> 1104127679	<i>Medical Group(s):</i>
<i>Medical Group(s):</i>	<i>Provider English Spoken:</i> Yes	<i>IPA:</i>
<i>IPA:</i>	<i>Provider Language(s) Spoken:</i>	
	<i>Cultural Competency:</i> No	PARK, SOO J
MILLARD, FREDERICK E	<i>Hospital Affiliation:</i> Ucsd La Jolla	<i>Provider ID:</i> 257202
<i>Provider ID:</i> 64454	John Sally Thornton, Ucsd	<i>Board Certified Specialty:</i> No
<i>Board Certified Specialty:</i> No	Medical Ctr	UCSD MEDICAL GROUP
UC SAN DIEGO CANCER CTR	<i>Medi-Cal Open Panel:</i> No	3855 HEALTH SCIENCES DR
3855 HEALTH SCIENCES DR	<i>Min/Max Age:</i> None	LA JOLLA, CA 92093-1503
LA JOLLA, CA 92093-1503	<i>American Sign Language (ASL):</i>	<i>Phone:</i> (800) 926-8273
<i>Phone:</i> (858) 822-6100	No	<i>Fax:</i> (888) 539-8781
<i>Fax:</i>	<i>♿ Accessibility:</i>	<i>After Hours Phone:</i> (800)
<i>After Hours Phone:</i> (858)	<i>Hours:</i> M-SA 9AM-5PM	926-8273
822-6100	<i>Website:</i>	<i>Provider Gender:</i> Female
<i>Provider Gender:</i> Male	<i>Email:</i>	<i>License number:</i> A135455
<i>License number:</i> G52424	<i>Medical Group(s):</i>	<i>NPI:</i> 1821351198
<i>NPI:</i> 1922056373	<i>IPA:</i>	<i>Provider English Spoken:</i> Yes
<i>Provider English Spoken:</i> Yes		<i>Provider Language(s) Spoken:</i>
<i>Provider Language(s) Spoken:</i>	MITCHELL, WILLIAM M	<i>Cultural Competency:</i> No
<i>Cultural Competency:</i> No	<i>Provider ID:</i> 64455	<i>Hospital Affiliation:</i> Ucsd Medical
<i>Hospital Affiliation:</i> Ucsd Medical	<i>Board Certified Specialty:</i> No	Ctr, Ucsd La Jolla John Sally
Ctr	UCSD MEDICAL GROUP	Thornton
<i>Medi-Cal Open Panel:</i> No	3855 HEALTH SCIENCES DR	<i>Medi-Cal Open Panel:</i> Yes
<i>Min/Max Age:</i> None	LA JOLLA, CA 92093-1503	<i>Min/Max Age:</i> 0/999
<i>American Sign Language (ASL):</i>	<i>Phone:</i> (858) 822-6100	<i>American Sign Language (ASL):</i>
No	<i>Fax:</i> (858) 822-6352	No
<i>♿ Accessibility:</i>	<i>After Hours Phone:</i> (858)	<i>♿ Accessibility:</i>
<i>Hours:</i> M-SA 9AM-5PM	822-6100	<i>Hours:</i> M-SA 9AM-5PM
<i>Website:</i>	<i>Provider Gender:</i> Male	<i>Website:</i>
<i>Email:</i>	<i>License number:</i> A92024	<i>Email:</i>
<i>Medical Group(s):</i>	<i>NPI:</i> 1669634663	<i>Medical Group(s):</i>
<i>IPA:</i>	<i>Provider English Spoken:</i> Yes	<i>IPA:</i> Ucsd Medical Group
	<i>Provider Language(s) Spoken:</i>	
	<i>Cultural Competency:</i> No	PATEL, SANDIP P
	<i>Hospital Affiliation:</i> Ucsd Medical	<i>Provider ID:</i> 88443
	Ctr, Ucsd La Jolla John Sally	<i>Board Certified Specialty:</i> No
	Thornton	UCSD MEDICAL GROUP
	<i>Medi-Cal Open Panel:</i> No	3855 HEALTH SCIENCES DR
	<i>Min/Max Age:</i> None	LA JOLLA, CA 92093-1503
	<i>American Sign Language (ASL):</i>	<i>Phone:</i> (858) 822-6100
	No	<i>Fax:</i> (858) 246-1915
	<i>♿ Accessibility:</i>	<i>After Hours Phone:</i> (858)
	<i>Hours:</i> M-SA 9AM-5PM	822-6100
	<i>Website:</i>	<i>Provider Gender:</i> Male
	<i>Email:</i>	<i>License number:</i> A110132

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D. Directorio de proveedores de atención especializada

NPI: 1245481381
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Eisenhower Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

PEARSE, WILLIAM B

Provider ID: 285649
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A173950
NPI: 1225423148
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Ucsd Medical Group
RANDALL, JAMES M
Provider ID: 64466
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6100
Fax: (858) 822-6186
After Hours Phone: (858) 822-6100
Provider Gender: Male
License number: A99468
NPI: 1144407115
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

RICHARDSON, ANGELIQUE E

Provider ID: 215010
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A123556

NPI: 1700120102
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SACCO, ASSUNTINA G

Provider ID: 110199
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6100
Fax: (858) 822-6198
After Hours Phone: (858) 822-6100
Provider Gender: Female
License number: A132120
NPI: 1871757831
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<i>IPA:</i>	<i>License number:</i> G48926 <i>NPI:</i> 1356300230 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd	<i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd
SCHWAB, RICHARD B <i>Provider ID:</i> 64476 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 3855 HEALTH SCIENCES DR LA JOLLA, CA 92093-1503 <i>Phone:</i> (858) 822-6200 <i>Fax:</i> <i>After Hours Phone:</i> (858) 822-6200 <i>Provider Gender:</i> Male <i>License number:</i> A76913 <i>NPI:</i> 1710900345 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>	SINCLAIR, JAMES M <i>Provider ID:</i> 54027 <i>Board Certified Specialty:</i> No CALIFORNIA CANCER ASSOCS FOR RESEARCH AND EXCELL 9850 GENESEE AVE STE 560 LA JOLLA, CA 92037-1229 <i>Phone:</i> (858) 552-1410 <i>Fax:</i> (858) 552-0929 <i>After Hours Phone:</i> (858) 552-1410 <i>Provider Gender:</i> Male <i>License number:</i> G48926 <i>NPI:</i> 1356300230 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 16/120	STEWART, TYLER F <i>Provider ID:</i> 243920 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9400 CAMPUS POINT DR LA JOLLA, CA 92093-1350 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Male <i>License number:</i> A163409 <i>NPI:</i> 1699110676 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group
SINCLAIR, JAMES M <i>Provider ID:</i> 54027 <i>Board Certified Specialty:</i> No CALIFORNIA CANCER ASSOCS FOR RESEARCH AND EXCELL 9850 GENESEE AVE STE 560 LA JOLLA, CA 92037-1229 <i>Phone:</i> (858) 552-1410 <i>Fax:</i> (858) 552-0929 <i>After Hours Phone:</i> (858) 552-1410 <i>Provider Gender:</i> Male	SULLIVAN, JESSICA E <i>Provider ID:</i> 280878 <i>Board Certified Specialty:</i> No	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 560
LA JOLLA, CA 92037-1229
Phone: (858) 552-1410
Fax: (858) 552-0929
After Hours Phone: (858)
552-1410
Provider Gender: Female
License number: 20A16273
NPI: 1942407150
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas,
Temecula Valley Hospital Inc
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

TANAKA, TIFFANY N

Provider ID: 115252
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6276
Fax:
After Hours Phone: (858)
822-6276
Provider Gender: Female
License number: A119740
NPI: 1407159726
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

TZACHANIS, DIMITRIOS

Provider ID: 102364
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6600
Fax:
After Hours Phone: (858)
822-6600
Provider Gender: Male
License number: C55514
NPI: 1528026002
Provider English Spoken: Yes
Provider Language(s) Spoken:
German, Greek
Cultural Competency: No
Hospital Affiliation: Cedars Sinai
Medical Center, Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

VU, PETER

Provider ID: 272717
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A149741
NPI: 1861810830
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

WALLACH, SABINA R , MD

Provider ID: 269286
Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC
9850 GENESEE AVE STE 400
LA JOLLA, CA 92037-1212
Phone: (858) 558-8666
Fax: (858) 558-9233
After Hours Phone: (858)
558-8666
Provider Gender: Female
License number: A34070
NPI: 1871529081
Provider English Spoken: Yes
Provider Language(s) Spoken:
French, Spanish

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas

Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No

♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

WALLACH, SABINA R

Provider ID: 65743
Board Certified Specialty: Yes
 HEALTH EXCEL IPA INC
 9850 GENESEE AVE STE 400
 LA JOLLA, CA 92037-1212

Phone: (858) 558-8666
Fax: (858) 558-9233
After Hours Phone: (858) 558-8666

Provider Gender: Female
License number: A34070
NPI: 1871529081
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish

Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Community Care Ipa Llc, Health Excel Ipa Inc

HEPATOLOGY

BARMAN, PRANAB M

Provider ID: 241952
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR # 2C
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273

Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male

License number: A162554
NPI: 1023301991
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Spanish

Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Ucsd Medical Group

BARMAN, PRANAB M

Provider ID: 241954
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax:
After Hours Phone: (800) 926-8273

Provider Gender: Male
License number: A162554
NPI: 1023301991
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Spanish

Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Ucsd Medical Group

SHARPTON, SUZANNE

Provider ID: 245667
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300

Phone: (800) 926-5273
Fax:
After Hours Phone: (800) 926-5273

Provider Gender: Female
License number: A123642
NPI: 1891084257
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish

Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: 18/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

3855 HEALTH SCIENCES DR

LA JOLLA, CA 92093-1503

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: A119245

NPI: 1811200652

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

Adventist Med Ctr, St Josephs

Hospital, Providence Saint

Joseph Med Ctr, Scripps

Memorial Hospital

Medi-Cal Open Panel: No

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

HOSPICE AND PALLIATIVE MEDICINE

MESARWI, PAULA

Provider ID: 118780

Board Certified Specialty: No

UCSD MEDICAL GROUP

3855 HEALTH SCIENCES DR

LA JOLLA, CA 92093-1503

Phone: (858) 822-6173

Fax:

After Hours Phone: (858)

822-6173

Provider Gender: Male

License number: C144047

NPI: 1073722021

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

RUBENZIK, TAMARA T

Provider ID: 245574

Board Certified Specialty: No

UCSD MEDICAL GROUP

HOSPITALIST MD/DO

BADALYAN, SEDA

Provider ID: 283863

Board Certified Specialty: No

HEALTH EXCEL IPA INC

9888 GENESEE AVE

LA JOLLA, CA 92037-1205

Phone: (858) 626-7780

Fax: (858) 626-4604

After Hours Phone: (858)

626-7780

Provider Gender: Female

License number: A100925

NPI: 1558396077

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Glendale

CHILDERS, DIANA J

Provider ID: 275069

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: A86157

NPI: 1033128376

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

CHILDERS, DIANA J

Provider ID: 275070
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A86157
NPI: 1033128376
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

FIRESTEIN, CATHERINE E

Provider ID: 275388
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A143013
NPI: 1427348382
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HAMMOND, CHARLES F

Provider ID: 278589
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A169655
NPI: 1033641816
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SHINDO, YURI

Provider ID: 284744
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A167796
NPI: 1700271939
Provider English Spoken: Yes
Provider Language(s) Spoken: Japanese
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

INFECTIOUS DISEASE

BARTHEL, ROBERT V

Provider ID: 212799
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 900
LA JOLLA, CA 92037-1220

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 626-7780
Fax: (858) 626-4604
After Hours Phone: (858) 626-7780
Provider Gender: Male
License number: C55858
NPI: 1386605087
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, El Centro Regional Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

BENSON, CONSTANCE A
Provider ID: 64814
Board Certified Specialty: Yes
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Female
License number: G87372
NPI: 1871541664
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):

No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BURGDORF, SARAH W
Provider ID: 240903
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A141375
NPI: 1801213780
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

COWELL, ANNE N
Provider ID: 117215
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

Phone: (619) 543-6146
Fax:
After Hours Phone: (619) 543-6146
Provider Gender: Female
License number: A131119
NPI: 1639494420
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LOONEY, DAVID J
Provider ID: 64959
Board Certified Specialty: Yes
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Male
License number: G67588
NPI: 1912955048
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

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D. Directorio de proveedores de atención especializada

♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MILLER, HOWARD H

Provider ID: 273257
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9834 GENESEE AVE STE 310
LA JOLLA, CA 92037-1221
Phone: (858) 457-8600
Fax: (858) 764-9765
After Hours Phone: (858)
457-8600
Provider Gender: Male
License number: C38875
NPI: 1881631158
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish

Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Scripps
Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

RAWLINGS, STEPHEN A

Provider ID: 284362
Board Certified Specialty: No
UCSD MEDICAL GROUP
9500 GILMAN DR # 2069
LA JOLLA, CA 92093-5004

Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A146123
NPI: 1861888984
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SAVOIA, MARIA C

Provider ID: 65049
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-6146
Fax:
After Hours Phone: (619)
543-6146
Provider Gender: Female
License number: G36729
NPI: 1710903075
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

ALOTAIBI, MONA A

Provider ID: 271480
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A147271
NPI: 1174933915
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BOROK, ZEA

Provider ID: 284703
Board Certified Specialty: No

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D. Directorio de proveedores de atención especializada

UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-5273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-5273
 Provider Gender: Female
 License number: A47911
 NPI: 1750317251
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Hebrew
 Cultural Competency: No
 Hospital Affiliation: Ronald
 Reagan Ucla Med Ctr, Lac Usc
 Medical Center, Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

JONES, DANIEL S
 Provider ID: 244322
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 9850 GENESEE AVE STE 780
 LA JOLLA, CA 92037-1232
 Phone: (858) 625-7200
 Fax: (858) 625-8363
 After Hours Phone: (858)
 625-7200
 Provider Gender: Male
 License number: A102945
 NPI: 1376718890
 Provider English Spoken: Yes
 Provider Language(s) Spoken:

Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps
 Memorial Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Health Excel Ipa Inc

ODISH, MAZEN F
 Provider ID: 271468
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 License number: A133179
 NPI: 1992141428
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

ROSE, ALEXANDRA
 Provider ID: 224832
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 License number: A143518
 NPI: 1033557525
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr, Scripps Memorial
 Hospital Encinitas
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

TRAN, LINH N
 Provider ID: 271938
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 License number: A122603
 NPI: 1851682728

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D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr, Southwest
 Healthcare System Murrieta
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

Hours: M-F 8AM-5PM, SA
 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

Phone: (858) 657-8000
Fax:
After Hours Phone: (858)
 657-8000
Provider Gender: Male
License number: A107185
NPI: 1740485531

INTERNAL MEDICINE

American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

ABDELMALEK, JOSEPH A
Provider ID: 83072
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858)
 657-7000

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

INTERNAL MEDICINE GERIATRIC MEDICINE

BOULAND, DANIEL L
Provider ID: 64820
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (619) 471-9198
Fax: (619) 543-8255
After Hours Phone: (619)
 471-9198
Provider Gender: Male
License number: G50358
NPI: 1669498630
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Riverside
 Community Hosp, Ucsd Medical
 Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W

Provider Gender: Male
License number: A107185
NPI: 1740485531
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ADRIAN, MARK C
Provider ID: 126890
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 9850 GENESEE AVE STE 355
 LA JOLLA, CA 92037-1227
Phone: (858) 202-0011
Fax: (858) 202-0055
After Hours Phone: (858)
 202-0011
Provider Gender: Male
License number: G78895
NPI: 1003879438
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital, Scripps Memorial
 Hospital, Scripps Mercy Hospital
 Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):

ABDELMALEK, JOSEPH A
Provider ID: 83075
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8939 VILLA LA JOLLA DR STE
 110
 LA JOLLA, CA 92037-1732

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Health Excel Ipa Inc	<i>Phone:</i> (800) 926-8273 <i>Fax:</i> <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Male <i>License number:</i> G88284 <i>NPI:</i> 1861485005 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>	<i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>
ALLY, MARYANN T <i>Provider ID:</i> 117754 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (619) 471-9186 <i>Fax:</i> <i>After Hours Phone:</i> (619) 471-9186 <i>Provider Gender:</i> Female <i>License number:</i> C146011 <i>NPI:</i> 1316104359 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>	ANG, LAWRENCE W <i>Provider ID:</i> 116100 <i>Board Certified Specialty:</i> Yes UCSD MEDICAL GROUP 9434 MEDICAL CENTER DR FL 1 LA JOLLA, CA 92037-1337 <i>Phone:</i> (858) 657-8530 <i>Fax:</i> <i>After Hours Phone:</i> (858) 657-8530 <i>Provider Gender:</i> Male <i>License number:</i> A115926 <i>NPI:</i> 1851529879 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> University Hsp Of San Diego Co <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>	ANG, LAWRENCE W <i>Provider ID:</i> 116100 <i>Board Certified Specialty:</i> Yes UCSD MEDICAL GROUP 9434 MEDICAL CENTER DR FL 1 LA JOLLA, CA 92037-1337 <i>Phone:</i> (858) 657-8530 <i>Fax:</i> <i>After Hours Phone:</i> (858) 657-8530 <i>Provider Gender:</i> Male <i>License number:</i> A115926 <i>NPI:</i> 1851529879 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> University Hsp Of San Diego Co <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>
AMIRREZVANI, ALI <i>Provider ID:</i> 64798 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300	ANG, LAWRENCE W <i>Provider ID:</i> 111110 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (858) 657-7000 <i>Fax:</i> <i>After Hours Phone:</i> (858) 657-7000 <i>Provider Gender:</i> Male <i>License number:</i> A115926 <i>NPI:</i> 1851529879 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> University Hsp Of San Diego Co <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None	ANTONUCCI, STEPHEN A <i>Provider ID:</i> 115618 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR

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D. Directorio de proveedores de atención especializada

LA JOLLA, CA 92037-1300
 Phone: (619) 471-9185
 Fax:
 After Hours Phone: (619) 471-9185
 Provider Gender: Male
 License number: A143234
 NPI: 1124331426
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

ARUTYUNOV, BORIS S
 Provider ID: 201909
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (619) 471-9186
 Fax:
 After Hours Phone: (619) 471-9186
 Provider Gender: Male
 License number: A137892
 NPI: 1144562703
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Russian
 Cultural Competency: No
 Hospital Affiliation: Sutter Medical Center Sacramento,

Good Samaritan Hospital, Good Samaritan Hospital Los Angeles, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

ASUDANI, DEEPAK G
 Provider ID: 64802
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-7000
 Fax: (619) 543-8255
 After Hours Phone: (858) 657-7000
 Provider Gender: Male
 License number: A100515
 NPI: 1548208812
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

BAJWA, JASWINDER P

Provider ID: 64807
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-7000
 Fax: (619) 543-8255
 After Hours Phone: (858) 657-7000
 Provider Gender: Male
 License number: A118049
 NPI: 1306000922
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Hindi, Punjabi
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

BAZICK, JESSICA G
 Provider ID: 64811
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A121356
 NPI: 1114155082
 Provider English Spoken: Yes
 Provider Language(s) Spoken:

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D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BELL, JOHN F
Provider ID: 64813
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax: (619) 543-8255
After Hours Phone: (858) 657-7000
Provider Gender: Male
License number: A120667
NPI: 1699978445
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BLUESTEIN, HARRY G
Provider ID: 65129
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # 2B
LA JOLLA, CA 92037-1300
Phone: (858) 657-8010
Fax:
After Hours Phone: (858) 657-8010
Provider Gender: Male
License number: G20053
NPI: 1295793024

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BOLAND, BRIGID S
Provider ID: 83242
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-2347
Fax:
After Hours Phone: (619) 543-2347
Provider Gender: Female
License number: A111250
NPI: 1902069446
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BORDIN-WOSK, TALYA S
Provider ID: 273984
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (760) 471-9186
Fax: (619) 543-8255
After Hours Phone: (760) 471-9186
Provider Gender: Female
License number: A123772
NPI: 1801184973
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BORDIN-WOSK, TALYA S

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D. Directorio de proveedores de atención especializada

Provider ID: 273985
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A123772
NPI: 1801184973
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BROWNE, SARA H

Provider ID: 64829
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858)
657-7000
Provider Gender: Female
License number: A51877
NPI: 1275571176
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CHACE, CONSTANCE R

Provider ID: 117242
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 471-9186
Fax:
After Hours Phone: (619)
471-9186
Provider Gender: Female
License number: A129086
NPI: 1154682953
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CHALLENGER, CATHERINE M

Provider ID: 212739
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 900
LA JOLLA, CA 92037-1220
Phone: (858) 626-7780
Fax: (858) 626-4604
After Hours Phone: (858)
626-7780
Provider Gender: Female
License number: A138525
NPI: 1336567866
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

CHENG, GEORGE Z

Provider ID: 247640
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A166013
NPI: 1316174568
Provider English Spoken: Yes
Provider Language(s) Spoken:
Chinese
Cultural Competency: No

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D. Directorio de proveedores de atención especializada

Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CHETLAPALLI, SURYA R

Provider ID: 212676
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 900
LA JOLLA, CA 92037-1220
Phone: (858) 626-7780
Fax: (858) 626-4604
After Hours Phone: (858) 626-7780
Provider Gender: Female
License number: A96196
NPI: 1134164569
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

CHOE, CHARLES H

Provider ID: 64732

Board Certified Specialty: No
UCSD MEDICAL GROUP
8939 VILLA LA JOLLA DR STE 110
LA JOLLA, CA 92037-1732
Phone: (858) 657-8000
Fax:
After Hours Phone: (858) 657-8000
Provider Gender: Male
License number: A77451
NPI: 1891733846
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CHOE, CHARLES H

Provider ID: 65146
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8440
Fax:
After Hours Phone: (858) 657-8440
Provider Gender: Male
License number: A77451
NPI: 1891733846
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CHOUERI, MICHEL B

Provider ID: 118666
Board Certified Specialty: Yes
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 471-9186
Fax: (619) 543-8255
After Hours Phone: (619) 471-9186
Provider Gender: Male
License number: A117112
NPI: 1780991869
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

CLAY, BRIAN J

Provider ID: 64850
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858)
657-7000
Provider Gender: Male
License number: A83799
NPI: 1831124635
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

COSTELLO, CAITLIN L

Provider ID: 64419
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6173
Fax:
After Hours Phone: (858)
822-6173
Provider Gender: Female
License number: A108322
NPI: 1760649230
Provider English Spoken: Yes
Provider Language(s) Spoken:

Spanish

Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CROWLEY, DOUGLAS M

Provider ID: 212876
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 900
LA JOLLA, CA 92037-1220
Phone: (858) 626-7780
Fax: (858) 626-4604
After Hours Phone: (858)
626-7780
Provider Gender: Male
License number: A107750
NPI: 1356501902
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Scripps
Mercy Hospital, Scripps Mercy
Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

EL KAREH, ROBERT E

Provider ID: 64868
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 471-9185
Fax: (619) 543-8255
After Hours Phone: (619)
471-9185
Provider Gender: Male
License number: A112957
NPI: 1497944656
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FREDERICK, WILLIAM J

Provider ID: 83442
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 471-9186
Fax: (619) 543-8255
After Hours Phone: (858)
471-9186
Provider Gender: Male
License number: A123614
NPI: 1841592805

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GALANINA, NATALIE

Provider ID: 112342
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6173
Fax:
After Hours Phone: (858) 822-6173
Provider Gender: Female
License number: A121363
NPI: 1235372855
Provider English Spoken: Yes
Provider Language(s) Spoken: Russian
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Medical Ctr At Ucsf
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA:
GANDHI, NIKHIL R
Provider ID: 64881
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A81799
NPI: 1609934538
Provider English Spoken: Yes
Provider Language(s) Spoken: Gujarati, Hindi
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Vibra Hospital Of San Diego, Ucsd Medical Ctr, Alvarado Hospital Llc, Scripps Memorial Hospital, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GAN, TERENCE M

Provider ID: 212887
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 900
LA JOLLA, CA 92037-1220

Phone: (858) 626-7780
Fax: (858) 626-4604
After Hours Phone: (858) 626-7780
Provider Gender: Male
License number: A106013
NPI: 1104087808
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

GELBERG, ANNA

Provider ID: 285639
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A105308
NPI: 1104004258
Provider English Spoken: Yes
Provider Language(s) Spoken: Russian
Cultural Competency: No
Hospital Affiliation: Pomerado Hospital, Palomar Medical Center, Hoag Memorial Hospital Presbyterian, Ucsd Medical Ctr, Ucsd La Jolla John Sally

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HANNA, LINDSAY D

Provider ID: 284967
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: NP95009601
NPI: 1699257907
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HELSTEN, TERESA L

Provider ID: 64431
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR

LA JOLLA, CA 92093-1503
Phone: (858) 822-6173
Fax:
After Hours Phone: (858)
822-6173
Provider Gender: Female
License number: A71996
NPI: 1265408678
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HOGARTH, MICHAEL A

Provider ID: 214385
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A51060
NPI: 1225019193
Provider English Spoken: Yes
Provider Language(s) Spoken:
Portuguese, Spanish
Cultural Competency: No
Hospital Affiliation: Uc Davis
Medical Ctr
Medi-Cal Open Panel: Yes

Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HORMAN, SARAH F

Provider ID: 64913
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 471-9186
Fax: (619) 543-8255
After Hours Phone: (619)
471-9186
Provider Gender: Female
License number: A110036
NPI: 1861657744
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HSU, JONATHAN C

Provider ID: 83549
Board Certified Specialty: No
UCSD MEDICAL GROUP

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858)
657-7000
Provider Gender: Male
License number: A104474
NPI: 1629199195
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HSU, JONATHAN C

Provider ID: 83602
Board Certified Specialty: No
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR FL
1
LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax: (858) 657-8814
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A104474
NPI: 1629199195
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HUANG, BRYAN J

Provider ID: 64917
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 471-9198
Fax: (619) 543-8255
After Hours Phone: (619)
471-9198
Provider Gender: Male
License number: A87875
NPI: 1881652394
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HUSAIN, HATIM

Provider ID: 83605
Board Certified Specialty: No
UCSD MEDICAL GROUP

3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6173
Fax:
After Hours Phone: (858)
822-6173
Provider Gender: Male
License number: A99267
NPI: 1629234109
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Urdu
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

IVANOV, MARGARET A

Provider ID: 272876
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A156352
NPI: 1326427014
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group	UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (619) 471-9198 <i>Fax:</i> (619) 543-8255 <i>After Hours Phone:</i> (619) 471-9198 <i>Provider Gender:</i> Male <i>License number:</i> A87009 <i>NPI:</i> 1992762520 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>	<i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Health Excel Ipa Inc
JABBOUR, MOUSSA <i>Provider ID:</i> 256658 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Male <i>License number:</i> A148314 <i>NPI:</i> 1255741633 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 18/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group	JOO, MIHAE G <i>Provider ID:</i> 212689 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 9850 GENESEE AVE STE 900 LA JOLLA, CA 92037-1220 <i>Phone:</i> (858) 626-7780 <i>Fax:</i> (858) 626-4604 <i>After Hours Phone:</i> (858) 626-7780 <i>Provider Gender:</i> Female <i>License number:</i> A78309 <i>NPI:</i> 1134182744 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 18/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Health Excel Ipa Inc	JOO, MIHAE G <i>Provider ID:</i> 212690 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 9888 GENESEE AVE LA JOLLA, CA 92037-1205 <i>Phone:</i> (858) 626-7780 <i>Fax:</i> (858) 626-4604 <i>After Hours Phone:</i> (858) 626-7780 <i>Provider Gender:</i> Female <i>License number:</i> A78309 <i>NPI:</i> 1134182744 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 18/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Health Excel Ipa Inc
JENKINS, IAN H <i>Provider ID:</i> 64927 <i>Board Certified Specialty:</i> No	JOO, MIHAE G <i>Provider ID:</i> 212689 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 9850 GENESEE AVE STE 900 LA JOLLA, CA 92037-1220 <i>Phone:</i> (858) 626-7780 <i>Fax:</i> (858) 626-4604 <i>After Hours Phone:</i> (858) 626-7780 <i>Provider Gender:</i> Female <i>License number:</i> A78309 <i>NPI:</i> 1134182744 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 18/999	KAFI, AARYA <i>Provider ID:</i> 271607 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A123008
 NPI: 1255612339
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Farsi, Spanish
 Cultural Competency: No
 Hospital Affiliation: Cedars Sinai Medical Center, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

KAHN, ANDREW M
 Provider ID: 64929
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-7000
 Fax:
 After Hours Phone: (858) 657-7000
 Provider Gender: Male
 License number: A78646
 NPI: 1841247384
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton

Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

KAHN, ANDREW M
 Provider ID: 65205
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR # 1D
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-8530
 Fax:
 After Hours Phone: (858) 657-8530
 Provider Gender: Male
 License number: A78646
 NPI: 1841247384
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

KALUNIAN, KENNETH C
 Provider ID: 65206
 Board Certified Specialty: No

UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR # 2B
 LA JOLLA, CA 92037-1300
 Phone: (858) 249-2500
 Fax:
 After Hours Phone: (858) 249-2500
 Provider Gender: Male
 License number: G43645
 NPI: 1346269990
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, R, T
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

KATZ, YISRAEL
 Provider ID: 272937
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A158910
 NPI: 1730507872
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

American Sign Language (ASL): No
Accessibility: ☯
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KIPPS, THOMAS J

Provider ID: 64443
Board Certified Specialty: No
UC SAN DIEGO CANCER CTR
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6100
Fax:
After Hours Phone: (858) 822-6100
Provider Gender: Male
License number: G43229
NPI: 1306861950
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: ☯
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KOOLA, JEJO D

Provider ID: 113846
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

Phone: (619) 471-9186
Fax:
After Hours Phone: (619) 471-9186
Provider Gender: Male
License number: A122014
NPI: 1073775532
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KVIATKOVSKY, MILLA J

Provider ID: 118158
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Female
License number: 20A15453
NPI: 1366855355
Provider English Spoken: Yes
Provider Language(s) Spoken: Finnish, French, Hebrew, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KVIATKOVSKY, MILLA J

Provider ID: 274002
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Female
License number: 20A15453
NPI: 1366855355
Provider English Spoken: Yes
Provider Language(s) Spoken: Finnish, French, Hebrew, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
Accessibility: ☯
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KVIATKOVSKY, MILLA J

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider ID: 274004
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: 20A15453
NPI: 1366855355
Provider English Spoken: Yes
Provider Language(s) Spoken:
Finnish, French, Hebrew,
Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KWAK, KEVIN W

Provider ID: 118238
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 471-9186
Fax:
After Hours Phone: (619)
471-9186
Provider Gender: Male
License number: A149375
NPI: 1033538632
Provider English Spoken: Yes

Provider Language(s) Spoken:
Korean
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LAGO HERNANDEZ, CARLOS

A
Provider ID: 238623
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A146029
NPI: 1558756270
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Ucsd Medical Group

LAGO HERNANDEZ, CARLOS

A
Provider ID: 238624
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A146029
NPI: 1558756270
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LAM, MICHAEL T

Provider ID: 274409
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Male
License number: A141055
NPI: 1578974259
Provider English Spoken: Yes
Provider Language(s) Spoken: Mandarin
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LAM, PAMELA V

Provider ID: 212673
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 900
LA JOLLA, CA 92037-1220
Phone: (858) 626-7780
Fax: (858) 626-4604
After Hours Phone: (858) 626-7780
Provider Gender: Female
License number: 20A14238
NPI: 1235540964
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Health Excel Ipa Inc
LAM, PAMELA V
Provider ID: 212674
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9888 GENESEE AVE
LA JOLLA, CA 92037-1205
Phone: (858) 626-7780
Fax: (858) 626-4604
After Hours Phone: (858) 626-7780
Provider Gender: Female
License number: 20A14238
NPI: 1235540964
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

LEWIS, GREG D

Provider ID: 212727
Board Certified Specialty: Yes
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 900
LA JOLLA, CA 92037-1220
Phone: (858) 626-7780
Fax: (858) 626-4604
After Hours Phone: (858) 626-7780
Provider Gender: Male
License number: G75591

NPI: 1063447811
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

LEWIS, GREG D

Provider ID: 212728
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9888 GENESEE AVE
LA JOLLA, CA 92037-1205
Phone: (858) 626-7780
Fax: (858) 626-4604
After Hours Phone: (858) 626-7780
Provider Gender: Male
License number: G75591
NPI: 1063447811
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

LIPPMAN, SCOTT M

Provider ID: 64446
Board Certified Specialty: No
UC SAN DIEGO CANCER CTR
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6100
Fax:
After Hours Phone: (858)
822-6100
Provider Gender: Male
License number: A37790
NPI: 1780780874
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LOOMBA, ROHIT

Provider ID: 65238
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-2347
Fax:
After Hours Phone: (619)
543-2347
Provider Gender: Male

License number: A98657
NPI: 1578593521
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LOVGREN MORITZ, ARTHUR S

Provider ID: 214036
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 900
LA JOLLA, CA 92037-1220
Phone: (858) 626-7780
Fax: (858) 626-4604
After Hours Phone: (858)
626-7780
Provider Gender: Male
License number: G73095
NPI: 1992726095
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

LOVGREN MORITZ, ARTHUR S

Provider ID: 214037
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9888 GENESEE AVE
LA JOLLA, CA 92037-1205
Phone: (858) 626-7780
Fax: (858) 626-4604
After Hours Phone: (858)
626-7780
Provider Gender: Male
License number: G73095
NPI: 1992726095
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

LUGO, GUSTAVO A

Provider ID: 212793
Board Certified Specialty: Yes
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 900
LA JOLLA, CA 92037-1220
Phone: (858) 626-7780
Fax: (858) 626-4604
After Hours Phone: (858)
626-7780
Provider Gender: Male
License number: G57240
NPI: 1912941683
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

MAJITHIA, AMIT R

Provider ID: 255881
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: C158025
NPI: 1801091459
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MANNIKAROTTU, CHINO S

Provider ID: 213553

Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 900
LA JOLLA, CA 92037-1220
Phone: (858) 626-7780
Fax: (858) 626-4604
After Hours Phone: (858)
626-7780
Provider Gender: Female
License number: A137358
NPI: 1407171937
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

MANNIKAROTTU, CHINO S

Provider ID: 213554
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9888 GENESEE AVE
LA JOLLA, CA 92037-1205
Phone: (858) 626-7780
Fax: (858) 626-4604
After Hours Phone: (858)
626-7780
Provider Gender: Female
License number: A137358
NPI: 1407171937
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital

Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

MARC AURELE, KRISHELLE L

Provider ID: 118768
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDRN
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 249-5800
Fax:
After Hours Phone: (858)
249-5800
Provider Gender: Female
License number: A99634
NPI: 1952503435
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr, Ucsd La Jolla
John Sally Thornton, Tri City
Medical Ctr, Scripps Memorial
Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Network

MARC AURELE, KRISHELLE L

Provider ID: 118770

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED

FNDTN

9888 GENESEE AVE

LA JOLLA, CA 92037-1205

Phone: (858) 626-4123

Fax:

After Hours Phone: (858)

626-4123

Provider Gender: Female

License number: A99634

NPI: 1952503435

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Ucsd Medical Ctr, Ucsd La Jolla

John Sally Thornton, Tri City

Medical Ctr, Scripps Memorial

Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

MARTIN, LESLIE M

Provider ID: 64970

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (619) 471-9198

Fax: (619) 543-8255

After Hours Phone: (619)

471-9198

Provider Gender: Female

License number: G79006

NPI: 1306895495

Provider English Spoken: Yes

Provider Language(s) Spoken:

Yue Chinese

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

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

9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

MCGEHRIN, KEVIN M

Provider ID: 256019

Board Certified Specialty: No

UCSD MEDICAL GROUP

3855 HEALTH SCIENCES DR

LA JOLLA, CA 92093-1503

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A140783

NPI: 1972913101

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

MCLNTYRE, JONATHAN S

Provider ID: 118235

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (619) 471-9186

Fax:

After Hours Phone: (619)

471-9186

Provider Gender: Male

License number: A149315

NPI: 1134462211

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

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

9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

MEHTA, PREETI

Provider ID: 212740

Board Certified Specialty: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 900
LA JOLLA, CA 92037-1220
Phone: (858) 626-7780
Fax: (858) 626-4604
After Hours Phone: (858)
626-7780
Provider Gender: Female
License number: A98264
NPI: 1518904143
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, El Centro
Regional Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

MEHTA, PREETI

Provider ID: 212741
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9888 GENESEE AVE
LA JOLLA, CA 92037-1205
Phone: (858) 626-7780
Fax: (858) 626-4604
After Hours Phone: (858)
626-7780
Provider Gender: Female
License number: A98264
NPI: 1518904143
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, El Centro

Regional Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

MICHAEL, RAMI Y

Provider ID: 212724
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 900
LA JOLLA, CA 92037-1220
Phone: (858) 626-7780
Fax: (858) 626-4604
After Hours Phone: (858)
626-7780
Provider Gender: Male
License number: A144513
NPI: 1467871673
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

MICHAEL, RAMI Y

Provider ID: 212725
Board Certified Specialty: No
HEALTH EXCEL IPA INC

9888 GENESEE AVE
LA JOLLA, CA 92037-1205
Phone: (858) 626-7780
Fax: (858) 626-4604
After Hours Phone: (858)
626-7780
Provider Gender: Male
License number: A144513
NPI: 1467871673
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

MIRACLE, CYNTHIA M

Provider ID: 64747
Board Certified Specialty: No
UCSD MEDICAL GROUP
8939 VILLA LA JOLLA DR STE
110
LA JOLLA, CA 92037-1732
Phone: (858) 657-8000
Fax:
After Hours Phone: (858)
657-8000
Provider Gender: Female
License number: A82348
NPI: 1700976636
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: St Agnes
Medical Center, Ucsd Medical
Ctr

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MIRKARIMI, KAMRON

Provider ID: 212754
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 900
LA JOLLA, CA 92037-1220
Phone: (858) 626-7780
Fax: (858) 626-4604
After Hours Phone: (858)
626-7780
Provider Gender: Male
License number: A105651
NPI: 1497914725
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista, Scripps Memorial
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

MOITOZA JOHNSON, JENNIFER M

Provider ID: 213358
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 900
LA JOLLA, CA 92037-1220
Phone: (858) 626-7780
Fax: (858) 626-4604
After Hours Phone: (858)
626-7780
Provider Gender: Female
License number: A127356
NPI: 1568728210
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

MULRONEY, CAROLYN M

Provider ID: 64458
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6100
Fax:
After Hours Phone: (858)
822-6100
Provider Gender: Female
License number: A48368
NPI: 1215124664
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MULRONEY, CAROLYN M

Provider ID: 64458
Board Certified Specialty: No
UC SAN DIEGO CANCER CTR
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6100
Fax:
After Hours Phone: (858)
822-6100
Provider Gender: Female
License number: A48368
NPI: 1215124664
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MULRONEY, CAROLYN M

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider ID: 64458
Board Certified Specialty: No
UC SAN DIEGO CANCER CTR
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6173
Fax:
After Hours Phone: (858)
822-6173
Provider Gender: Female
License number: A48368
NPI: 1215124664
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MULRONEY, CAROLYN M

Provider ID: 64458
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6173
Fax:
After Hours Phone: (858)
822-6173
Provider Gender: Female
License number: A48368
NPI: 1215124664
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

NOBARI, MATTHEW M

Provider ID: 242034
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 471-9186
Fax:
After Hours Phone: (619)
471-9186
Provider Gender: Male
License number: A145102
NPI: 1619140902
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

ORR, JEREMY E

Provider ID: 99608
Board Certified Specialty: Yes
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 471-9186
Fax: (619) 543-8255
After Hours Phone: (619)
471-9186
Provider Gender: Male
License number: A111366
NPI: 1992940969
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Santa Monica
Ucla Med Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

PARDEE, PERRIE E

Provider ID: 101190
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 471-9186
Fax: (619) 543-8255
After Hours Phone: (619)
471-9186
Provider Gender: Female
License number: A123826
NPI: 1578850988
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken: *Email:*
Cultural Competency: No *Medical Group(s):*
Hospital Affiliation: Ucsd Medical *IPA:*
Ctr, Ucsd La Jolla John Sally
Thornton, Rady Childrens
Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

PARKER, BARBARA A

Provider ID: 122167
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 822-6200
Fax:
After Hours Phone: (858)
822-6200
Provider Gender: Female
License number: G49044
NPI: 1629093927
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:

PARKER, BARBARA A

Provider ID: 64464
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6173
Fax:
After Hours Phone: (858)
822-6173
Provider Gender: Female
License number: G49044
NPI: 1629093927
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

PATEL, KRUTI

Provider ID: 276542
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female

License number: C170176
NPI: 1043574262
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

PATEL, KRUTI

Provider ID: 283318
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: C170176
NPI: 1043574262
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Email:
Medical Group(s):
IPA: Ucsd Medical Group

PEDERSEN, BRIAN A

Provider ID: 102051
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR # 2B
 LA JOLLA, CA 92037-1300
Phone: (858) 249-2500

Fax:
After Hours Phone: (858)
 249-2500

Provider Gender: Male
License number: A117531
NPI: 1790913770

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

Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr

Medi-Cal Open Panel: No
Min/Max Age: None

American Sign Language (ASL):
 No

♿ *Accessibility:* P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM

Website:

Email:
Medical Group(s):
IPA:

PETTUS, JEREMY H

Provider ID: 127695
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-8200

Fax:
After Hours Phone: (858)
 657-8200

Provider Gender: Male

License number: A106382
NPI: 1225234982
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No

♿ *Accessibility:* W
Hours: M-SA 9AM-5PM

Website:

Email:
Medical Group(s):
IPA:

POTOK, OLIVIA A

Provider ID: 272707
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273

Fax: (888) 539-8781
After Hours Phone: (800)

926-8273
Provider Gender: Female

License number: A141725
NPI: 1073951323

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton

Medi-Cal Open Panel: Yes
Min/Max Age: 18/999

American Sign Language (ASL):
 No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM

Website:
Email:

Medical Group(s):
IPA: Ucsd Medical Group

QUARTAROLO, JENNIFER M

Provider ID: 65020
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300

Phone: (619) 471-9198
Fax: (619) 543-8255

After Hours Phone: (619)
 471-9198

Provider Gender: Female
License number: A96235

NPI: 1841213865
Provider English Spoken: Yes
Provider Language(s) Spoken:

Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr

Medi-Cal Open Panel: No
Min/Max Age: None

American Sign Language (ASL):
 No

♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
 9AM-5PM

Website:

Email:
Medical Group(s):
IPA:

RADWAN, MOHAMED O

Provider ID: 257298
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 9850 GENESEE AVE STE 370
 LA JOLLA, CA 92037-1212
Phone: (858) 625-7200

Fax: (858) 625-8363
After Hours Phone: (858)
 625-7200

Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: C154339
NPI: 1063746873
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

RAISINGHANI, AJIT B

Provider ID: 65281
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # 1D
LA JOLLA, CA 92037-1300
Phone: (858) 657-8530
Fax:
After Hours Phone: (858)
657-8530
Provider Gender: Male
License number: G75914
NPI: 1831292796
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA:
RAMOS, JEFFREY A
Provider ID: 212789
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 900
LA JOLLA, CA 92037-1220
Phone: (858) 626-7780
Fax: (858) 626-4604
After Hours Phone: (858)
626-7780
Provider Gender: Male
License number: A95018
NPI: 1356538011

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

RAMOS, JEFFREY A

Provider ID: 212790
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9888 GENESEE AVE
LA JOLLA, CA 92037-1205
Phone: (858) 626-7780
Fax: (858) 626-4604
After Hours Phone: (858)
626-7780
Provider Gender: Male
License number: A95018

NPI: 1356538011
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

RAMOS, PEDRO

Provider ID: 65023
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax: (619) 543-8255
After Hours Phone: (858)
657-7000
Provider Gender: Male
License number: A91945
NPI: 1861566366
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

<p><i>IPA:</i></p> <p>REEVES, RYAN R <i>Provider ID:</i> 78121 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9434 MEDICAL CENTER DR FL 1 LA JOLLA, CA 92037-1337 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Male <i>License number:</i> A108745 <i>NPI:</i> 1548440902 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p> <p>REID, ERIN G <i>Provider ID:</i> 64468 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 3855 HEALTH SCIENCES DR LA JOLLA, CA 92093-1503 <i>Phone:</i> (858) 822-6173 <i>Fax:</i> <i>After Hours Phone:</i> (858) 822-6173 <i>Provider Gender:</i> Female <i>License number:</i> A73308 <i>NPI:</i> 1902852767</p>	<p><i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p> <p>RENARD, AYSEL <i>Provider ID:</i> 271843 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female <i>License number:</i> A169429 <i>NPI:</i> 1225567456 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Turkish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 18/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i></p>	<p><i>IPA:</i> Ucsd Medical Group</p> <p>RUBIN, JOSHUA E <i>Provider ID:</i> 117221 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9350 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (619) 543-2347 <i>Fax:</i> <i>After Hours Phone:</i> (619) 543-2347 <i>Provider Gender:</i> Male <i>License number:</i> A120297 <i>NPI:</i> 1255610416 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Santa Monica Ucla Med Ctr, Ronald Reagan Ucla Med Ctr, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p> <p>SASAKI, REID A <i>Provider ID:</i> 65047 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (858) 657-7000 <i>Fax:</i> (619) 543-8255 <i>After Hours Phone:</i> (858) 657-7000 <i>Provider Gender:</i> Male <i>License number:</i> A112780</p>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1972817302
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SCHULTZ, CHRISTINA Y
Provider ID: 64742
Board Certified Specialty: No
UCSD MEDICAL GROUP
8939 VILLA LA JOLLA DR STE 100
LA JOLLA, CA 92037-1732
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A82421
NPI: 1396725701
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Uc Davis Medical Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA:
SEBASKY, MEGHAN M
Provider ID: 273963
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 471-9186
Fax:
After Hours Phone: (619) 471-9186
Provider Gender: Female
License number: A114146
NPI: 1538351408

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SEBASKY, MEGHAN M
Provider ID: 273964
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273

Provider Gender: Female
License number: A114146
NPI: 1538351408
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SEBASKY, MEGHAN M
Provider ID: 65053
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Female
License number: A114146
NPI: 1538351408
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA

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D. Directorio de proveedores de atención especializada

9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

SEGAR, SANDEEP

Provider ID: 118191

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (617) 471-9186

Fax:

After Hours Phone: (617)

471-9186

Provider Gender: Male

License number: A149780

NPI: 1982017067

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

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

9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

SELL, REBECCA E

Provider ID: 84395

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 657-7000

Fax:

After Hours Phone: (858)

657-7000

Provider Gender: Female

License number: A91947

NPI: 1568470672

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

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

9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

SEYMANN, GREGORY B

Provider ID: 65057

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (619) 471-9198

Fax: (619) 543-8255

After Hours Phone: (619)

471-9198

Provider Gender: Male

License number: A55150

NPI: 1710920442

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

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

9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

SHAHATTO, LOBNA

Provider ID: 129679

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 657-7000

Fax:

After Hours Phone: (858)

657-7000

Provider Gender: Female

License number: A117647

NPI: 1477879906

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

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

9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

SHAHATTO, LOBNA

Provider ID: 201323

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

LA JOLLA, CA 92037-1300
 Phone: (858) 657-7000
 Fax:
 After Hours Phone: (858) 657-7000
 Provider Gender: Female
 License number: A117647
 NPI: 1477879906
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

SHAH, MITA M

Provider ID: 64757
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8939 VILLA LA JOLLA DR STE 110
 LA JOLLA, CA 92037-1732
 Phone: (858) 657-8000
 Fax:
 After Hours Phone: (858) 657-8000
 Provider Gender: Female
 License number: A71739
 NPI: 1194773010
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr

Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Imperial Health Holdings Medical Group-Sd

SHATTIL, SANFORD J

Provider ID: 64478
 Board Certified Specialty: No
 UC SAN DIEGO CANCER CTR
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
 Phone: (858) 822-6100
 Fax:
 After Hours Phone: (858) 822-6100
 Provider Gender: Male
 License number: G22082
 NPI: 1679530844
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Green Hospital
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

SMITHERMAN, KENTON O

Provider ID: 65065
 Board Certified Specialty: No
 UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-7000
 Fax:
 After Hours Phone: (858) 657-7000
 Provider Gender: Male
 License number: G84563
 NPI: 1205888724
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

SMITH, CHELSEY J

Provider ID: 239921
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR # 2B
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A126660
 NPI: 1013264506
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: 18/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

STEVENS, KENNETH R

Provider ID: 212906

Board Certified Specialty: No

HEALTH EXCEL IPA INC

9850 GENESEE AVE STE 900

LA JOLLA, CA 92037-1220

Phone: (858) 626-7780

Fax: (858) 626-4604

After Hours Phone: (858)

626-7780

Provider Gender: Male

License number: A148746

NPI: 1134569882

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

STEVENS, KENNETH R

Provider ID: 212907

Board Certified Specialty: No

HEALTH EXCEL IPA INC

9888 GENESEE AVE

LA JOLLA, CA 92037-1205

Phone: (858) 626-7780

Fax: (858) 626-4604

After Hours Phone: (858)

626-7780

Provider Gender: Male

License number: A148746

NPI: 1134569882

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

SWEISS, NATALIE

Provider ID: 101289

Board Certified Specialty: No

UCSD MEDICAL GROUP

8939 VILLA LA JOLLA DR STE

110

LA JOLLA, CA 92037-1732

Phone: (858) 657-8000

Fax:

After Hours Phone: (858)

657-8000

Provider Gender: Female

License number: A107585

NPI: 1437387933

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Scripps

Memorial Hospital Encinitas,

Scripps Green Hospital, Ucsd

Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

TAYLOR, DAVID S

Provider ID: 274470

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A169407

NPI: 1033572995

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

TOROSIAN, KARO

Provider ID: 269269

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

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D. Directorio de proveedores de atención especializada

9834 GENESEE AVE STE 312
LA JOLLA, CA 92037-1221
Phone: (858) 558-8150
Fax: (858) 346-1024
After Hours Phone: (858)
558-8150

Provider Gender: Male
License number: 20A12445
NPI: 1275822082

Provider English Spoken: Yes
Provider Language(s) Spoken:
Armenian, Spanish

Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Scripps
Memorial Hospital Encinitas,
Sharp Memorial Hospital

Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

TRAN, HAO A

Provider ID: 110169
Board Certified Specialty: No
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR FL
1

LA JOLLA, CA 92037-1337
Phone: (800) 926-8273

Fax:
After Hours Phone: (800)
926-8273

Provider Gender: Male
License number: A112846
NPI: 1891997078

Provider English Spoken: Yes
Provider Language(s) Spoken:
Chinese, Vietnamese
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA:

TRAN, PHI L

Provider ID: 214428
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9888 GENESEE AVE

LA JOLLA, CA 92037-1205
Phone: (858) 626-7780
Fax: (858) 626-4604

After Hours Phone: (858)
626-7780

Provider Gender: Male
License number: 20A16597
NPI: 1245456672

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes

Min/Max Age: 18/999
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

TRAN, PHI L

Provider ID: 214429
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 900

LA JOLLA, CA 92037-1220
Phone: (858) 626-7780
Fax: (858) 626-4604

After Hours Phone: (858)
626-7780

Provider Gender: Male
License number: 20A16597
NPI: 1245456672

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes

Min/Max Age: 18/999
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

TRIVEDI, NAYANA MOHAN

Provider ID: 265322
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 900

LA JOLLA, CA 92037-1220
Phone: (858) 626-7780
Fax: (858) 626-4604

After Hours Phone: (858)
626-7780

Provider Gender: Female
License number: C43349
NPI: 1134161854

Provider English Spoken: Yes
Provider Language(s) Spoken:

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Gujarati, Hindi
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas, Palomar Health Downtown Campus, Pomerado Hospital, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

VARUGHESE, JAY I

Provider ID: 65084
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax: (619) 543-8255
After Hours Phone: (858) 657-7000
Provider Gender: Female
License number: A105937
NPI: 1447490230
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA:
VODKIN, IRINE E
Provider ID: 102011
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8200
Fax:
After Hours Phone: (858) 657-8200
Provider Gender: Female
License number: A113664
NPI: 1861762619
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

VODKIN, IRINE E

Provider ID: 102015
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-5415
Fax:
After Hours Phone: (619) 543-5415
Provider Gender: Female
License number: A113664

NPI: 1861762619
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

VOSKANIAN, NATALIE N

Provider ID: 65317
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-2347
Fax:
After Hours Phone: (619) 543-2347
Provider Gender: Female
License number: A100333
NPI: 1376721217
Provider English Spoken: Yes
Provider Language(s) Spoken: Armenian, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:

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D. Directorio de proveedores de atención especializada

Medical Group(s):

IPA:

WANG, ANGELA C

Provider ID: 259536

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: G62974

NPI: 1730133976

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Green Hospital, Scripps

Memorial Hospital, Ucsd Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

WARD, DAVID M

Provider ID: 64762

Board Certified Specialty: No

UCSD MEDICAL GROUP

8939 VILLA LA JOLLA DR STE

110

LA JOLLA, CA 92037-1732

Phone: (858) 657-8000

Fax:

After Hours Phone: (858)

657-8000

Provider Gender: Male

License number: A31860

NPI: 1154347979

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

WINTERS, KATHRYN D

Provider ID: 115620

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (619) 471-9185

Fax:

After Hours Phone: (619)

471-9185

Provider Gender: Female

License number: A141944

NPI: 1790128924

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

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

9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

WITZTUM, JOSEPH L

Provider ID: 65325

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR # LLB

(0912

LA JOLLA, CA 92037-1300

Phone: (858) 657-8440

Fax:

After Hours Phone: (858)

657-8440

Provider Gender: Male

License number: G29598

NPI: 1699791491

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

WOODELL, TYLER B

Provider ID: 127033

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (619) 543-6397

Fax:

After Hours Phone: (619)

543-6397

Provider Gender: Male

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D. Directorio de proveedores de atención especializada

License number: A127833
NPI: 1528322393
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

WOOTEN, DARCY A

Provider ID: 110397
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 471-9186
Fax: (619) 543-8255
After Hours Phone: (619)
471-9186
Provider Gender: Female
License number: A114007
NPI: 1538495973
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM

Website:
Email:
Medical Group(s):
IPA:
YADLAPATI, RENA H
Provider ID: 238586
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A113362
NPI: 1548597784
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

YADLAPATI, RENA H
Provider ID: 238587
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273

YADLAPATI, RENA H
Provider ID: 238587
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273

Provider Gender: Female
License number: A113362
NPI: 1548597784
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

YANG, JENNY Z

Provider ID: 283025
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A145538
NPI: 1346636453
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Sharp
Coronado Hosp And Healthcare
Ctr, Ucsd Medical Ctr, Ucsd La
Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

ZAYETS, STANISLAV

Provider ID: 125320
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 471-9186
Fax:
After Hours Phone: (619)
471-9186
Provider Gender: Male
License number: A141681
NPI: 1437313178
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ZHANG, SHERRY S

Provider ID: 272658
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A158102
NPI: 1588198147
Provider English Spoken: Yes
Provider Language(s) Spoken:
Mandarin
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

INTERVENTIONAL CARDIOLOGY

RAPEPORT, KEVIN B

Provider ID: 265292
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 940B
LA JOLLA, CA 92037-1220
Phone: (858) 864-1400
Fax: (858) 864-1413
After Hours Phone: (858)
864-1400
Provider Gender: Male
License number: A43603
NPI: 1952308124
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No

Hospital Affiliation: Scripps
Memorial Hospital, Grossmont
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

YTURRALDE, FREDERICK R

Provider ID: 284181
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 870
LA JOLLA, CA 92037-1233
Phone: (760) 452-6334
Fax: (760) 634-9755
After Hours Phone: (760)
452-6334
Provider Gender: Male
License number: C168384
NPI: 1134186372
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Pioneers
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 21/200
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

MATERNAL AND FETAL

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D. Directorio de proveedores de atención especializada

MEDICINE	<p>NPI: 1902862121 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Palomar Health Downtown Campus, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Palomar Medical Center, Ucsd Medical Ctr, Scripps Memorial Hospital, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 16/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group</p>	<p>Memorial Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group</p>
<p>BALLAS, JERASIMOS <i>Provider ID:</i> 209561 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9444 MEDICAL CENTER DR LA JOLLA, CA 92037-1337 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Male <i>License number:</i> A112607 <i>NPI:</i> 1871767384 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 16/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group</p>	<p>LAURENT, LOUISE C <i>Provider ID:</i> 208639 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9350 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female <i>License number:</i> A80409 <i>NPI:</i> 1770532707 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Palomar Medical Center, Scripps</p>	<p>MELBER, DORA J <i>Provider ID:</i> 240599 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female <i>License number:</i> A147917 <i>NPI:</i> 1124413026 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Hungarian <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 16/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group</p>
<p>HULL, ANDREW D <i>Provider ID:</i> 209482 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9350 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (858) 657-8745 <i>Fax:</i> <i>After Hours Phone:</i> (858) 657-8745 <i>Provider Gender:</i> Male <i>License number:</i> A53578</p>	<p>MOORE, THOMAS R <i>Provider ID:</i> 208642</p>	

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D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8745
Fax:
After Hours Phone: (858)
657-8745
Provider Gender: Male
License number: G49930
NPI: 1184682379
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

TARSA, MARYAM

Provider ID: 209394
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A69894
NPI: 1295768638
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi
Cultural Competency: No
Hospital Affiliation: Scripps

Memorial Hospital, Scripps
Mercy Hospital, Scripps Mercy
Hospital Chula Vista, Scripps
Memorial Hospital Encinitas,
Palomar Medical Center, Ucsd
La Jolla John Sally Thornton,
Ucsd Medical Ctr, Eisenhower
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

TARSA, MARYAM

Provider ID: 285854
Board Certified Specialty: No
UCSD MEDICAL GROUP
8910 VILLA LA JOLLA DR # 200
LA JOLLA, CA 92037-1701
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A69894
NPI: 1295768638
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Scripps
Mercy Hospital Chula Vista,
Scripps Memorial Hospital
Encinitas, Palomar Medical
Center, Scripps Mercy Hospital,
Ucsd La Jolla John Sally
Thornton, Ucsd Medical Ctr,
Eisenhower Medical Ctr

Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

WOELKERS, DOUGLAS A

Provider ID: 209383
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8745
Fax:
After Hours Phone: (858)
657-8745
Provider Gender: Male
License number: G77134
NPI: 1013965748
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Scripps
Mercy Hospital, Scripps Mercy
Hospital Chula Vista, Scripps
Memorial Hospital Encinitas,
Palomar Medical Center,
Palomar Health Downtown
Campus, Ucsd La Jolla John
Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

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D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Ucsd Medical Group

WOLF, RICHARD B

Provider ID: 209252
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: 20A6028
NPI: 1497713846
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Palomar
Health Downtown Campus,
Scripps Memorial Hospital,
Scripps Mercy Hospital, Scripps
Mercy Hospital Chula Vista,
Scripps Memorial Hospital
Encinitas, Palomar Medical
Center, Ucsd Medical Ctr, Ucsd
La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

NEONATAL / PERINATAL MEDICINE

FERNANDEZ, ERIKA F

Provider ID: 205765
Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 249-5800
Fax: (858) 249-5839
After Hours Phone: (858)
249-5800
Provider Gender: Female
License number: C131691
NPI: 1881609337
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Rady Childrens Hospital San
Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

GOLEMBESKI, DAVID J

Provider ID: 205894
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 249-5800
Fax: (858) 249-5839
After Hours Phone: (858)
249-5800
Provider Gender: Male
License number: G63111
NPI: 1376614131
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Palomar Health Downtown
Campus, Scripps Memorial
Hospital Encinitas, Pomerado
Hospital, Southwest Healthcare
System Wildomar, Southwest
Healthcare System Murrieta,
Palomar Medical Center, Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

MARC AURELE, KRISHELLE L

Provider ID: 206207
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 249-5800
Fax: (858) 249-5839
After Hours Phone: (858)
249-5800
Provider Gender: Female
License number: A99634
NPI: 1952503435
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego, Tri
City Medical Ctr, Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton, Scripps Memorial

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D. Directorio de proveedores de atención especializada

<p>Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/0 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network</p>	<p><i>IPA:</i> Rady Childrens Health Network</p> <p>MESTAN, KAREN K <i>Provider ID:</i> 285931 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (858) 249-5800 <i>Fax:</i> (858) 249-5839 <i>After Hours Phone:</i> (858) 249-5800 <i>Provider Gender:</i> Female <i>License number:</i> C173648 <i>NPI:</i> 1942253356 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network</p>	<p><i>Provider Gender:</i> Male <i>License number:</i> A91944 <i>NPI:</i> 1205047545 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, El Centro Regional Medical Center, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Rady Childrens Hospital San Diego, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network</p>
<p>MARC AURELE, KRISHELLE L <i>Provider ID:</i> 206209 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 9888 GENESEE AVE LA JOLLA, CA 92037-1205 <i>Phone:</i> (858) 626-4123 <i>Fax:</i> (760) 633-7998 <i>After Hours Phone:</i> (858) 626-4123 <i>Provider Gender:</i> Female <i>License number:</i> A99634 <i>NPI:</i> 1952503435 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Tri City Medical Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Scripps Memorial Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/0 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i></p>	<p>RAMOS, CARLOS G <i>Provider ID:</i> 206062 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (858) 249-5800 <i>Fax:</i> (619) 543-3812 <i>After Hours Phone:</i> (858) 249-5800</p>	<p>SAJTI, ENIKO C <i>Provider ID:</i> 206170 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (858) 249-5800 <i>Fax:</i> (858) 249-5839 <i>After Hours Phone:</i> (858) 249-5800 <i>Provider Gender:</i> Female <i>License number:</i> A115973 <i>NPI:</i> 1649433103 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Childrens Hosp And Resrch Ctr At</p>

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D. Directorio de proveedores de atención especializada

Oakland, Rady Childrens
Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/0
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

NEPHROLOGY

BOISKIN, MARK M
Provider ID: 40762
Board Certified Specialty: No
BALBOA NEPHROLOGY MED
GRP INC
9834 GENESEE AVE STE 312
LA JOLLA, CA 92037-1221
Phone: (858) 810-8000
Fax: (858) 346-1024
After Hours Phone: (858)
810-8000
Provider Gender: Male
License number: A52055
NPI: 1437154143
Provider English Spoken: Yes
Provider Language(s) Spoken:
Afrikaans, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas,
Scripps Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 9AM-5PM, SA
9AM-5PM
Website: www.bnmg.org

Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd
BOISKIN, MARK M , MD
Provider ID: 40762
Board Certified Specialty: No
BALBOA NEPHROLOGY MED
GRP INC
9834 GENESEE AVE STE 312
LA JOLLA, CA 92037-1221
Phone: (858) 558-8150
Fax: (858) 346-1024
After Hours Phone: (858)
558-8150
Provider Gender: Male
License number: A52055
NPI: 1437154143
Provider English Spoken: Yes
Provider Language(s) Spoken:
Afrikaans, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Scripps
Memorial Hospital Encinitas,
Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd
BOISKIN, MARK M
Provider ID: 40762

Board Certified Specialty: No
BALBOA NEPHROLOGY MED
GRP INC
9834 GENESEE AVE STE 312
LA JOLLA, CA 92037-1221
Phone: (858) 558-8150
Fax: (858) 346-1024
After Hours Phone: (858)
558-8150
Provider Gender: Male
License number: A52055
NPI: 1437154143
Provider English Spoken: Yes
Provider Language(s) Spoken:
Afrikaans, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas,
Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd
BOISKIN, MARK M
Provider ID: 40762
Board Certified Specialty: No
BALBOA NEPHROLOGY MED
GRP INC
9834 GENESEE AVE STE 312
LA JOLLA, CA 92037-1221
Phone: (858) 558-8150
Fax: (858) 346-1024
After Hours Phone: (858)
558-8150
Provider Gender: Male

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D. Directorio de proveedores de atención especializada

License number: A52055
NPI: 1437154143
Provider English Spoken: Yes
Provider Language(s) Spoken: Afrikaans, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

COMUNALE, RODERICK A

Provider ID: 270592
Board Certified Specialty: No
HEALTH EXCEL IPA INC
6501 LA JOLLA BLVD
LA JOLLA, CA 92037-6016
Phone: (858) 551-0276
Fax: (858) 454-8796
After Hours Phone: (858) 551-0276
Provider Gender: Male
License number: A43885
NPI: 1568462109
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Paradise Valley Hospital, Alvarado Hospital Llc, Scripps Mercy

Hospital, Alvarado Hosp Med Ctr, Kindred Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

CUNARD, ROBYN A

Provider ID: 64733
Board Certified Specialty: Yes
UCSD MEDICAL GROUP
8939 VILLA LA JOLLA DR STE 110
LA JOLLA, CA 92037-1732
Phone: (858) 657-8000
Fax: (858) 657-8066
After Hours Phone: (858) 657-8000
Provider Gender: Male
License number: A55378
NPI: 1609983253
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FRIEND, PETER S

Provider ID: 54226

Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 420
LA JOLLA, CA 92037-1212
Phone: (858) 453-9460
Fax: (858) 453-6683
After Hours Phone: (858) 453-9460
Provider Gender: Male
License number: G22253
NPI: 1609825256
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

GABBAI, FRANCIS B

Provider ID: 64735
Board Certified Specialty: No
UCSD MEDICAL GROUP
8939 VILLA LA JOLLA DR STE 110
LA JOLLA, CA 92037-1732
Phone: (858) 657-8000
Fax:
After Hours Phone: (858) 657-8000
Provider Gender: Male
License number: A45614
NPI: 1356356034
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<i>Hospital Affiliation:</i>	8939 VILLA LA JOLLA DR STE 110	Memorial Hospital, Scripps Memorial Hospital Encinitas
<i>Medi-Cal Open Panel:</i>	No	<i>Medi-Cal Open Panel:</i> No
<i>Min/Max Age:</i>	None	<i>Min/Max Age:</i> None
<i>American Sign Language (ASL):</i>	No	<i>American Sign Language (ASL):</i> No
<i>Accessibility:</i>	♿	<i>Accessibility:</i> W
<i>Hours:</i>	M-SA 9AM-5PM	<i>Hours:</i> M-F 9AM-5PM, SA 9AM-5PM
<i>Website:</i>		<i>Website:</i> www.bnmg.org
<i>Email:</i>		<i>Email:</i>
<i>Medical Group(s):</i>		<i>Medical Group(s):</i>
<i>IPA:</i>		<i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd
GARIMELLA, PRANAV S		LAKHERA, YOGITA, MD
<i>Provider ID:</i> 110160		<i>Provider ID:</i> 109353
<i>Board Certified Specialty:</i> No		<i>Board Certified Specialty:</i> No
UCSD MEDICAL GROUP		BALBOA NEPHROLOGY MED GRP INC
9350 CAMPUS POINT DR # 2B		9834 GENESEE AVE STE 312
LA JOLLA, CA 92037-1300		LA JOLLA, CA 92037-1221
<i>Phone:</i> (858) 249-2500		<i>Phone:</i> (858) 558-8150
<i>Fax:</i>		<i>Fax:</i> (858) 346-1024
<i>After Hours Phone:</i> (858) 249-2500		<i>After Hours Phone:</i> (858) 558-8150
<i>Provider Gender:</i> Male		<i>Provider Gender:</i> Female
<i>License number:</i> A143549		<i>License number:</i> A125173
<i>NPI:</i> 1477880102		<i>NPI:</i> 1083972483
<i>Provider English Spoken:</i> Yes		<i>Provider English Spoken:</i> Yes
<i>Provider Language(s) Spoken:</i> Hindi		<i>Provider Language(s) Spoken:</i> Hindi
<i>Cultural Competency:</i> No		<i>Cultural Competency:</i> No
<i>Hospital Affiliation:</i>		<i>Hospital Affiliation:</i> Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas
<i>Medi-Cal Open Panel:</i> No		<i>Medi-Cal Open Panel:</i> Yes
<i>Min/Max Age:</i> None		<i>Min/Max Age:</i> None
<i>American Sign Language (ASL):</i> No		<i>American Sign Language (ASL):</i> No
<i>Accessibility:</i> P, EB, IB, E, R, T		<i>Accessibility:</i>
<i>Hours:</i> M-SA 9AM-5PM		<i>Hours:</i> M-SA 9AM-5PM
<i>Website:</i>		<i>Website:</i>
<i>Email:</i>		
<i>Medical Group(s):</i>		
<i>IPA:</i>		
IX, JOACHIM H		
<i>Provider ID:</i> 64740		
<i>Board Certified Specialty:</i> No		
UCSD MEDICAL GROUP		
	LAKHERA, YOGITA	
	<i>Provider ID:</i> 109353	
	<i>Board Certified Specialty:</i> No	
	BALBOA NEPHROLOGY MED GRP INC	
	9834 GENESEE AVE STE 312	
	LA JOLLA, CA 92037-1221	
	<i>Phone:</i> (858) 810-8000	
	<i>Fax:</i>	
	<i>After Hours Phone:</i> (858) 810-8000	
	<i>Provider Gender:</i> Female	
	<i>License number:</i> A125173	
	<i>NPI:</i> 1083972483	
	<i>Provider English Spoken:</i> Yes	
	<i>Provider Language(s) Spoken:</i> Hindi	
	<i>Cultural Competency:</i> No	
	<i>Hospital Affiliation:</i> Scripps	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p><i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p> <p>LAKHERA, YOGITA <i>Provider ID:</i> 262128 <i>Board Certified Specialty:</i> No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 9834 GENESEE AVE STE 312 LA JOLLA, CA 92037-1221 <i>Phone:</i> (858) 558-8150 <i>Fax:</i> (858) 346-1024 <i>After Hours Phone:</i> (858) 558-8150 <i>Provider Gender:</i> Female <i>License number:</i> A125173 <i>NPI:</i> 1083972483 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Hindi <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p> <p>MEHTA, RAVINDRA L <i>Provider ID:</i> 64746 <i>Board Certified Specialty:</i> No</p>	<p>UCSD MEDICAL GROUP 8939 VILLA LA JOLLA DR STE 110 LA JOLLA, CA 92037-1732 <i>Phone:</i> (858) 657-8000 <i>Fax:</i> (858) 657-8558 <i>After Hours Phone:</i> (858) 657-8000 <i>Provider Gender:</i> Male <i>License number:</i> A48361 <i>NPI:</i> 1295818102 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Hindi, Punjabi <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p> <p>MULLANEY, SCOTT R <i>Provider ID:</i> 64750 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 8939 VILLA LA JOLLA DR STE 110 LA JOLLA, CA 92037-1732 <i>Phone:</i> (858) 657-8000 <i>Fax:</i> (619) 543-7368 <i>After Hours Phone:</i> (858) 657-8000 <i>Provider Gender:</i> Male <i>License number:</i> A65695 <i>NPI:</i> 1285742726 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish</p>	<p><i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p> <p>RIFKIN, DENA E <i>Provider ID:</i> 64755 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 8939 VILLA LA JOLLA DR STE 110 LA JOLLA, CA 92037-1732 <i>Phone:</i> (858) 657-8000 <i>Fax:</i> (858) 657-8558 <i>After Hours Phone:</i> (858) 657-8000 <i>Provider Gender:</i> Female <i>License number:</i> A109186 <i>NPI:</i> 1578519203 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p> <p>SANCHEZ, AMBER P</p>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider ID: 64756
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8939 VILLA LA JOLLA DR STE
 110
 LA JOLLA, CA 92037-1732
 Phone: (818) 657-8000
 Fax:

After Hours Phone: (818)
 657-8000

Provider Gender: Female

License number: A91770

NPI: 1700963907

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
 No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

SANCHEZ, AMBER P

Provider ID: 65040

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 657-7000

Fax:

After Hours Phone: (858)

657-7000

Provider Gender: Female

License number: A91770

NPI: 1700963907

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
 No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA
 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

SINGH, PRABHLEEN

Provider ID: 64759

Board Certified Specialty: No

UCSD MEDICAL GROUP

8939 VILLA LA JOLLA DR STE

110

LA JOLLA, CA 92037-1732

Phone: (858) 657-8000

Fax: (858) 657-8558

After Hours Phone: (858)

657-8000

Provider Gender: Female

License number: A93789

NPI: 1235207234

Provider English Spoken: Yes

Provider Language(s) Spoken:

Hindi, Punjabi

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
 No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

STEER, DYLAN L

Provider ID: 257474

Board Certified Specialty: No

BLUE SHIELD PROMISE

HEALTH PLAN DIRECT

9834 GENESEE AVE STE 312

LA JOLLA, CA 92037-1221

Phone: (858) 558-8150

Fax: (858) 346-1024

After Hours Phone: (858)
 558-8150

Provider Gender: Male

License number: A65604

NPI: 1437154978

Provider English Spoken: Yes

Provider Language(s) Spoken:
 Spanish

Cultural Competency: No

Hospital Affiliation: Scripps
 Memorial Hospital, Sharp
 Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
 No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Blue Shield Promise Health
 Plan Direct, Community Care Ipa
 Llc, Health Excel Ipa Inc, Imperial
 Health Holdings Medical
 Group-Sd

STEER, DYLAN L

Provider ID: 262251

Board Certified Specialty: No

IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD

9834 GENESEE AVE STE 312

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D. Directorio de proveedores de atención especializada

LA JOLLA, CA 92037-1221
 Phone: (858) 558-8150
 Fax: (858) 346-1024
 After Hours Phone: (858) 558-8150
 Provider Gender: Male
 License number: A65604
 NPI: 1437154978
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital, Sharp Memorial Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:

Medical Group(s):
 IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

STEER, DYLAN L

Provider ID: 31399
 Board Certified Specialty: No
 BALBOA NEPHROLOGY MED GRP INC
 9834 GENESEE AVE STE 312
 LA JOLLA, CA 92037-1221
 Phone: (858) 810-8000
 Fax: (858) 554-5152
 After Hours Phone: (858) 810-8000
 Provider Gender: Male
 License number: A65604
 NPI: 1437154978
 Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital, Sharp Memorial Hospital, Scripps Memorial Hospital Encinitas
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: Accessibility: W
 Hours: M-F 9AM-5PM, SA 9AM-5PM
 Website: www.bnmg.org
 Email:
 Medical Group(s):
 IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

STEER, DYLAN L

Provider ID: 31399
 Board Certified Specialty: No
 BALBOA NEPHROLOGY MED GRP INC
 9834 GENESEE AVE STE 312
 LA JOLLA, CA 92037-1221
 Phone: (858) 558-8150
 Fax: (858) 346-1024
 After Hours Phone: (858) 558-8150
 Provider Gender: Male
 License number: A65604
 NPI: 1437154978
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital, Sharp Memorial Hospital
 Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

STEER, DYLAN L , MD

Provider ID: 31399
 Board Certified Specialty: No
 BALBOA NEPHROLOGY MED GRP INC
 9834 GENESEE AVE STE 312
 LA JOLLA, CA 92037-1221
 Phone: (858) 558-8150
 Fax: (858) 346-1024
 After Hours Phone: (858) 558-8150
 Provider Gender: Male
 License number: A65604
 NPI: 1437154978
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital, Sharp Memorial Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Blue Shield Promise Health

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Plan Direct, Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

TOROSIAN, KARO

Provider ID: 118749

Board Certified Specialty: No

BALBOA NEPHROLOGY MED GRP INC

9834 GENESEE AVE STE 312 LA JOLLA, CA 92037-1221

Phone: (858) 810-8000

Fax:

After Hours Phone: (858)

810-8000

Provider Gender: Male

License number: 20A12445

NPI: 1275822082

Provider English Spoken: Yes

Provider Language(s) Spoken:

Armenian, Spanish

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Scripps

Memorial Hospital Encinitas,

Sharp Memorial Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: W

Hours: M-F 9AM-5PM, SA

9AM-5PM

Website: www.bnmg.org

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc, Imperial

Health Holdings Medical

Group-Sd

TOROSIAN, KARO

Provider ID: 118749

Board Certified Specialty: No

BALBOA NEPHROLOGY MED GRP INC

9834 GENESEE AVE STE 312 LA JOLLA, CA 92037-1221

Phone: (858) 558-8150

Fax: (858) 346-1024

After Hours Phone: (858)

558-8150

Provider Gender: Male

License number: 20A12445

NPI: 1275822082

Provider English Spoken: Yes

Provider Language(s) Spoken:

Armenian, Spanish

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Scripps

Memorial Hospital Encinitas,

Sharp Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc, Imperial

Health Holdings Medical

Group-Sd

TOROSIAN, KARO

Provider ID: 262330

Board Certified Specialty: No

IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD

9834 GENESEE AVE STE 312

LA JOLLA, CA 92037-1221

Phone: (858) 558-8150

Fax: (858) 346-1024

After Hours Phone: (858)

558-8150

Provider Gender: Male

License number: 20A12445

NPI: 1275822082

Provider English Spoken: Yes

Provider Language(s) Spoken:

Armenian, Spanish

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Scripps

Memorial Hospital Encinitas,

Sharp Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc, Imperial

Health Holdings Medical

Group-Sd

NEUROLOGY CHILD

HAAS, RICHARD H

Provider ID: 65184

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR # LLB

(0912

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A38555

NPI: 1700801867

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

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D. Directorio de proveedores de atención especializada

Ucsd Medical Ctr, Sharp Mary
Birch Hosp For Women And
Newborns, Ucsd La Jolla John
Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

NEUROLOGY

BEVINS, ELIZABETH A
Provider ID: 277726
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A145182
NPI: 1013395151
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Ucsd Medical Group
BLUMENFELD, ANDREW M
Provider ID: 252871
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 470
LA JOLLA, CA 92037-1228
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760)
631-3000
Provider Gender: Male
License number: A47863
NPI: 1164459913
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

BLUMENFELD, ANDREW M
Provider ID: 277503
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9850 GENESEE AVE # 505
LA JOLLA, CA 92037-1224
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760)
631-3000
Provider Gender: Male

License number: A47863
NPI: 1164459913
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

BLUMENFELD, ANDREW M
Provider ID: 277679
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 530
LA JOLLA, CA 92037-1213
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760)
631-3000
Provider Gender: Male
License number: A47863
NPI: 1164459913
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM

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D. Directorio de proveedores de atención especializada

Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

BREWER, JAMES B

Provider ID: 65131
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # 2B
LA JOLLA, CA 92037-1300
Phone: (858) 249-2500
Fax:
After Hours Phone: (858)
249-2500
Provider Gender: Male
License number: A89348
NPI: 1033144985
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hebrew
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CHEN, DILLON Y

Provider ID: 259995
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

Phone: (858) 249-5800
Fax: (858) 249-5839
After Hours Phone: (858)
249-5800
Provider Gender: Male
License number: A133170
NPI: 1841633914
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/99
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

COREY BLOOM, JODY P

Provider ID: 65152
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8540
Fax: (858) 657-8549
After Hours Phone: (858)
657-8540
Provider Gender: Female
License number: G62847
NPI: 1053400093
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

COUGHLIN, DAVID G

Provider ID: 240950
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A162063
NPI: 1740543784
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

ELLIS, RONALD J

Provider ID: 65166
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8540
Fax: (858) 657-8549
After Hours Phone: (858)
657-8540

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Male
License number: G70658
NPI: 1992763114
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GALASKO, DOUGLAS R

Provider ID: 65172
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8540
Fax: (858) 657-8549
After Hours Phone: (858) 657-8540
Provider Gender: Male
License number: A45023
NPI: 1336197730
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA:
GUALBERTO, GARY C
Provider ID: 277092
Board Certified Specialty: Yes
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 530
LA JOLLA, CA 92037-1213
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760) 631-3000
Provider Gender: Male
License number: C138319
NPI: 1689875668
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Palomar Medical Center, Pomerado Hospital, Scripps Memorial Hospital Encinitas, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

Medical Group(s):
IPA:

Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A153161
NPI: 1194179135
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network, Ucsd Medical Group

HANNAWI, ANDREW P

Provider ID: 284938
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

HEMMEN, THOMAS M

Provider ID: 65188
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # 2B
LA JOLLA, CA 92037-1300
Phone: (858) 249-2500
Fax:
After Hours Phone: (858) 249-2500
Provider Gender: Male
License number: A72645
NPI: 1902821945
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: El Centro Regional Medical Center, Scripps

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>Mercy Hospital, Scripps Mercy Hospital Chula Vista Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: P, EB, IB, E, R, T Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:</p>	<p>UCSD MEDICAL GROUP 9350 CAMPUS POINT DR # 2B LA JOLLA, CA 92037-1300 Phone: (858) 249-2500 Fax: After Hours Phone: (858) 249-2500 Provider Gender: Male License number: A31274 NPI: 1053326710 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: P, EB, IB, E, R, T Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group</p>	<p>Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: P, EB, IB, E, R, T Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:</p>
<p>IRAGUIMADOZ, VICENTE J Provider ID: 246701 Board Certified Specialty: No UCSD MEDICAL GROUP 9350 CAMPUS POINT DR LA JOLLA, CA 92037-1300 Phone: (858) 657-8540 Fax: After Hours Phone: (858) 657-8540 Provider Gender: Male License number: A31274 NPI: 1053326710 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group</p>	<p>KANSAL, LEENA R Provider ID: 65207 Board Certified Specialty: No UCSD MEDICAL GROUP 9350 CAMPUS POINT DR # 2B LA JOLLA, CA 92037-1300 Phone: (858) 249-2500 Fax: After Hours Phone: (858) 249-2500 Provider Gender: Female License number: A99271 NPI: 1871759084 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr Medi-Cal Open Panel: No</p>	<p>KINKEL, REVERE P Provider ID: 83655 Board Certified Specialty: No UCSD MEDICAL GROUP 9350 CAMPUS POINT DR LA JOLLA, CA 92037-1300 Phone: (858) 657-8540 Fax: After Hours Phone: (858) 657-8540 Provider Gender: Male License number: G89360 NPI: 1043325939 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:</p>
<p>IRAGUIMADOZ, VICENTE J Provider ID: 65199 Board Certified Specialty: No</p>	<p>KOCHARIAN, NAIRA Provider ID: 271037 Board Certified Specialty: No HEALTH EXCEL IPA INC 9850 GENESEE AVE STE 340 LA JOLLA, CA 92037-1208</p>	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 750-2166
Fax: (858) 750-2169
After Hours Phone: (858) 750-2166
Provider Gender: Female
License number: A93881
NPI: 1992816532
Provider English Spoken: Yes
Provider Language(s) Spoken: Armenian, Russian
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

LEE, DAVID J

Provider ID: 246264
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # LLB
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A124329
NPI: 1871884130
Provider English Spoken: Yes
Provider Language(s) Spoken: Korean
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LEGER, GABRIEL C

Provider ID: 247609
Board Certified Specialty: No
UCSD MEDICAL GROUP
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: C155902
NPI: 1720367899
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MEYER, BRETT C

Provider ID: 65249
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # 2B

LA JOLLA, CA 92037-1300
Phone: (858) 249-2500
Fax:
After Hours Phone: (858) 249-2500
Provider Gender: Male
License number: A70903
NPI: 1316011265
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: El Centro Regional Medical Center, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

NIELSEN, AMY C

Provider ID: 277009
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9850 GENESEE AVE STE 530
LA JOLLA, CA 92037-1213
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760) 631-3000
Provider Gender: Female
License number: 20A11494
NPI: 1730110529
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus,

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D. Directorio de proveedores de atención especializada

Scripps Memorial Hospital
Encinitas, Tri City Medical Ctr,
Pomerado Hospital, Palomar
Medical Center, Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

NIELSEN, AMY C

Provider ID: 277012
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 530
LA JOLLA, CA 92037-1213
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760)
631-3000
Provider Gender: Female
License number: 20A11494
NPI: 1730110529
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Palomar
Health Downtown Campus,
Scripps Memorial Hospital
Encinitas, Tri City Medical Ctr,
Pomerado Hospital, Palomar
Medical Center, Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

OLSON, SCOTT E

Provider ID: 65270
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-1636
Fax:
After Hours Phone: (858)
657-1636
Provider Gender: Male
License number: A83715
NPI: 1376568659
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr, Ucsd Medical Ctr,
Pomerado Hospital, Palomar
Medical Center, Scripps Green
Hospital, Ucsd La Jolla John
Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

OLSON, SCOTT E

Provider ID: 65374
Board Certified Specialty: No
UCSD MEDICAL GROUP

9434 MEDICAL CENTER DR FL
1
LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A83715
NPI: 1376568659
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr, Ucsd Medical Ctr,
Pomerado Hospital, Palomar
Medical Center, Scripps Green
Hospital, Ucsd La Jolla John
Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

PICCIONI, DAVID E

Provider ID: 84330
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6100
Fax:
After Hours Phone: (858)
822-6100
Provider Gender: Male
License number: A100663
NPI: 1851542575
Provider English Spoken: Yes
Provider Language(s) Spoken:

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D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Ronald Reagan Ucla Med Ctr, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

QAYOUMI, WALI Z
Provider ID: 284369
Board Certified Specialty: No
UCSD MEDICAL GROUP
9500 GILMAN DR # 2069
LA JOLLA, CA 92093-5004
Phone: (858) 822-5881
Fax: (888) 539-8781
After Hours Phone: (858) 822-5881
Provider Gender: Male
License number: A168429
NPI: 1093178220
Provider English Spoken: Yes
Provider Language(s) Spoken: French
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

QAYOUMI, WALI Z
Provider ID: 284371
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # LLB
LA JOLLA, CA 92037-1300
Phone: (619) 284-3746
Fax: (888) 579-8781
After Hours Phone: (619) 284-3746
Provider Gender: Male
License number: A168429
NPI: 1093178220
Provider English Spoken: Yes
Provider Language(s) Spoken: French
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

RAVITS, JOHN M
Provider ID: 65283
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # 2B
LA JOLLA, CA 92037-1300
Phone: (858) 249-2500
Fax:
After Hours Phone: (858) 249-2500
Provider Gender: Male
License number: G43695
NPI: 1396858965

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SADOFF, MARK N
Provider ID: 277102
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 530
LA JOLLA, CA 92037-1213
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760) 631-3000
Provider Gender: Male
License number: G42818
NPI: 1497784946
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus, Tri City Medical Ctr, Pomerado Hospital, Scripps Memorial Hospital Encinitas, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

SAHAGIAN, GREGORY A

Provider ID: 276977
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 530
LA JOLLA, CA 92037-1213
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760)
631-3000
Provider Gender: Male
License number: A62263
NPI: 1831132109
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Tri City
Medical Ctr, Scripps Memorial
Hospital Encinitas, Pomerado
Hospital, Palomar Medical
Center, Rady Childrens Hospital
San Diego, Palomar Health
Downtown Campus
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

SCHULTE, JESSICA D

Provider ID: 284819

Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (800) 926-8273
Fax: (858) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A162688
NPI: 1467870576
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsf Medical
Center At Mount Zion, Ucsd La
Jolla John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SHTRAHMAN, MATTHEW

Provider ID: 114340
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858)
657-7000
Provider Gender: Male
License number: A108752
NPI: 1740440460
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

TECOMA, EVELYN S

Provider ID: 65310
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # 2B
LA JOLLA, CA 92037-1300
Phone: (858) 249-2500
Fax:
After Hours Phone: (858)
249-2500
Provider Gender: Female
License number: G58138
NPI: 1174556518
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

TUSZYNSKI, MARK H

Provider ID: 65314
Board Certified Specialty: No
UCSD MEDICAL GROUP

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

9350 CAMPUS POINT DR # 2B
LA JOLLA, CA 92037-1300
Phone: (858) 249-2500
Fax:
After Hours Phone: (858)
249-2500
Provider Gender: Male
License number: G56665
NPI: 1669405007
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

VIIRRE, ERIK S

Provider ID: 65316
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8540
Fax: (858) 657-8549
After Hours Phone: (858)
657-8540
Provider Gender: Male
License number: G82354
NPI: 1093743601
Provider English Spoken: Yes
Provider Language(s) Spoken:
French
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None

American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

WANG, CHUNYANG T

Provider ID: 285922
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9850 GENESEE AVE STE 530
LA JOLLA, CA 92037-1213
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760)
631-3000
Provider Gender: Female
License number: A105660
NPI: 1386890770
Provider English Spoken: Yes
Provider Language(s) Spoken:
Mandarin, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas, Tri
City Medical Ctr, Pomerado
Hospital, Scripps Memorial
Hospital, Palomar Medical
Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

WIEGAND, SARAH E

Provider ID: 284620
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: 20A16503
NPI: 1164818035
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network, Ucsd Medical Group

NUCLEAR MEDICINE

BELEZZUOLI, ERNEST V

Provider ID: 64812
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-3405
Fax:
After Hours Phone: (619)
543-3405
Provider Gender: Male
License number: G74168
NPI: 1083703805
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HOH, CARL K

Provider ID: 64911
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (619) 543-3405
Fax:
After Hours Phone: (619) 543-3405
Provider Gender: Male
License number: G61309
NPI: 1962427682
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

OBSTETRICS / GYNECOLOGY

ALPERIN, MARIANN

Provider ID: 65116
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-8737
Fax:
After Hours Phone: (858) 657-8737
Provider Gender: Female
License number: A102879
NPI: 1033266879

Provider English Spoken: Yes
Provider Language(s) Spoken: Russian
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ALVARADO, JORGE L

Provider ID: 269564
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000

Provider Gender: Male
License number: A139473
NPI: 1538588561
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

AVERBACH, SARAH H

Provider ID: 115249
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (619) 543-6777
Fax: (619) 543-3703
After Hours Phone: (619) 543-6777
Provider Gender: Female
License number: A128990
NPI: 1700012457
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Medical Ctr At Ucsf, Ucsd Medical Ctr, Ucsf Medical Center At Mission Bay, Ucsf Medical Center At Mount Zion
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W

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D. Directorio de proveedores de atención especializada

Hours: M-F 8AM-5PM, SA
9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

BINDER, PRATIBHA S

Provider ID: 121153

Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: A149945

NPI: 1174758031

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

BINDER, PRATIBHA S

Provider ID: 273225

Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

License number: A149945

NPI: 1174758031

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 16/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

BONDRE, IOANA L

Provider ID: 284310

Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: A171540

NPI: 1326579863

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 16/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

BONDRE, IOANA L

Provider ID: 284311

Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: A171540

NPI: 1326579863

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 16/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

CHANG, JEFFREY R

Provider ID: 65140

Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

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D. Directorio de proveedores de atención especializada

Phone: (619) 543-2347

Fax:

After Hours Phone: (619)
543-2347

Provider Gender: Male

License number: G20109

NPI: 1629003389

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

GABBY, LAURYN C

Provider ID: 269691

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: A151539

NPI: 1003330572

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

GUPTA, PRATIMA

Provider ID: 257546

Board Certified Specialty: No

UCSD MEDICAL GROUP

8910 VILLA LA JOLLA DR # 200

LA JOLLA, CA 92037-1701

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: A832373

NPI: 1891749842

Provider English Spoken: Yes

Provider Language(s) Spoken:

Hindi, Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 16/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

HARVEY, SCOTT A

Provider ID: 278916

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 923-8273

Fax: (888) 539-8781

After Hours Phone: (800)
923-8273

Provider Gender: Male

License number: C169168

NPI: 1457662868

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 16/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

HARVEY, SCOTT A

Provider ID: 278918

Board Certified Specialty: No

UCSD MEDICAL GROUP

9444 MEDICAL CENTER DR

LA JOLLA, CA 92037-1337

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: C169168

NPI: 1457662868

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton


Medi-Cal Open Panel: Yes

Min/Max Age: 16/999

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D. Directorio de proveedores de atención especializada


American Sign Language (ASL): No
Accessibility: 
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HEBERT, STEPHEN A

Provider ID: 65187
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-2347
Fax:
After Hours Phone: (619) 543-2347
Provider Gender: Male
License number: G40602
NPI: 1730127069
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:


HOANG, MAI P

Provider ID: 208295
Board Certified Specialty: No
UCSD MEDICAL GROUP
8910 VILLA LA JOLLA DR # 200
LA JOLLA, CA 92037-1701

Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A130031
NPI: 1104143593
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
Accessibility: 
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HOM, MARIANNE S

Provider ID: 242752
Board Certified Specialty: No
UCSD MEDICAL GROUP
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A146335
NPI: 1972047397
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr

Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
Accessibility: 
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HULL, ANDREW D

Provider ID: 65197
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-2347
Fax:
After Hours Phone: (619) 543-2347
Provider Gender: Male
License number: A53578
NPI: 1902862121
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Palomar Medical Center, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

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D. Directorio de proveedores de atención especializada

KELLY, THOMAS F

Provider ID: 65211
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8745
Fax:
After Hours Phone: (858)
657-8745
Provider Gender: Male
License number: G60630
NPI: 1336203496
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Scripps Memorial Hospital,
Scripps Mercy Hospital, Scripps
Mercy Hospital Chula Vista,
Scripps Memorial Hospital
Encinitas, Palomar Medical
Center
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KLEIN, DAVID A

Provider ID: 271558
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273

Provider Gender: Male
License number: A155090
NPI: 1780073635
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KLEIN, DAVID A

Provider ID: 271559
Board Certified Specialty: No
UCSD MEDICAL GROUP
8910 VILLA LA JOLLA DR # 200
LA JOLLA, CA 92037-1701
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A155090
NPI: 1780073635
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LUKACZ, EMILY S

Provider ID: 83716
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8200
Fax:
After Hours Phone: (858)
657-8200
Provider Gender: Female
License number: A63540
NPI: 1750339446
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MACKAY, GILLIAN

Provider ID: 128454
Board Certified Specialty: No
UCSD MEDICAL GROUP
8910 VILLA LA JOLLA DR # 200
LA JOLLA, CA 92037-1701

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A113346
 NPI: 1770702177
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

MACKAY, GILLIAN

Provider ID: 200964
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8910 VILLA LA JOLLA DR # 200
 LA JOLLA, CA 92037-1701
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A113346
 NPI: 1770702177
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 16/999

American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

MEADOWS, AUDRA R

Provider ID: 285739
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: C171680
 NPI: 1467585521
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 16/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

Provider ID: 200964
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8910 VILLA LA JOLLA DR # 200
 LA JOLLA, CA 92037-1701
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A113346
 NPI: 1770702177
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 16/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

MEADOWS, AUDRA R

Provider ID: 285740
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8910 VILLA LA JOLLA DR # 200
 LA JOLLA, CA 92037-1701

Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: C171680
 NPI: 1467585521
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 16/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

MEURICE, MARIELLE ERENDIRA LUCILLE

Provider ID: 284267
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A159003
 NPI: 1720510779
 Provider English Spoken: Yes
 Provider Language(s) Spoken: French
 Cultural Competency: No
 Hospital Affiliation: University Hsp Of San Diego Co, Ucsd La Jolla John Sally Thornton, Ucsd

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D. Directorio de proveedores de atención especializada

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 16/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

MEURICE, MARIELLE

ERENDIRA LUCILLE

Provider ID: 284269

Board Certified Specialty: No

UCSD MEDICAL GROUP

8910 VILLA LA JOLLA DR # 200

LA JOLLA, CA 92037-1701

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: A159003

NPI: 1720510779

Provider English Spoken: Yes

Provider Language(s) Spoken:

French

Cultural Competency: No

Hospital Affiliation: University

Hsp Of San Diego Co, Ucsd La

Jolla John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 16/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

MOORE, THOMAS R

Provider ID: 65259

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 657-8745

Fax:

After Hours Phone: (858)

657-8745

Provider Gender: Male

License number: G49930

NPI: 1184682379

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Scripps Memorial Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

PINSON, KELSEY A

Provider ID: 284285

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: A158192

NPI: 1841722485

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr, University Hsp Of

San Diego Co

Medi-Cal Open Panel: Yes

Min/Max Age: 16/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

PLAXE, STEVEN C

Provider ID: 64465

Board Certified Specialty: No

UCSD MEDICAL GROUP

3855 HEALTH SCIENCES DR

LA JOLLA, CA 92093-1503

Phone: (858) 822-6173

Fax:

After Hours Phone: (858)

822-6173

Provider Gender: Male

License number: G64817

NPI: 1942356795

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

RESNIK, JAMIE L

Provider ID: 271533
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR # LLC
 LA JOLLA, CA 92037-1300
Phone: (858) 657-8745
Fax: (858) 657-8666
After Hours Phone: (858) 657-8745
Provider Gender: Female
License number: A66580
NPI: 1558310557
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

RESNIK, JAMIE L

Provider ID: 271533
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8910 VILLA LA JOLLA DR # 200
 LA JOLLA, CA 92037-1701
Phone: (858) 657-8745
Fax:
After Hours Phone: (858) 657-8745
Provider Gender: Female
License number: A66580
NPI: 1558310557

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

RIES, MAUREEN C

Provider ID: 125252
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8910 VILLA LA JOLLA DR # 200
 LA JOLLA, CA 92037-1701
Phone: (858) 657-8745
Fax:
After Hours Phone: (858) 657-8745
Provider Gender: Female
License number: A127234
NPI: 1750544516
Provider English Spoken: Yes
Provider Language(s) Spoken: Indonesian, Spanish, Swahili
Cultural Competency: No
Hospital Affiliation: University Of California Irvine Med Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA:

RIVAS, RENEE N

Provider ID: 284295
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A173043
NPI: 1295263861
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

RIVAS, RENEE N

Provider ID: 284297
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9444 MEDICAL CENTER DR
 LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Female
License number: A173043
NPI: 1295263861
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SAENZ, CHERYL C

Provider ID: 64472
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
Phone: (858) 822-6173
Fax:
After Hours Phone: (858) 822-6173
Provider Gender: Female
License number: G74647
NPI: 1396818134
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA:
SANDOVAL, SELINA M
Provider ID: 270561
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8910 VILLA LA JOLLA DR # 200
 LA JOLLA, CA 92037-1701
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A167853
NPI: 1336599653
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SANDOVAL, SELINA M
Provider ID: 270562
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female

License number: A167853
NPI: 1336599653
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SPRING ROBINSON, CHANDRA L

Provider ID: 245612
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 9850 GENESEE AVE STE 770
 LA JOLLA, CA 92037-1232
Phone: (858) 677-0777
Fax: (858) 677-0666
After Hours Phone: (858) 677-0777
Provider Gender: Female
License number: 20A17561
NPI: 1659781789
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: No
Min/Max Age: 16/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

SUYAMA, JULIE A

Provider ID: 284289
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A172670
NPI: 1306372800
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SU, HUI CHUN I

Provider ID: 269338
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9350 CAMPUS POINT DR # LLC
LA JOLLA, CA 92037-1300

Phone: (858) 657-8745
Fax: (858) 657-8666
After Hours Phone: (858)
657-8745
Provider Gender: Female
License number: A110340
NPI: 1053466011
Provider English Spoken: Yes
Provider Language(s) Spoken:
Mandarin
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SU, HUI CHUN I

Provider ID: 65306
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-2347
Fax:
After Hours Phone: (619)
543-2347
Provider Gender: Female
License number: A110340
NPI: 1053466011
Provider English Spoken: Yes
Provider Language(s) Spoken:
Mandarin
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None

American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SWENSON, HELEN

Provider ID: 126502
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8745
Fax:
After Hours Phone: (858)
657-8745
Provider Gender: Female
License number: A155774
NPI: 1952721243
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

TARSA, MARYAM

Provider ID: 65308
Board Certified Specialty: No
UCSD OB GYN MED GRP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

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D. Directorio de proveedores de atención especializada

Phone: (858) 657-8745
 Fax:
 After Hours Phone: (858) 657-8745
 Provider Gender: Female
 License number: A69894
 NPI: 1295768638
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Farsi
 Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Palomar Medical Center, Scripps Mercy Hospital, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr, Eisenhower Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

THOMSON, SAMANTHA L
 Provider ID: 285173
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A149038
 NPI: 1689013468
 Provider English Spoken: Yes

Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Cedars Sinai Medical Center, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 16/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

THOMSON, SAMANTHA L
 Provider ID: 285175
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8910 VILLA LA JOLLA DR # 200
 LA JOLLA, CA 92037-1701
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A149038
 NPI: 1689013468
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Cedars Sinai Medical Center, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 16/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:

Medical Group(s):
 IPA: Ucsd Medical Group
TILFORD, SARAH A
 Provider ID: 126505
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8910 VILLA LA JOLLA DR # 200
 LA JOLLA, CA 92037-1701
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A154086
 NPI: 1194139766
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

TOLOUBEYDOKHTI, TANNAZ
 Provider ID: 98884
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-8745
 Fax:
 After Hours Phone: (858) 657-8745
 Provider Gender: Female
 License number: A134477

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1477846095
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

WEBER, AKILAH F

Provider ID: 84962
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax: (858) 657-8666
After Hours Phone: (858) 657-7000
Provider Gender: Female
License number: C56035
NPI: 1760652713
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

WOELKERS, DOUGLAS A

Provider ID: 65326
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8745
Fax:
After Hours Phone: (858) 657-8745
Provider Gender: Male
License number: G77134
NPI: 1013965748
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Palomar Medical Center, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

ZHOU, BETH B

Provider ID: 240066
Board Certified Specialty: No

UCSD MEDICAL GROUP
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A162098
NPI: 1558748186
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

ONCOLOGY MEDICAL

BANERJEE, PUSHPENDU

Provider ID: 54041
Board Certified Specialty: No
CALIFORNIA CANCER ASSOCS FOR RESEARCH AND EXCELL
9850 GENESEE AVE STE 560
LA JOLLA, CA 92037-1229
Phone: (858) 552-1410
Fax: (858) 552-0929
After Hours Phone: (858) 552-1410
Provider Gender: Male
License number: A69490
NPI: 1164497855
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken: Hindi
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Rady Childrens Hospital San Diego, Scripps Green Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 16/120
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

BOLES, SARAH G

Provider ID: 64411
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6100
Fax: (858) 822-6196
After Hours Phone: (858) 822-6100
Provider Gender: Female
License number: A82562
NPI: 1245391242
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA:
FLORES, EDNA I
Provider ID: 273538
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 560
LA JOLLA, CA 92037-1229
Phone: (858) 552-1410
Fax: (858) 552-0929
After Hours Phone: (858) 552-1410
Provider Gender: Female
License number: A114373
NPI: 1396994604
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Pioneers Memorial Hospital, Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

Website:
Email:
Medical Group(s):
IPA:

Website:
Email:
Medical Group(s):
IPA:

HOWELL, STEPHEN B

Provider ID: 64435
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR

LA JOLLA, CA 92093-1503
Phone: (858) 822-6173
Fax:
After Hours Phone: (858) 822-6173
Provider Gender: Male
License number: G25869
NPI: 1114942802
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MCHALE, MICHAEL T

Provider ID: 64450
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6173
Fax:
After Hours Phone: (858) 822-6173
Provider Gender: Male
License number: G83172
NPI: 1508828179
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

REID, TONY R

Provider ID: 64469

Board Certified Specialty: No

UCSD MEDICAL GROUP

3855 HEALTH SCIENCES DR

LA JOLLA, CA 92093-1503

Phone: (858) 822-6173

Fax:

After Hours Phone: (858)

822-6173

Provider Gender: Male

License number: G76747

NPI: 1346323904

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

REID, TONY R

Provider ID: 64469

Board Certified Specialty: No

UC SAN DIEGO CANCER CTR

3855 HEALTH SCIENCES DR

LA JOLLA, CA 92093-1503

Phone: (858) 822-6100

Fax:

After Hours Phone: (858)

822-6100

Provider Gender: Male

License number: G76747

NPI: 1346323904

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

REID, TONY R

Provider ID: 64469

Board Certified Specialty: No

UCSD MEDICAL GROUP

3855 HEALTH SCIENCES DR

LA JOLLA, CA 92093-1503

Phone: (858) 822-6100

Fax:

After Hours Phone: (858)

822-6100

Provider Gender: Male

License number: G76747

NPI: 1346323904

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

REID, TONY R

Provider ID: 64469

Board Certified Specialty: No

UC SAN DIEGO CANCER CTR

3855 HEALTH SCIENCES DR

LA JOLLA, CA 92093-1503

Phone: (858) 822-6173

Fax:

After Hours Phone: (858)

822-6173

Provider Gender: Male

License number: G76747

NPI: 1346323904

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

SINCLAIR, JAMES M , MD

Provider ID: 257002

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

9850 GENESEE AVE STE 560

LA JOLLA, CA 92037-1229

Phone: (858) 552-1410

Fax: (858) 552-0929

After Hours Phone: (858)

552-1410

Provider Gender: Male

License number: G48926

NPI: 1356300230

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

SINCLAIR, JAMES M

Provider ID: 54027

Board Certified Specialty: No

CALIFORNIA CANCER ASSOCS FOR RESEARCH AND EXCELL

9850 GENESEE AVE STE 560 LA JOLLA, CA 92037-1229

Phone: (858) 552-1410

Fax:

After Hours Phone: (858) 552-1410

Provider Gender: Male

License number: G48926

NPI: 1356300230

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

OPHTHALMOLOGY

AFSHARI, NATALIE A

Provider ID: 65332

Board Certified Specialty: No

UCSD MEDICAL GROUP 9415 CAMPUS POINT DR LA JOLLA, CA 92093-1350

Phone: (858) 534-6290

Fax:

After Hours Phone: (858) 534-6290

Provider Gender: Female

License number: C51849

NPI: 1538126735

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL): No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

ALBORZIAN, SHERVIN

Provider ID: 77720

Board Certified Specialty: No

HEALTH EXCEL IPA INC 9834 GENESEE AVE STE 209 LA JOLLA, CA 92037-1225

Phone: (858) 457-2220

Fax: (858) 457-2318

After Hours Phone: (858) 457-2220

Provider Gender: Male

License number: A107093

NPI: 1588825129

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi, Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Memorial Hospital, Sharp Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

AVALLONE, THOMAS J

Provider ID: 275499

Board Certified Specialty: No

HEALTH EXCEL IPA INC 9850 GENESEE AVE STE 310 LA JOLLA, CA 92037-1208

Phone: (800) 898-2020

Fax: (844) 897-3788

After Hours Phone: (800) 898-2020

Provider Gender: Male

License number: A147199

NPI: 1679865950

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ronald Reagan Ucla Med Ctr, Santa Monica Ucla Med Ctr

Medi-Cal Open Panel: Yes

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D. Directorio de proveedores de atención especializada

Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

BAXTER, SALLY L

Provider ID: 272787
Board Certified Specialty: No
UCSD MEDICAL GROUP
9415 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A140952
NPI: 1912325184
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BEAZER, ALEX P

Provider ID: 272802
Board Certified Specialty: No
UCSD MEDICAL GROUP
9415 CAMPUS POINT DR

LA JOLLA, CA 92093-1350
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A169030
NPI: 1942662168
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BINDER, NICHOLAS R , MD

Provider ID: 268757
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037-1208
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800)
898-2020
Provider Gender: Male
License number: A124698
NPI: 1306076716
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Grossmont
Hospital
Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

BINDER, NICHOLAS R

Provider ID: 285925
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037-1208
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800)
898-2020
Provider Gender: Male
License number: A124698
NPI: 1306076716
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Grossmont
Hospital
Medi-Cal Open Panel: No
Min/Max Age: 5/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

BOKOSKY, JOHN E

Provider ID: 84265
Board Certified Specialty: No
EYE CARE OF SAN DIEGO
MED OFFICE
9834 GENESEE AVE STE 428
LA JOLLA, CA 92037-1264
Phone: (800) 765-2737
Fax:
After Hours Phone: (800)
765-2737
Provider Gender: Male
License number: G51651
NPI: 1245215748
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Scripps
Mercy Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

BROWN, STUART I

Provider ID: 65335
Board Certified Specialty: Yes
UCSD MEDICAL GROUP
9415 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (858) 534-6290
Fax: (858) 534-1342
After Hours Phone: (858)
534-6290
Provider Gender: Male
License number: C40767

NPI: 1356376347

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BRUMMEL, KIRSTA L

Provider ID: 240634
Board Certified Specialty: No
UCSD MEDICAL GROUP
9415 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: 20A11590
NPI: 1003085481
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ronald
Reagan UCLA Med Ctr, Santa
Monica UCLA Med Ctr, Ucsd La
Jolla John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:

Email:

Medical Group(s):
IPA: Ucsd Medical Group

CAMP, ANDREW S

Provider ID: 111066
Board Certified Specialty: No
UCSD MEDICAL GROUP
9415 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (858) 534-6290
Fax:
After Hours Phone: (858)
534-6290
Provider Gender: Male
License number: A142062
NPI: 1326300377
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton, Rady Childrens
Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

CHANG, TOM S , MD

Provider ID: 270366
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037-1208

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (800) 898-2020
 Fax: (844) 897-3788
 After Hours Phone: (800) 898-2020
 Provider Gender: Male
 License number: A69909
 NPI: 1609848969
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Arabic, Armenian, Cantonese, Chinese, Croatian, Korean, Mandarin, Spanish
 Cultural Competency: No
 Hospital Affiliation: San Gabriel Valley Med Ctr, Providence Little Co Of Mary Med Ctr Torrance, Methodist Hosp Of Southern California, Hollywood Presbyterian Med Ctr, Desert Regional Med Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility: Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc

CHAO, DANIEL L
 Provider ID: 112325
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9415 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
 Phone: (858) 534-6290
 Fax:
 After Hours Phone: (858) 534-6290
 Provider Gender: Male
 License number: A130361
 NPI: 1891011953

Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Medical Ctr At Ucsf
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

CHOPLIN, NEIL T
 Provider ID: 84263
 Board Certified Specialty: No
 EYE CARE OF SAN DIEGO
 MED OFFICE
 9834 GENESEE AVE STE 428
 LA JOLLA, CA 92037-1264
 Phone: (800) 765-2737
 Fax:
 After Hours Phone: (800) 765-2737
 Provider Gender: Male
 License number: G57042
 NPI: 1144205642
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Sharp Memorial Hospital, Scripps Mercy Hospital
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):

IPA:
CODEN, DANIEL J
 Provider ID: 204681
 Board Certified Specialty: Yes
 HEALTH EXCEL IPA INC
 9850 GENESEE AVE STE 310
 LA JOLLA, CA 92037-1208
 Phone: (800) 898-2020
 Fax: (844) 897-3788
 After Hours Phone: (800) 898-2020
 Provider Gender: Male
 License number: G57587
 NPI: 1942317508
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility: Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc

CODEN, DANIEL J , MD
 Provider ID: 269295
 Board Certified Specialty: Yes
 COMMUNITY CARE IPA LLC
 9850 GENESEE AVE STE 310
 LA JOLLA, CA 92037-1208
 Phone: (800) 898-2020
 Fax: (844) 897-3788
 After Hours Phone: (800) 898-2020
 Provider Gender: Male
 License number: G57587
 NPI: 1942317508

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

CULOTTA, ANTHONY J

Provider ID: 268888
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9834 GENESEE AVE
LA JOLLA, CA 92037-1223
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800) 898-2020
Provider Gender: Male
License number: A97142
NPI: 1497790018
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: East Los Angeles Doctors Hsp
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

ECHEGOYEN, JULIO C , MD

Provider ID: 257136
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9415 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (858) 534-6290
Fax:
After Hours Phone: (858) 534-6290
Provider Gender: Male
License number: A121431
NPI: 1770801540
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Paradise Valley Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

FERREYRA, HENRY A

Provider ID: 65341
Board Certified Specialty: No
UCSD MEDICAL GROUP
9415 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (858) 534-6290
Fax:
After Hours Phone: (858) 534-6290

Provider Gender: Male
License number: A77921
NPI: 1669497822
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Doctors Medical Center, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FREEMAN, WILLIAM

Provider ID: 65342
Board Certified Specialty: Yes
UCSD MEDICAL GROUP
9415 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (858) 534-6290
Fax:
After Hours Phone: (858) 534-6290
Provider Gender: Male
License number: G51579
NPI: 1518983352
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p><i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p> <p>GARFF, KEVIN <i>Provider ID:</i> 239604 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9415 CAMPUS POINT DR LA JOLLA, CA 92093-1350 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Male <i>License number:</i> A160988 <i>NPI:</i> 1609258920 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Health Excel Ipa Inc, Ucsd Medical Group</p> <p>GARFF, KEVIN <i>Provider ID:</i> 239605 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300</p>	<p><i>Phone:</i> (800) 926-8273 <i>Fax:</i> <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Male <i>License number:</i> A160988 <i>NPI:</i> 1609258920 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Health Excel Ipa Inc, Ucsd Medical Group</p> <p>GOLDBAUM, MICHAEL H <i>Provider ID:</i> 65343 <i>Board Certified Specialty:</i> Yes UCSD MEDICAL GROUP 9415 CAMPUS POINT DR LA JOLLA, CA 92093-1350 <i>Phone:</i> (858) 534-6290 <i>Fax:</i> <i>After Hours Phone:</i> (858) 534-6290 <i>Provider Gender:</i> Male <i>License number:</i> C32010 <i>NPI:</i> 1720157142 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton</p>	<p><i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p> <p>GOLLOGLY, HEIDRUN E , MD <i>Provider ID:</i> 269128 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 9850 GENESEE AVE STE 310 LA JOLLA, CA 92037-1208 <i>Phone:</i> (800) 898-2020 <i>Fax:</i> (844) 897-3788 <i>After Hours Phone:</i> (800) 898-2020 <i>Provider Gender:</i> Female <i>License number:</i> A134761 <i>NPI:</i> 1477879823 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> French, German, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital Chula Vista, Adventist Health And Rideout, Grossmont Hospital, Desert Regional Med Ctr, Paradise Valley Hospital, Scripps Mercy Hospital, Sharp Memorial Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc,</p>
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D. Directorio de proveedores de atención especializada

Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

GOLLOGLY, HEIDRUN E

Provider ID: 275454
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037-1208
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800)
898-2020
Provider Gender: Female
License number: A134761
NPI: 1477879823
Provider English Spoken: Yes
Provider Language(s) Spoken:
French, German, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital Chula Vista, Adventist
Health And Rideout, Grossmont
Hospital, Desert Regional Med
Ctr, Paradise Valley Hospital,
Scripps Mercy Hospital, Sharp
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

GRANET, DAVID B

Provider ID: 65344
Board Certified Specialty: No

UCSD MEDICAL GROUP
9415 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (858) 534-6290
Fax:
After Hours Phone: (858)
534-6290
Provider Gender: Male
License number: G77597
NPI: 1982629036
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HAW, WELDON W

Provider ID: 65345
Board Certified Specialty: No
UCSD MEDICAL GROUP
9415 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (858) 534-6290
Fax: (858) 822-1849
After Hours Phone: (858)
534-6290
Provider Gender: Male
License number: A60743
NPI: 1710945357
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HEICHEL, CHRISTOPHER W

Provider ID: 65346
Board Certified Specialty: Yes
UCSD MEDICAL GROUP
9415 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (858) 534-6290
Fax: (858) 822-4846
After Hours Phone: (858)
534-6290
Provider Gender: Male
License number: A75001
NPI: 1083667307
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HO, JOSEPH

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider ID: 101278
Board Certified Specialty: No
UCSD MEDICAL GROUP
9415 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (858) 534-6290
Fax:
After Hours Phone: (858)
534-6290
Provider Gender: Male
License number: A137389
NPI: 1962766451
Provider English Spoken: Yes
Provider Language(s) Spoken:
Chinese, Mandarin
Cultural Competency: No
Hospital Affiliation: Temecula
Valley Hospital Inc, Southwest
Healthcare System Murrieta,
Scripps Memorial Hospital,
Desert Regional Med Ctr,
Grossmont Hospital, Ucsd
Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

HUDSON, HENRY L
Provider ID: 279227
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037-1208
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800)
898-2020
Provider Gender: Male

License number: G76091
NPI: 1851349195
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Tri City
Medical Ctr, Rady Childrens
Hospital San Diego, Scripps
Mercy Hospital, Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

KIKKAWA, DON O
Provider ID: 65349
Board Certified Specialty: No
UCSD MEDICAL GROUP
9415 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (858) 534-6290
Fax: (858) 534-7859
After Hours Phone: (858)
534-6290
Provider Gender: Male
License number: G65447
NPI: 1932202371
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):

No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KORN, BOBBY S
Provider ID: 65350
Board Certified Specialty: No
UCSD MEDICAL GROUP
9415 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (858) 534-6290
Fax:
After Hours Phone: (858)
534-6290
Provider Gender: Male
License number: A81749
NPI: 1174551006
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LEE, JEFFREY E
Provider ID: 65352
Board Certified Specialty: No
UCSD MEDICAL GROUP
9415 CAMPUS POINT DR
LA JOLLA, CA 92093-1350

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 534-6290
Fax: (858) 822-1849
After Hours Phone: (858) 534-6290
Provider Gender: Male
License number: A97291
NPI: 1801943279
Provider English Spoken: Yes
Provider Language(s) Spoken: Yue Chinese
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LIU, XIONGFEI

Provider ID: 239816
Board Certified Specialty: No
UCSD MEDICAL GROUP
9415 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A144438
NPI: 1497135156
Provider English Spoken: Yes
Provider Language(s) Spoken: Chinese, Mandarin
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr, Mercy General Hospital

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LI, ALEXANDRIA L

Provider ID: 272832
Board Certified Specialty: No
UCSD MEDICAL GROUP
9415 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A168107
NPI: 1841652864

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MCGRAW, JOSEPH P , MD

Provider ID: 269707
Board Certified Specialty: No
COMMUNITY CARE IPA LLC

9850 GENESEE AVE STE 310
LA JOLLA, CA 92037-1208
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800) 898-2020
Provider Gender: Male
License number: A155228
NPI: 1588624852
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

MCGRAW, JOSEPH P

Provider ID: 285866
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9834 GENESEE AVE STE 428
LA JOLLA, CA 92037-1264
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800) 898-2020
Provider Gender: Male
License number: A155228
NPI: 1588624852
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc

MORRISON-REYES, JOSHUA A , MD

Provider ID: 269183
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 9850 GENESEE AVE STE 310
 LA JOLLA, CA 92037-1208
Phone: (858) 457-3010
Fax: (858) 457-0028
After Hours Phone: (858) 457-3010
Provider Gender: Male
License number: A125435
NPI: 1235366782
Provider English Spoken: Yes
Provider Language(s) Spoken: Armenian, Cantonese, Chinese, Indonesian, Mandarin, Spanish, Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Memorial Hospital, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial

Health Holdings Medical Group-Sd
MORRISON-REYES, JOSHUA A
Provider ID: 275517
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 9850 GENESEE AVE STE 310
 LA JOLLA, CA 92037-1208
Phone: (858) 457-3010
Fax: (858) 457-0028
After Hours Phone: (858) 457-3010
Provider Gender: Male
License number: A125435
NPI: 1235366782
Provider English Spoken: Yes
Provider Language(s) Spoken: Armenian, Cantonese, Chinese, Indonesian, Mandarin, Spanish, Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Memorial Hospital, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

MOVAGHAR, MANSOOR

Provider ID: 215055
Board Certified Specialty: No
 UCSD MEDICAL GROUP

9415 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A100897
NPI: 1497792220
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Rady Childrens Health Network, Ucsd Medical Group

NGUYEN, THAO P

Provider ID: 65355
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9415 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
Phone: (858) 534-6290
Fax: (858) 278-5393
After Hours Phone: (858) 534-6290
Provider Gender: Female
License number: G81689
NPI: 1154352185
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA:</p>	<p><i>Provider ID:</i> 241983 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9415 CAMPUS POINT DR LA JOLLA, CA 92093-1350 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Male <i>License number:</i> A161485 <i>NPI:</i> 1073992731 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc</p>	<p>Spanish, Tagalog <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr, Scripps Memorial Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc</p>
<p>NUDLEMAN, ERIC D <i>Provider ID:</i> 110388 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9415 CAMPUS POINT DR LA JOLLA, CA 92093-1350 <i>Phone:</i> (858) 534-6290 <i>Fax:</i> (858) 822-1849 <i>After Hours Phone:</i> (858) 534-6290 <i>Provider Gender:</i> Male <i>License number:</i> A131592 <i>NPI:</i> 1154582575 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr, Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Rady Childrens Health Network</p>	<p>PERRY, ARTHUR C <i>Provider ID:</i> 66369 <i>Board Certified Specialty:</i> Yes HEALTH EXCEL IPA INC 9850 GENESEE AVE STE 310 LA JOLLA, CA 92037-1208 <i>Phone:</i> (858) 457-3010 <i>Fax:</i> (858) 457-0028 <i>After Hours Phone:</i> (858) 457-3010 <i>Provider Gender:</i> Male <i>License number:</i> C37934 <i>NPI:</i> 1194832725 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Tagalog <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr, Scripps Memorial Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i></p>	<p>PERRY, ARTHUR C , MD <i>Provider ID:</i> 265703 <i>Board Certified Specialty:</i> Yes COMMUNITY CARE IPA LLC 9850 GENESEE AVE STE 310 LA JOLLA, CA 92037-1208 <i>Phone:</i> (858) 457-3010 <i>Fax:</i> (858) 457-0028 <i>After Hours Phone:</i> (858) 457-3010 <i>Provider Gender:</i> Male <i>License number:</i> C37934 <i>NPI:</i> 1194832725 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i></p>
<p>OZZELLO, DANIEL J</p>		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

PRATT, STEVEN G , MD

Provider ID: 269324
Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037-1208
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (866)
333-7922
Provider Gender: Male
License number: G32379
NPI: 1407963044
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

PRATT, STEVEN G

Provider ID: 54350
Board Certified Specialty: Yes
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037-1208

Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (866)
333-7922
Provider Gender: Male
License number: G32379
NPI: 1407963044
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

ROBBINS, SHIRA L

Provider ID: 65359
Board Certified Specialty: No
UCSD MEDICAL GROUP
9415 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (858) 534-6290
Fax:
After Hours Phone: (858)
534-6290
Provider Gender: Female
License number: A78486
NPI: 1508814914
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SAMUEL, MICHAEL A , MD

Provider ID: 268596
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037-1208
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800)
898-2020
Provider Gender: Male
License number: A83237
NPI: 1730175670
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Huntington
Memorial Hospital, Desert
Regional Med Ctr, Eisenhower
Medical Ctr, Pioneers Memorial
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

SAVINO, PETER J

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider ID: 65361
Board Certified Specialty: Yes
UCSD MEDICAL GROUP
9415 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (858) 534-6290
Fax:
After Hours Phone: (858)
534-6290
Provider Gender: Male
License number: A29965
NPI: 1467451898
Provider English Spoken: Yes
Provider Language(s) Spoken:
Italian
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SCHONBACH, ETIENNE M
Provider ID: 284432
Board Certified Specialty: No
UCSD MEDICAL GROUP
9415 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A172673
NPI: 1073040580
Provider English Spoken: Yes
Provider Language(s) Spoken:
German

Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SLIGHT, JOHN R
Provider ID: 65363
Board Certified Specialty: Yes
UCSD MEDICAL GROUP
9415 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (858) 534-6290
Fax: (858) 822-1849
After Hours Phone: (858)
534-6290
Provider Gender: Male
License number: C25107
NPI: 1306971239
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SONG, DELU
Provider ID: 284425
Board Certified Specialty: No

UCSD MEDICAL GROUP
9415 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A173049
NPI: 1437689536
Provider English Spoken: Yes
Provider Language(s) Spoken:
Chinese, Mandarin
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

TOPILOW, NICOLE
Provider ID: 284348
Board Certified Specialty: No
UCSD MEDICAL GROUP
9415 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A171573
NPI: 1215468376
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

VASILE, CRISTIANA G

Provider ID: 115739

Board Certified Specialty: No

UCSD MEDICAL GROUP

9415 CAMPUS POINT DR

LA JOLLA, CA 92093-1350

Phone: (858) 534-6290

Fax: (858) 534-1625

After Hours Phone: (858)

534-6290

Provider Gender: Female

License number: A122457

NPI: 1891002044

Provider English Spoken: Yes

Provider Language(s) Spoken:

Romanian

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton, Scripps Mercy

Hospital, Scripps Mercy Hospital

Chula Vista

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

WEINREB, ROBERT N

Provider ID: 65366

Board Certified Specialty: Yes

UCSD MEDICAL GROUP

9415 CAMPUS POINT DR

LA JOLLA, CA 92093-1350

Phone: (858) 534-6290

Fax:

After Hours Phone: (858)

534-6290

Provider Gender: Male

License number: G33398

NPI: 1093764177

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

WELSBIE, DEREK S

Provider ID: 112328

Board Certified Specialty: No

UCSD MEDICAL GROUP

9415 CAMPUS POINT DR

LA JOLLA, CA 92093-1350

Phone: (858) 534-6290

Fax:

After Hours Phone: (858)

534-6290

Provider Gender: Male

License number: C143481

NPI: 1588869945

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

WESTEREN, ALAN C

Provider ID: 26857

Board Certified Specialty: No

ALAN C WESTEREN MD INC

6529 LA JOLLA BLVD

LA JOLLA, CA 92037-6016

Phone: (858) 454-1942

Fax:

After Hours Phone: (858)

454-1942

Provider Gender: Male

License number: G79738

NPI: 1962513135

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Scripps

Mercy Hospital, Scripps Mercy

Hospital Chula Vista

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-F 9AM-5PM, SA

9AM-5PM

Website:

www.expertvisioncare.com

Email:

Medical Group(s):

IPA:

WU, CHRIS Y

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider ID: 239582
Board Certified Specialty: No
UCSD MEDICAL GROUP
9415 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A161633
NPI: 1265829345
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

OSTEOPATHIC MANIPULATIVE THERAPY

PORTERA, ARIEL M
Provider ID: 273320
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: 20A16832
NPI: 1841721784

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

OTOLARYNGOLOGY

BRUMUND, KEVIN T
Provider ID: 65134
Board Certified Specialty: No
UCSD OTOLARYNGOLOGY
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8591
Fax:
After Hours Phone: (858)
657-8591
Provider Gender: Male
License number: A91099
NPI: 1033193669
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA:
CALZADA, AUDREY P , MD
Provider ID: 269278
Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC
9834 GENESEE AVE STE 111
LA JOLLA, CA 92037-1214
Phone: (858) 909-0770
Fax: (858) 909-0880
After Hours Phone: (858)
909-0770
Provider Gender: Female
License number: A107965
NPI: 1619113230
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Rady
Childrens Hospital San Diego,
Scripps Memorial Hospital,
Scripps Memorial Hospital
Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

CHANG, ANGELA A
Provider ID: 258951
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9834 GENESEE AVE STE 112
LA JOLLA, CA 92037-1214

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 208-0030
Fax: (858) 216-1990
After Hours Phone: (858) 208-0030
Provider Gender: Female
License number: A100380
NPI: 1730382318
Provider English Spoken: Yes
Provider Language(s) Spoken: Chinese
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Sharp Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

CHANG, ANGELA A

Provider ID: 269308
Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC
9834 GENESEE AVE STE 111
LA JOLLA, CA 92037-1214
Phone: (858) 909-0770
Fax: (858) 909-0880
After Hours Phone: (858) 909-0770
Provider Gender: Female
License number: A100380
NPI: 1730382318
Provider English Spoken: Yes
Provider Language(s) Spoken: Chinese

Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

DECONDE, ADAM S

Provider ID: 97546
Board Certified Specialty: No
UCSD OTOLARYNGOLOGY
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 657-8590
Fax: (858) 657-8682
After Hours Phone: (858) 657-8590
Provider Gender: Male
License number: A110107
NPI: 1588988919
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA:

DECONDE, ADAM S

Provider ID: 97547
Board Certified Specialty: Yes
UCSD OTOLARYNGOLOGY
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8590
Fax: (858) 657-8682
After Hours Phone: (858) 657-8590
Provider Gender: Male
License number: A110107
NPI: 1588988919
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GREENE, JACQUELINE J

Provider ID: 272958
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR # LLA
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A161242
NPI: 1144583931

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D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MAHDAVI, MAHMOOD

Provider ID: 65727
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 710
LA JOLLA, CA 92037-1218
Phone: (858) 458-9955
Fax: (858) 452-7848
After Hours Phone: (858)
458-9955
Provider Gender: Male
License number: C39780
NPI: 1033140934
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

WATSON, DEBORAH
Provider ID: 65322
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-2347
Fax:
After Hours Phone: (619)
543-2347
Provider Gender: Female
License number: G79374
NPI: 1346270816
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Green Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

WEISMAN, ROBERT A
Provider ID: 64491
Board Certified Specialty: No
UCSD OTOLARYNGOLOGY
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 657-8590
Fax:
After Hours Phone: (858)
657-8590
Provider Gender: Male
License number: G28603
NPI: 1346293958
Provider English Spoken: Yes
Provider Language(s) Spoken:

French, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

WEISMAN, ROBERT A

Provider ID: 65323
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-2347
Fax:
After Hours Phone: (619)
543-2347
Provider Gender: Male
License number: G28603
NPI: 1346293958
Provider English Spoken: Yes
Provider Language(s) Spoken:
French, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

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D. Directorio de proveedores de atención especializada

<p><i>IPA:</i></p> <p>WEISSBROD, PHILIP A <i>Provider ID:</i> 64492 <i>Board Certified Specialty:</i> No UCSD OTOLARYNGOLOGY 3855 HEALTH SCIENCES DR LA JOLLA, CA 92093-1503 <i>Phone:</i> (858) 657-8590 <i>Fax:</i> <i>After Hours Phone:</i> (858) 657-8590 <i>Provider Gender:</i> Male <i>License number:</i> A118221 <i>NPI:</i> 1366590853 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Scripps Green Hospital Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ <i>Accessibility:</i> Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:</p> <p>WEISSBROD, PHILIP A <i>Provider ID:</i> 65324 <i>Board Certified Specialty:</i> No UCSD OTOLARYNGOLOGY 9350 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (858) 657-8590 <i>Fax:</i> <i>After Hours Phone:</i> (858) 657-8590 <i>Provider Gender:</i> Male <i>License number:</i> A118221 <i>NPI:</i> 1366590853 <i>Provider English Spoken:</i> Yes</p>	<p><i>Provider Language(s) Spoken:</i> Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Scripps Green Hospital Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ <i>Accessibility:</i> Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:</p> <p>WOO, LINDA N <i>Provider ID:</i> 213453 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 9834 GENESEE AVE STE 101 LA JOLLA, CA 92037-1214 <i>Phone:</i> (858) 430-8455 <i>Fax:</i> (619) 934-3268 <i>After Hours Phone:</i> (858) 430-8455 <i>Provider Gender:</i> Female <i>License number:</i> A121814 <i>NPI:</i> 1467720656 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Vietnamese Cultural Competency: No Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ <i>Accessibility:</i> Hours: M-SA 9AM-5PM Website: Email:</p>	<p><i>Medical Group(s):</i> IPA: Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p> <p>YAN, CAROL H <i>Provider ID:</i> 242138 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9350 CAMPUS POINT DR # LLA LA JOLLA, CA 92037-1300 <i>Phone:</i> (858) 657-8590 <i>Fax:</i> <i>After Hours Phone:</i> (858) 657-8590 <i>Provider Gender:</i> Female <i>License number:</i> A149042 <i>NPI:</i> 1619237260 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Chinese Cultural Competency: No Hospital Affiliation: Stanford Health Care, Lucile Salter Packard Childrens Hosp, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ <i>Accessibility:</i> Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group</p> <hr/> <p style="text-align: center;">PATHOLOGY ANATOMIC</p> <hr/> <p>DATNOW, BRIAN <i>Provider ID:</i> 275738 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9444 MEDICAL CENTER DR</p>
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D. Directorio de proveedores de atención especializada

LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A31095
NPI: 1609832633
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

FADARE, OLUWOLE

Provider ID: 275706
Board Certified Specialty: No
UCSD MEDICAL GROUP
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: C131462
NPI: 1619955804
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally

Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

FERGUSON, COLE J

Provider ID: 274458
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (629) 543-2827
Fax: (888) 539-8781
After Hours Phone: (629) 543-2827
Provider Gender: Male
License number: A170171
NPI: 1134550643
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

FERGUSON, COLE J

Provider ID: 275700
Board Certified Specialty: No

UCSD MEDICAL GROUP
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A170171
NPI: 1134550643
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HANSEN, LAWRENCE A

Provider ID: 275768
Board Certified Specialty: No
UCSD MEDICAL GROUP
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: G62538
NPI: 1760407498
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally

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D. Directorio de proveedores de atención especializada

<p>Thornton <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group</p>	<p>UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female <i>License number:</i> C146702 <i>NPI:</i> 1730389362 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Gujarati, Hindi <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group</p>	<p>Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group</p>
<p>PARAST, MANA M <i>Provider ID:</i> 275889 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9444 MEDICAL CENTER DR LA JOLLA, CA 92037-1337 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female <i>License number:</i> A102496 <i>NPI:</i> 1629163100 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group</p>	<p>POWELL, HENRY C <i>Provider ID:</i> 275779 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9444 MEDICAL CENTER DR LA JOLLA, CA 92037-1337 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Male <i>License number:</i> A25597 <i>NPI:</i> 1295778348 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical</p>	<p>VALASEK, MARK A <i>Provider ID:</i> 275837 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9444 MEDICAL CENTER DR LA JOLLA, CA 92037-1337 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Male <i>License number:</i> A127165 <i>NPI:</i> 1588808448 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group</p>
<p>PATEL, CHARM I <i>Provider ID:</i> 259112 <i>Board Certified Specialty:</i> No</p>	<p><i>Hospital Affiliation:</i> Ucsd Medical</p>	<p>WONG, RICHARD L <i>Provider ID:</i> 275815</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
UCSD MEDICAL GROUP
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A136239
NPI: 1275084295
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

PATHOLOGY CLINICAL

KELNER, MICHAEL J
Provider ID: 275735
Board Certified Specialty: No
UCSD MEDICAL GROUP
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: G48254
NPI: 1174679849
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr, El Centro Regional
Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LE DZUNG, THE
Provider ID: 275733
Board Certified Specialty: No
UCSD MEDICAL GROUP
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: G71291
NPI: 1770526931
Provider English Spoken: Yes
Provider Language(s) Spoken:
Vietnamese
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Ucsd Medical Group

PEDIATRIC RADIOLOGY

PUGMIRE, BRIAN S
Provider ID: 285402
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A138998
NPI: 1609190578
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Valley
Childrens Hospital, Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

PEDIATRICS

BAI-TONG, SHIYU S
Provider ID: 283287
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 249-5800

Fax:

After Hours Phone: (858)
249-5800

Provider Gender: Female

License number: A155419

NPI: 1528454188

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

FERNANDEZ, ERIKA F

Provider ID: 117520

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED
FNDTN

9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

Phone: (858) 249-5800

Fax:

After Hours Phone: (858)
249-5800

Provider Gender: Female

License number: C131691

NPI: 1881609337

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Rady Childrens Hospital San

Diego, Marian Regional Medical

Center

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

GOLEMBESKI, DAVID J

Provider ID: 117315

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED
FNDTN

9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

Phone: (858) 249-5800

Fax:

After Hours Phone: (858)
249-5800

Provider Gender: Male

License number: G63111

NPI: 1376614131

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego,

Scripps Memorial Hospital
Encinitas, Pomerado Hospital,

Southwest Healthcare System
Wildomar, Southwest Healthcare

System Murrieta, Palomar
Medical Center, Scripps

Memorial Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

GREENBERG, MARK

Provider ID: 64888

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

Phone: (619) 543-5720

Fax:

After Hours Phone: (619)
543-5720

Provider Gender: Male

License number: G63733

NPI: 1710906375

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla
John Sally Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

JONES, MARILYN C

Provider ID: 65203

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 543-2347
Fax:
After Hours Phone: (619) 543-2347
Provider Gender: Female
License number: G30850
NPI: 1295806040
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network, Ucsd Medical Group

JONES, MARILYN C

Provider ID: 83641
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: G30850
NPI: 1295806040
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Ucsd La Jolla

John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network, Ucsd Medical Group

LONGHURST, CHRISTOPHER A

Provider ID: 269432
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Male
License number: A80051
NPI: 1639238462
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

RAMOS, CARLOS G

Provider ID: 117366

Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNFTN
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 249-5800
Fax:
After Hours Phone: (858) 249-5800
Provider Gender: Male
License number: A91944
NPI: 1205047545
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, El Centro Regional Medical Center, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Rady Childrens Hospital San Diego, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SAJTI, ENIKO C

Provider ID: 117480
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNFTN
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 249-5800
 Fax:
 After Hours Phone: (858) 249-5800
 Provider Gender: Female
 License number: A115973
 NPI: 1649433103
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Childrens Hosp And Resrch Ctr At Oakland, Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

STRAIT, MARIE I

Provider ID: 273472
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 249-5800
 Fax:
 After Hours Phone: (858) 249-5800
 Provider Gender: Female
 License number: C167351
 NPI: 1669633012
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes

Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

PHYSICAL MEDICINE / REHABILITATION

CHEN, JEFFREY L

Provider ID: 124633
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9400 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
 Phone: (858) 657-6035
 Fax:
 After Hours Phone: (858) 657-6035
 Provider Gender: Male
 License number: A102762
 NPI: 1811183700
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Pomerado Hospital, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

CHEN, JEFFREY L

Provider ID: 65143
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (619) 543-6886
 Fax:
 After Hours Phone: (619) 543-6886
 Provider Gender: Male
 License number: A102762
 NPI: 1811183700
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Pomerado Hospital, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

KASENDORF, ROGER A

Provider ID: 209021
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 9834 GENESEE AVE STE 221
 LA JOLLA, CA 92037-1215
 Phone: (858) 558-1275
 Fax: (858) 244-0152
 After Hours Phone: (858) 558-1275
 Provider Gender: Male
 License number: 20A12928
 NPI: 1356371884
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

LE, JOAN T

Provider ID: 243379
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9400 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A99391
NPI: 1447460050
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Doctors Hospital Of Riverside Llc, Childrens Hosp And Resrch Ctr At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health

Network, Ucsd Medical Group

PHYSICIANS ASSISTANT

AINSWORTH, DELISSA M
Provider ID: 243366
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8910 VILLA LA JOLLA DR # 100
 LA JOLLA, CA 92037-1701
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: PA53570
NPI: 1750734893
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

ALBRIGHT, KELSEY A

Provider ID: 284764
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300

Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: PA57996
NPI: 1235653148
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

ARMEEN, GARY P

Provider ID: 247036
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: PA21505
NPI: 1760774863
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

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D. Directorio de proveedores de atención especializada

American Sign Language (ASL): No
Accessibility: ☯
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BABIS, CARLY R

Provider ID: 238477
Board Certified Specialty: Yes
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 320
LA JOLLA, CA 92037-1208
Phone: (858) 554-1212
Fax: (858) 795-1195
After Hours Phone: (858) 554-1212
Provider Gender: Female
License number: PA54747
NPI: 1679090625
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: ☯
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

BLASIC, VANESSA A

Provider ID: 265285
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 440
LA JOLLA, CA 92037-1212

Phone: (858) 453-5944
Fax: (858) 429-7925
After Hours Phone: (858) 453-5944
Provider Gender: Female
License number: PA54781
NPI: 1306363700
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Keck Hospital Of Usc, Usc Kenneth Norris Jr Cancer Hospital, Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/199
American Sign Language (ASL): No
Accessibility: ☯
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

BOYD, LISA N

Provider ID: 217650
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: PA20326
NPI: 1871859421
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: ☯
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BRANGOCCIO, KELSEY R

Provider ID: 257327
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 320
LA JOLLA, CA 92037-1208
Phone: (858) 554-1212
Fax: (858) 554-1222
After Hours Phone: (858) 554-1212
Provider Gender: Female
License number: PA55679
NPI: 1396255477
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/99
American Sign Language (ASL): No
Accessibility: ☯
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

BRUECKNER, TAMMIE N

Provider ID: 255557
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

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D. Directorio de proveedores de atención especializada

Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: PA57558
 NPI: 1407212376
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

BURNEY, MELISSA A
 Provider ID: 285890
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 9850 GENESEE AVE STE 530
 LA JOLLA, CA 92037-1213
 Phone: (760) 631-3000
 Fax: (760) 631-3016
 After Hours Phone: (760) 631-3000
 Provider Gender: Female
 License number: PA58612
 NPI: 1386260842
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Tri City Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL):

No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

BUSCHING, MICHELLE M
 Provider ID: 124951
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-7000
 Fax:
 After Hours Phone: (858) 657-7000
 Provider Gender: Female
 License number: PA54908
 NPI: 1720598808
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

CANDARE, VANESSA J
 Provider ID: 276340
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 9850 GENESEE AVE STE 320
 LA JOLLA, CA 92037-1208

Phone: (858) 554-1212
 Fax: (858) 554-1222
 After Hours Phone: (858) 554-1212
 Provider Gender: Female
 License number: PA56927
 NPI: 1134680564
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Health Excel Ipa Inc

CASO, STEPHEN C
 Provider ID: 213576
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 9850 GENESEE AVE STE 320
 LA JOLLA, CA 92037-1208
 Phone: (858) 554-1212
 Fax: (858) 554-1222
 After Hours Phone: (858) 554-1212
 Provider Gender: Male
 License number: PA21365
 NPI: 1083916985
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:

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D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

CHERRY, REENA W

Provider ID: 243349
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: PA57026
NPI: 1689729683
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CHERRY, REENA W

Provider ID: 269494
Board Certified Specialty: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093-1350

Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: PA57026
NPI: 1689729683
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CRIFE, TAYLOR M

Provider ID: 210983
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: PA56367
NPI: 1659827087
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

DANESHVAR, ABRAHAM D

Provider ID: 103064
Board Certified Specialty: Yes
BALBOA NEPHROLOGY MED
GRP INC
9834 GENESEE AVE STE 312
LA JOLLA, CA 92037-1221
Phone: (858) 558-8150
Fax: (858) 346-1024
After Hours Phone: (858)
558-8150
Provider Gender: Male
License number: PA52905
NPI: 1245359140
Provider English Spoken: Yes
Provider Language(s) Spoken:
Turkish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

DANESHVAR, ABRAHAM D

Provider ID: 103064
Board Certified Specialty: No

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D. Directorio de proveedores de atención especializada

BALBOA NEPHROLOGY MED
GRP INC
9834 GENESEE AVE STE 312
LA JOLLA, CA 92037-1221
Phone: (858) 499-1900

Fax:

After Hours Phone: (858)
499-1900

Provider Gender: Male

License number: PA52905

NPI: 1245359140

Provider English Spoken: Yes

Provider Language(s) Spoken:

Turkish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc, Imperial

Health Holdings Medical

Group-Sd

DANESHVAR, ABRAHAM D

Provider ID: 214616

Board Certified Specialty: Yes

HEALTH EXCEL IPA INC

9834 GENESEE AVE STE 312

LA JOLLA, CA 92037-1221

Phone: (858) 558-8150

Fax: (858) 346-1024

After Hours Phone: (858)

558-8150

Provider Gender: Male

License number: PA52905

NPI: 1245359140

Provider English Spoken: Yes

Provider Language(s) Spoken:

Turkish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 18/120

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc, Imperial

Health Holdings Medical

Group-Sd

DEMASCO, MICHAEL A

Provider ID: 278969

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: PA56677

NPI: 1467926295

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

DEMOOR, PATRICIA A

Provider ID: 212879

Board Certified Specialty: No

UCSD MEDICAL GROUP

9400 CAMPUS POINT DR

LA JOLLA, CA 92093-1350

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: PA17504

NPI: 1477721702

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

DENEVAN, ANDREW J

Provider ID: 83353

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 657-8200

Fax: (858) 657-8235

After Hours Phone: (858)

657-8200

Provider Gender: Male

License number: PA23100

NPI: 1811324726

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

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D. Directorio de proveedores de atención especializada

Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

DOUGHERTY, CLARA

Provider ID: 265348
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 400
LA JOLLA, CA 92037-1212
Phone: (858) 453-5944
Fax: (858) 429-7925
After Hours Phone: (858)
453-5944
Provider Gender: Female
License number: PA17439
NPI: 1609987619
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/100
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

DOUGHERTY, CLARA, NPA

Provider ID: 269170
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9850 GENESEE AVE STE 440
LA JOLLA, CA 92037-1212
Phone: (858) 453-9944
Fax: (858) 429-7925
After Hours Phone: (858)
453-9944
Provider Gender: Female
License number: PA17439
NPI: 1609987619
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish

Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

DOUGHERTY, CLARA

Provider ID: 56019
Board Certified Specialty: No
GENESIS HEALTHCARE
PARTNERS PC
9850 GENESEE AVE STE 440
LA JOLLA, CA 92037-1212
Phone: (858) 453-5944
Fax:
After Hours Phone: (858)
453-5944
Provider Gender: Female
License number: PA17439
NPI: 1609987619
Provider English Spoken: Yes
Provider Language(s) Spoken:

Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

ENCE, EMILY C

Provider ID: 213609
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 320
LA JOLLA, CA 92037-1208
Phone: (858) 554-1212
Fax: (858) 554-1222
After Hours Phone: (858)
554-1212
Provider Gender: Female
License number: PA52084
NPI: 1063784478
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

FLORENCE, BRYNA E

Provider ID: 283571

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
HEALTH EXCEL IPA INC
 9850 GENESEE AVE STE 320
 LA JOLLA, CA 92037-1208
Phone: (858) 554-1212
Fax: (858) 795-1195
After Hours Phone: (858) 554-1212
Provider Gender: Female
License number: PA20232
NPI: 1245471853
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

FROST, ROBERT D

Provider ID: 116252
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9434 MEDICAL CENTER DR FL 1
 LA JOLLA, CA 92037-1337
Phone: (858) 657-7777
Fax:
After Hours Phone: (858) 657-7777
Provider Gender: Male
License number: PA15578
NPI: 1114044633
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps

Memorial Hospital, Scripps
 Memorial Hospital Encinitas,
 Scripps Green Hospital, Scripps
 Mercy Hospital, Ucsd Medical
 Ctr, University Of California Irvine
 Med Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GAIDADJIEV, TEODORA

Provider ID: 245349
Board Certified Specialty: No
UCSD MEDICAL GROUP
 8910 VILLA LA JOLLA DR # 100
 LA JOLLA, CA 92037-1701
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: PA53021
NPI: 1235502162
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Ucsd Medical Group

GUAY, MARY

Provider ID: 211971
Board Certified Specialty: No
UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: PA56513
NPI: 1790769008
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HALTER, KENNETH N

Provider ID: 102098
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR # 2C
 LA JOLLA, CA 92037-1300
Phone: (858) 657-6035
Fax:
After Hours Phone: (858) 657-6035
Provider Gender: Male
License number: PA22613

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D. Directorio de proveedores de atención especializada

NPI: 1053745059

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

HARRIS, CHRISTINA V

Provider ID: 104661

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 657-8200

Fax: (858) 657-8235

After Hours Phone: (858)

657-8200

Provider Gender: Female

License number: PA51525

NPI: 1720053846

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

HASEGAWA, CHRIS

Provider ID: 247205

Board Certified Specialty: No

UCSD MEDICAL GROUP

8939 VILLA LA JOLLA DR STE
110

LA JOLLA, CA 92037-1732

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: PA56884

NPI: 1225698962

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

HOFFMAN, JULIE A

Provider ID: 252896

Board Certified Specialty: No

HEALTH EXCEL IPA INC

9850 GENESEE AVE STE 320

LA JOLLA, CA 92037-1208

Phone: (858) 554-1212

Fax: (858) 795-1195

After Hours Phone: (858)

554-1212

Provider Gender: Female

License number: PA55348

NPI: 1538534805

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital

Medi-Cal Open Panel: No

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

HUNTER, JACOB A

Provider ID: 279334

Board Certified Specialty: No

UCSD MEDICAL GROUP

8910 VILLA LA JOLLA DR # 100

LA JOLLA, CA 92037-1701

Phone: (800) 826-8273

Fax: (888) 539-8781

After Hours Phone: (800)

826-8273

Provider Gender: Male

License number: PA54452

NPI: 1114459765

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

LA COSTA, RACHEL

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider ID: 256848
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: PA57139
NPI: 1831514322
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LIN, JESSICA C

Provider ID: 110357
Board Certified Specialty: No
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR FL
1
LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: PA23003
NPI: 1437598695
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LIN, JOYCE

Provider ID: 265146
Board Certified Specialty: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (800) 888-9268
Fax: (888) 539-8781
After Hours Phone: (800)
888-9268
Provider Gender: Female
License number: PA57821
NPI: 1427681022
Provider English Spoken: Yes
Provider Language(s) Spoken:
Taiwanese
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LIN, JOYCE

Provider ID: 265147

Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 554-1212
Fax: (858) 554-1222
After Hours Phone: (858)
554-1212
Provider Gender: Female
License number: PA57821
NPI: 1427681022
Provider English Spoken: Yes
Provider Language(s) Spoken:
Taiwanese
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LUONG, TRAN H

Provider ID: 279014
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: PA54061
NPI: 1821532292
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Vietnamese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LUONG, TRAN H

Provider ID: 279015
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: PA54061
NPI: 1821532292
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Vietnamese
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MCADAMS, JOSEPH

Provider ID: 280612
Board Certified Specialty: No

UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: PA58420
NPI: 1104371251
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MCCAIN, JULIA A

Provider ID: 103168
Board Certified Specialty: No
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR FL
1
LA JOLLA, CA 92037-1337
Phone: (858) 657-8530
Fax:
After Hours Phone: (858)
657-8530
Provider Gender: Female
License number: PA52127
NPI: 1679805022
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MERRILL, COREY M

Provider ID: 258039
Board Certified Specialty: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: PA56995
NPI: 1386032308
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

OKADA, MICHELLE R

Provider ID: 278016
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: PA58603
 NPI: 1497129860
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Japanese
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

OKADA, MICHELLE R

Provider ID: 278017
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: PA58603
 NPI: 1497129860
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Japanese
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton

Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

OROSCO, HEATHER R

Provider ID: 99616
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
 Phone: (858) 822-6100
 Fax:
 After Hours Phone: (858) 822-6100
 Provider Gender: Female
 License number: PA23124
 NPI: 1215139373
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

PERREAULT, MARK R

Provider ID: 283583
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300

Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: PA57736
 NPI: 1356749451
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

PERREAULT, MARK R

Provider ID: 283584
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9400 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: PA57736
 NPI: 1356749451
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM

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D. Directorio de proveedores de atención especializada

Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

RAI, PHILIPPA

Provider ID: 257296
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 320
LA JOLLA, CA 92037-1208
Phone: (858) 554-1212
Fax:
After Hours Phone: (858)
554-1212
Provider Gender: Female
License number: PA56698
NPI: 1174083836

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

SACKNOFF, STEFANIE S

Provider ID: 242084
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female

License number: PA51280
NPI: 1720418833
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Ucsd Medical Group

SALES, JONATHAN D

Provider ID: 265304
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 210
LA JOLLA, CA 92037-1206
Phone: (858) 535-1075
Fax: (858) 453-9810
After Hours Phone: (858)
535-1075
Provider Gender: Male
License number: PA19298
NPI: 1922291244

Provider English Spoken: Yes
Provider Language(s) Spoken:
Korean, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 8/120
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Health Excel Ipa Inc

SANCHEZ, MICHAEL R

Provider ID: 206907
Board Certified Specialty: No
UCSD MEDICAL GROUP
8939 VILLA LA JOLLA DR STE
110
LA JOLLA, CA 92037-1732
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273

Provider Gender: Male
License number: PA55472
NPI: 1184135006
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SCHWARTZEL, KEVIN N

Provider ID: 214276
Board Certified Specialty: No
UCSD MEDICAL GROUP
8910 VILLA LA JOLLA DR # 100
LA JOLLA, CA 92037-1701
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: PA53888
NPI: 1104277847

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D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SHAUL, SHERA M

Provider ID: 247975
Board Certified Specialty: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: PA56786
NPI: 1336659507
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SHAUL, SHERA M

Provider ID: 247976

Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8373
Fax:
After Hours Phone: (800)
926-8373
Provider Gender: Female
License number: PA56786
NPI: 1336659507
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SNOWDEN, KELLY A

Provider ID: 238531
Board Certified Specialty: No
HEALTH EXCEL IPA INC
7855 IVANHOE AVE STE 110
LA JOLLA, CA 92037-4507
Phone: (858) 554-1212
Fax: (858) 795-1195
After Hours Phone: (858)
554-1212
Provider Gender: Female
License number: PA55980
NPI: 1770065252
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital
Medi-Cal Open Panel: No

Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

SNOWDEN, KELLY A

Provider ID: 238532
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 320
LA JOLLA, CA 92037-1208
Phone: (858) 554-1212
Fax: (858) 795-1195
After Hours Phone: (858)
554-1212
Provider Gender: Female
License number: PA55980
NPI: 1770065252
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

STALLINGS, ANDREA M

Provider ID: 101020
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 543-2347

Fax:

After Hours Phone: (619)
543-2347

Provider Gender: Female

License number: PA16540

NPI: 1972595478

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

SUTTON, BRIAN C

Provider ID: 90352

Board Certified Specialty: No

UCSD MEDICAL GROUP

3855 HEALTH SCIENCES DR

LA JOLLA, CA 92093-1503

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: PA18573

NPI: 1629174727

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-F 8AM-5PM, SA
9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

TESFAI, HELEN S

Provider ID: 277072

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: PA54848

NPI: 1942724042

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

TOLEDO, SILVA P

Provider ID: 115851

Board Certified Specialty: No

UCSD MEDICAL GROUP

3855 HEALTH SCIENCES DR

LA JOLLA, CA 92093-1503

Phone: (858) 822-3115

Fax: (858) 822-6186

After Hours Phone: (858)
822-3115

Provider Gender: Female

License number: PA15199

NPI: 1063464022

Provider English Spoken: Yes

Provider Language(s) Spoken:

Tagalog

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-F 8AM-5PM, SA
9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

TORNG, SHERRY S

Provider ID: 109646

Board Certified Specialty: No

UCSD MEDICAL GROUP

3855 HEALTH SCIENCES DR

LA JOLLA, CA 92093-1503

Phone: (858) 822-6100

Fax:

After Hours Phone: (858)

822-6100

Provider Gender: Female

License number: PA52556

NPI: 1427439652

Provider English Spoken: Yes

Provider Language(s) Spoken:

Mandarin, Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

No
♿ *Accessibility:*
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

TRAUTMAN, AMY L

Provider ID: 104653
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8200
Fax: (858) 657-8235
After Hours Phone: (858)
657-8200
Provider Gender: Female
License number: PA51673
NPI: 1235412503

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

UPTON, JACQUELINE M

Provider ID: 84939
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

Phone: (858) 657-8200
Fax: (858) 657-8235
After Hours Phone: (858)
657-8200
Provider Gender: Female
License number: PA21933
NPI: 1295704328
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

WEIR, JACQUELINE R

Provider ID: 278202
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (800) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: PA21646
NPI: 1932494499
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):

No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

WRITER, NICOLE R

Provider ID: 275956
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 320
LA JOLLA, CA 92037-1208
Phone: (858) 554-1212
Fax: (858) 795-1195
After Hours Phone: (858)
554-1212
Provider Gender: Female
License number: PA58322
NPI: 1295073815

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

ZANZUCCHI, AUDREY E

Provider ID: 253254
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 543-5540
Fax:
After Hours Phone: (619) 543-5540
Provider Gender: Female
License number: PA54479
NPI: 1265960256
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

ZANZUCCHI, AUDREY E
Provider ID: 253255
Board Certified Specialty: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (858) 657-7876
Fax:
After Hours Phone: (858) 657-7876
Provider Gender: Female
License number: PA54479
NPI: 1265960256
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

PULMONARY DISEASES

AFSHAR, KAMYAR
Provider ID: 102310
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 471-9186
Fax: (619) 543-8255
After Hours Phone: (619) 471-9186
Provider Gender: Male
License number: 20A8875
NPI: 1407050669
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

AKUTHOTA, PRAVEEN
Provider ID: 102056
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

Phone: (619) 471-9186
Fax: (619) 543-8255
After Hours Phone: (619) 471-9186
Provider Gender: Male
License number: C137976
NPI: 1396704698
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CONRAD, DOUGLAS J
Provider ID: 65150
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # 2B
LA JOLLA, CA 92037-1300
Phone: (858) 249-2500
Fax:
After Hours Phone: (858) 249-2500
Provider Gender: Male
License number: G63104
NPI: 1780605378
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>No ☯ <i>Accessibility</i>: P, EB, IB, E, R, T <i>Hours</i>: M-SA 9AM-5PM <i>Website</i>: <i>Email</i>: <i>Medical Group(s)</i>: <i>IPA</i>:</p>	<p><i>Phone</i>: (858) 625-7200 <i>Fax</i>: (858) 625-8363 <i>After Hours Phone</i>: (858) 625-7200 <i>Provider Gender</i>: Female <i>License number</i>: A83370 <i>NPI</i>: 1598777336 <i>Provider English Spoken</i>: Yes <i>Provider Language(s) Spoken</i>: Tagalog <i>Cultural Competency</i>: No <i>Hospital Affiliation</i>: Scripps Memorial Hospital <i>Medi-Cal Open Panel</i>: Yes <i>Min/Max Age</i>: 0/999 <i>American Sign Language (ASL)</i>: No ☯ <i>Accessibility</i>: <i>Hours</i>: M-SA 9AM-5PM <i>Website</i>: <i>Email</i>: <i>Medical Group(s)</i>: <i>IPA</i>: Health Excel Ipa Inc</p>	<p><i>Min/Max Age</i>: None <i>American Sign Language (ASL)</i>: No ☯ <i>Accessibility</i>: W <i>Hours</i>: M-SA 9AM-5PM <i>Website</i>: <i>Email</i>: <i>Medical Group(s)</i>: <i>IPA</i>:</p>
<p>CORATE, LALAINE M <i>Provider ID</i>: 204495 <i>Board Certified Specialty</i>: No HEALTH EXCEL IPA INC 9850 GENESEE AVE STE 780 LA JOLLA, CA 92037-1232 <i>Phone</i>: (858) 625-7200 <i>Fax</i>: (858) 625-8363 <i>After Hours Phone</i>: (858) 625-7200 <i>Provider Gender</i>: Female <i>License number</i>: A83370 <i>NPI</i>: 1598777336 <i>Provider English Spoken</i>: Yes <i>Provider Language(s) Spoken</i>: Tagalog <i>Cultural Competency</i>: No <i>Hospital Affiliation</i>: Scripps Memorial Hospital <i>Medi-Cal Open Panel</i>: Yes <i>Min/Max Age</i>: 0/999 <i>American Sign Language (ASL)</i>: No ☯ <i>Accessibility</i>: <i>Hours</i>: M-SA 9AM-5PM <i>Website</i>: <i>Email</i>: <i>Medical Group(s)</i>: <i>IPA</i>: Health Excel Ipa Inc</p>	<p>CROUCH, DANIEL R <i>Provider ID</i>: 110338 <i>Board Certified Specialty</i>: No UCSD MEDICAL GROUP 9350 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone</i>: (858) 657-7105 <i>Fax</i>: (858) 657-7107 <i>After Hours Phone</i>: (858) 657-7105 <i>Provider Gender</i>: Male <i>License number</i>: A116727 <i>NPI</i>: 1710182423 <i>Provider English Spoken</i>: Yes <i>Provider Language(s) Spoken</i>: <i>Cultural Competency</i>: No <i>Hospital Affiliation</i>: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Temecula Valley Hospital Inc <i>Medi-Cal Open Panel</i>: No</p>	<p>ELMARAACHLI, WAEL <i>Provider ID</i>: 83403 <i>Board Certified Specialty</i>: No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone</i>: (858) 657-7000 <i>Fax</i>: (858) 657-7107 <i>After Hours Phone</i>: (858) 657-7000 <i>Provider Gender</i>: Male <i>License number</i>: A106280 <i>NPI</i>: 1366468969 <i>Provider English Spoken</i>: Yes <i>Provider Language(s) Spoken</i>: Arabic, Spanish <i>Cultural Competency</i>: No <i>Hospital Affiliation</i>: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel</i>: No <i>Min/Max Age</i>: None <i>American Sign Language (ASL)</i>: No ☯ <i>Accessibility</i>: W <i>Hours</i>: M-F 8AM-5PM, SA 9AM-5PM <i>Website</i>: <i>Email</i>: <i>Medical Group(s)</i>: <i>IPA</i>:</p>
<p>CORATE, LALAINE M <i>Provider ID</i>: 257256 <i>Board Certified Specialty</i>: No HEALTH EXCEL IPA INC 9850 GENESEE AVE STE 370 LA JOLLA, CA 92037-1212</p>	<p>ELMARAACHLI, WAEL <i>Provider ID</i>: 83404 <i>Board Certified Specialty</i>: No</p>	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR FL
1
LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax: (858) 657-7107
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A106280
NPI: 1366468969
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ELMARAACHLI, WAEL
Provider ID: 83407
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # C
LA JOLLA, CA 92037-1300
Phone: (619) 543-2347
Fax:
After Hours Phone: (619)
543-2347
Provider Gender: Male
License number: A106280
NPI: 1366468969
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Spanish

Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FERNANDES, TIMOTHY M
Provider ID: 83427
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax: (858) 657-7107
After Hours Phone: (858)
657-7000
Provider Gender: Male
License number: A112514
NPI: 1669680757
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FERNANDES, TIMOTHY M
Provider ID: 83428
Board Certified Specialty: No
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR FL
1
LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax: (858) 657-7107
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A112514
NPI: 1669680757
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FE, ALEXANDER Z
Provider ID: 284410
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 370
LA JOLLA, CA 92037-1212
Phone: (858) 625-7200
Fax: (858) 625-8363
After Hours Phone: (858)
625-7200
Provider Gender: Male
License number: A172925
NPI: 1659785962

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

FRICKS, CARL E

Provider ID: 265329
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 370
LA JOLLA, CA 92037-1212
Phone: (858) 625-7200
Fax:
After Hours Phone: (858)
625-7200
Provider Gender: Male
License number: G69384
NPI: 1295823680
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

GLICKMAN, SAMUEL R
Provider ID: 265324
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 370
LA JOLLA, CA 92037-1212
Phone: (858) 625-7200
Fax: (858) 625-8363
After Hours Phone: (858)
625-7200
Provider Gender: Male
License number: A158303
NPI: 1912149790
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

IBRAHIM, ISLAM M

Provider ID: 64920
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7125
Fax:
After Hours Phone: (858)
657-7125
Provider Gender: Male
License number: C54272
NPI: 1962586917
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Long Beach Memorial Med
Ctr, Temecula Valley Hospital Inc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

JOSHUA, JISHA K

Provider ID: 238060
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A144956
NPI: 1023436417
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi, Malayalam
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

IPA: Ucsd Medical Group

KERR, KIM M

Provider ID: 63756

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 657-7140

Fax: (858) 657-7107

After Hours Phone: (858)

657-7140

Provider Gender: Female

License number: G68491

NPI: 1982647392

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

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

9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

KIM, HYONG S

Provider ID: 65213

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR # 1D

LA JOLLA, CA 92037-1300

Phone: (858) 657-7100

Fax: (858) 657-7107

After Hours Phone: (858)

657-7100

Provider Gender: Male

License number: A65876

NPI: 1598780066

Provider English Spoken: Yes

Provider Language(s) Spoken:

Korean

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

LIANG, NI CHENG

Provider ID: 83702

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (619) 543-6886

Fax:

After Hours Phone: (619)

543-6886

Provider Gender: Female

License number: A98510

NPI: 1760666945

Provider English Spoken: Yes

Provider Language(s) Spoken:

Mandarin, Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Scripps Memorial Hospital

Encinitas

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

LI, JINGHONG

Provider ID: 83696

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 657-7125

Fax: (858) 657-7107

After Hours Phone: (858)

657-7125

Provider Gender: Female

License number: A107000

NPI: 1619014479

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

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

9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

LI, JINGHONG

Provider ID: 83697

Board Certified Specialty: No

UCSD MEDICAL GROUP

9434 MEDICAL CENTER DR FL

1

LA JOLLA, CA 92037-1337

Phone: (858) 657-7125

Fax: (858) 657-7107

After Hours Phone: (858)

657-7125

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: A107000
NPI: 1619014479
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MAGANA, MARISA M

Provider ID: 65243
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858)
657-7000
Provider Gender: Female
License number: A94464
NPI: 1194856286
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Scripps
Memorial Hospital Encinitas,
Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W

Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

MALHOTRA, ATUL

Provider ID: 83979
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-6485
Fax: (858) 657-7107
After Hours Phone: (858)
657-6485
Provider Gender: Male
License number: C55949
NPI: 1982695169
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MCCAUL, DAVID S

Provider ID: 257379
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 370
LA JOLLA, CA 92037-1212

Phone: (858) 625-7200
Fax: (858) 625-8363
After Hours Phone: (858)
625-7200
Provider Gender: Male
License number: A43857
NPI: 1902917784
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

OWENS, ROBERT L

Provider ID: 110222
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7105
Fax: (858) 657-7107
After Hours Phone: (858)
657-7105
Provider Gender: Male
License number: C131174
NPI: 1972589265
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>	<p>9434 MEDICAL CENTER DR FL 1 LA JOLLA, CA 92037-1337 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (619) 543-7352 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Male <i>License number:</i> A101188 <i>NPI:</i> 1326168600 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> French, Greek <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No</p>	<p><i>Hospital Affiliation:</i> Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>
<p>PAPAMATHEAKIS, DEMOSTHENES G <i>Provider ID:</i> 65272 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9350 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (619) 543-6886 <i>Fax:</i> (619) 543-7352 <i>After Hours Phone:</i> (619) 543-6886 <i>Provider Gender:</i> Male <i>License number:</i> A101188 <i>NPI:</i> 1326168600 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> French, Greek <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No</p>	<p>♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>	<p>POCH, DAVID S <i>Provider ID:</i> 65277 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9350 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (858) 657-8440 <i>Fax:</i> (858) 657-8723 <i>After Hours Phone:</i> (858) 657-8440 <i>Provider Gender:</i> Male <i>License number:</i> A107956 <i>NPI:</i> 1598955668 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No</p>
<p>♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>	<p>POCH, DAVID S <i>Provider ID:</i> 65014 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (619) 543-6303 <i>Fax:</i> (858) 657-7107 <i>After Hours Phone:</i> (619) 543-6303 <i>Provider Gender:</i> Male <i>License number:</i> A107956 <i>NPI:</i> 1598955668 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No</p>	<p>♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>
<p>PAPAMATHEAKIS, DEMOSTHENES G <i>Provider ID:</i> 65375 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP</p>	<p>SUNWOO, BERNIE Y <i>Provider ID:</i> 118883</p>	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 471-9186

Fax:

After Hours Phone: (619)
471-9186

Provider Gender: Female

License number: A138242

NPI: 1336294107

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Medical Ctr At

Ucsf, Ucsf Medical Center At

Mission Bay, Ucsf Medical

Center At Mount Zion, Ucsd

Medical Ctr, Ucsd La Jolla John

Sally Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-F 8AM-5PM, SA
9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

License number: A126549

NPI: 1790049591

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Ucsd Medical Group

MACEWAN, IAIN J

Provider ID: 205873

Board Certified Specialty: No

UCSD MEDICAL GROUP

3855 HEALTH SCIENCES DR

LA JOLLA, CA 92093-1503

Phone: (858) 822-4048

Fax:

After Hours Phone: (858)

822-4048

Provider Gender: Male

License number: A129079

NPI: 1326300401

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Ucsd Medical Ctr, Ucsd La Jolla

John Sally Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Rady Childrens Health Network,

Ucsd Medical Group

MACEWAN, IAIN J

Provider ID: 205874

Board Certified Specialty: No

UCSD MEDICAL GROUP

3800-3899 HEALTH SCIENCES

DR

LA JOLLA, CA 92093-1503

Phone: (858) 822-4048

Fax:

After Hours Phone: (858)

822-4048

Provider Gender: Male

License number: A129079

NPI: 1326300401

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Ucsd Medical Ctr, Ucsd La Jolla

John Sally Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Rady Childrens Health Network,

Ucsd Medical Group

MACEWAN, IAIN J , MD

Provider ID: 255729

Board Certified Specialty: No

RADIATION ONCOLOGY

BRUGGEMAN, ANDREW R

Provider ID: 243627

Board Certified Specialty: No

UCSD MEDICAL GROUP

3855 HEALTH SCIENCES DR

LA JOLLA, CA 92093-1503

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Ucsd Medical Ctr, Ucsd La Jolla

John Sally Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

COMMUNITY CARE IPA LLC
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-4048
Fax:
After Hours Phone: (858)
822-4048
Provider Gender: Male
License number: A129079
NPI: 1326300401
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr, Ucsd La Jolla
John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Rady Childrens Health Network,
Ucsd Medical Group

MAYADEV, JYOTI S , MD
Provider ID: 269884
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (916) 734-8269
Fax: (858) 822-6080
After Hours Phone: (916)
734-8269
Provider Gender: Female
License number: A109372
NPI: 1902906902
Provider English Spoken: Yes
Provider Language(s) Spoken:

Spanish
Cultural Competency: No
Hospital Affiliation: Uc Davis
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

MELL, LOREN K , MD
Provider ID: 269944
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (619) 543-3405
Fax:
After Hours Phone: (619)
543-3405
Provider Gender: Male
License number: A104704
NPI: 1316119704
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,

Imperial Health Holdings Medical
Group-Sd

MURPHY, KEVIN T , MD
Provider ID: 269865
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6046
Fax:
After Hours Phone: (858)
822-6046
Provider Gender: Male
License number: A82350
NPI: 1730104167
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Palomar
Medical Center, Sharp Memorial
Hospital, Ucsd Medical Ctr,
Palomar Health Downtown
Campus, Rady Childrens
Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

ROSE, BRENT S , MD
Provider ID: 269874
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 341-3899

Fax:

After Hours Phone: (619)
341-3899

Provider Gender: Male

License number: A142735

NPI: 1518250869

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

SANGHVI, PARAG R , MD

Provider ID: 270038

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503

Phone: (619) 230-0400

Fax:

After Hours Phone: (619)
230-0400

Provider Gender: Male

License number: A105184

NPI: 1801005152

Provider English Spoken: Yes

Provider Language(s) Spoken:

Gujarati, Hindi, Spanish

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Ucsd Medical Ctr, Childrens
Hosp And Resrch Ctr At
Oakland, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd, Rady Childrens
Health Network

SANGHVI, PARAG R

Provider ID: 64475

Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503

Phone: (858) 822-6100

Fax: (760) 738-7576

After Hours Phone: (858)
822-6100

Provider Gender: Male

License number: A105184

NPI: 1801005152

Provider English Spoken: Yes

Provider Language(s) Spoken:

Gujarati, Hindi, Spanish

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr, Childrens
Hosp And Resrch Ctr At
Oakland, Scripps Mercy Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd, Rady Childrens
Health Network

SHARABI, ANDREW B , MD

Provider ID: 269862

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503

Phone: (619) 543-1899

Fax:

After Hours Phone: (619)
543-1899

Provider Gender: Male

License number: A136977

NPI: 1043531213

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

SIMPSON, DANIEL R , MD

Provider ID: 269852

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6040
Fax: (858) 822-6080
After Hours Phone: (858) 822-6040
Provider Gender: Male
License number: A118377
NPI: 1689974883
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

WOEL, ROSEMONDE F

Provider ID: 252807
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: C129799
NPI: 1538159694
Provider English Spoken: Yes
Provider Language(s) Spoken:
French, Spanish
Cultural Competency: No

Hospital Affiliation: El Centro Regional Medical Center, Pioneers Memorial Hospital, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc, Ucsd Medical Group

RADIOLOGY DIAGNOSTIC X-RAY

ALLEN, DERRICK R

Provider ID: 125990
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
4150 REGENTS PARK ROW STE 195
LA JOLLA, CA 92037-9139
Phone: (858) 622-6464
Fax: (858) 622-6460
After Hours Phone: (858) 622-6464
Provider Gender: Male
License number: A69840
NPI: 1215982970
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

ALLEN, DERRICK R , MD

Provider ID: 268361
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4150 REGENTS PARK ROW STE 195
LA JOLLA, CA 92037-9139
Phone: (858) 622-6464
Fax: (866) 558-4329
After Hours Phone: (858) 622-6464
Provider Gender: Male
License number: A69840
NPI: 1215982970
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

ANDERSON, GREGORY S

Provider ID: 125984
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
4150 REGENTS PARK ROW STE 195

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

LA JOLLA, CA 92037-9139
 Phone: (858) 622-6464
 Fax:
 After Hours Phone: (858) 622-6464
 Provider Gender: Male
 License number: A90018
 NPI: 1841467099
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessability: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

ARYAFAR, HAMED

Provider ID: 64801
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-7000
 Fax:
 After Hours Phone: (858) 657-7000
 Provider Gender: Male
 License number: A99187
 NPI: 1093963605
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Farsi
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Sharp Memorial Hospital,

Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessability: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

BAHADOR, FARSHAD M

Provider ID: 104325
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-7000
 Fax:
 After Hours Phone: (858) 657-7000
 Provider Gender: Male
 License number: A129414
 NPI: 1730316928
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Scripps Green Hospital, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessability: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM

Website:
 Email:
 Medical Group(s):
 IPA:
BAKER, LORI L
 Provider ID: 125993
 Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 4150 REGENTS PARK ROW STE 195
 LA JOLLA, CA 92037-9139
 Phone: (858) 622-6464
 Fax: (858) 622-6460
 After Hours Phone: (858) 622-6464
 Provider Gender: Female
 License number: G62517
 NPI: 1063465219
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital, Medical Ctr At Ucsf, Scripps Mercy Hospital Chula Vista
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessability: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

BERGMAN, ERIK W

Provider ID: 125003
 Board Certified Specialty: No
 UCSD RADIOLOGY AT LA JOLLA
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 657-6641

Fax:

After Hours Phone: (858)
657-6641

Provider Gender: Male

License number: C153284

NPI: 1043291073

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

BORSO, MAYA G

Provider ID: 126006

Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC

4150 REGENTS PARK ROW
STE 195

LA JOLLA, CA 92037-9139

Phone: (858) 622-6464

Fax: (858) 622-6460

After Hours Phone: (858)

622-6464

Provider Gender: Female

License number: A97134

NPI: 1548473507

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Green Hospital, Scripps Mercy

Hospital, Scripps Mercy Hospital

Chula Vista, Ucsd Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

BRADLEY, WILLIAM R

Provider ID: 271434

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A167142

NPI: 1780066803

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr, Scripps Green

Hospital, Scripps Mercy Hospital,

Scripps Memorial Hospital,

Scripps Mercy Hospital Chula

Vista, Scripps Memorial Hospital

Encinitas

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

BROUHA, SHARON S

Provider ID: 64827

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: A91973

NPI: 1356554323

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

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

9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

BUCKLEY, DAVID W

Provider ID: 243265

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

4150 REGENTS PARK ROW

STE 195

LA JOLLA, CA 92037-9139

Phone: (858) 622-6464

Fax: (866) 558-4329

After Hours Phone: (858)

622-6464

Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: G57383
NPI: 1982657060
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

BUI, KEVIN T

Provider ID: 280519
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A134576
NPI: 1578906186
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CASOLA, GIOVANNA
Provider ID: 64835
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: G51575
NPI: 1790721256
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Italian
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Saddleback Memorial Med Ctr

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CHANG, ERIC Y

Provider ID: 64839
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Male
License number: A97139
NPI: 1376756353
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Green Hospital, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:


CHEN, JAMES Y

Provider ID: 64416
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6173
Fax:
After Hours Phone: (858) 822-6173
Provider Gender: Male
License number: A108635
NPI: 1427250588
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton


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D. Directorio de proveedores de atención especializada


Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:  Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

CHEN, JAMES Y

Provider ID: 64842
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-7000
 Fax:
 After Hours Phone: (858) 657-7000
 Provider Gender: Male
 License number: A108635
 NPI: 1427250588
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:  Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:


CHEN, KAREN C

Provider ID: 64843
 Board Certified Specialty: No


UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A110719
 NPI: 1437377710
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Green Hospital, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:  Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

CHOU, ERIC T

Provider ID: 126016
 Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 4150 REGENTS PARK ROW STE 195
 LA JOLLA, CA 92037-9139
 Phone: (858) 622-6464
 Fax: (858) 622-6460
 After Hours Phone: (858) 622-6464
 Provider Gender: Male
 License number: A96095
 NPI: 1689627838
 Provider English Spoken: Yes

Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:  Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

CHUNG, CHRISTINE B

Provider ID: 64848
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A65414
 NPI: 1528033560
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Green Hospital, Scripps Memorial Hospital, Scripps Mercy Hospital, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:  Accessibility: W

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D. Directorio de proveedores de atención especializada

Hours: M-F 8AM-5PM, SA
9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

COOPER, JAMES A

Provider ID: 126041

Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC

4150 REGENTS PARK ROW
STE 195

LA JOLLA, CA 92037-9139

Phone: (858) 622-6464

Fax: (858) 622-6460

After Hours Phone: (858)

622-6464

Provider Gender: Male

License number: A62473

NPI: 1497708622

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Pomerado

Hospital, Scripps Mercy Hospital,

Scripps Mercy Hospital Chula

Vista, East Los Angeles Doctors

Hsp, Memorial Hosp Of Gardena

Inc, Riverside Community Hosp,

Palmdale Regional Medical

Center, Barstow Community

Hospital, Kindred Hospital South

Bay, Loma Linda University Med

Ctr Murrieta

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

DE GUZMAN, JADE Q

Provider ID: 64423

Board Certified Specialty: No

UCSD MEDICAL GROUP

3855 HEALTH SCIENCES DR

LA JOLLA, CA 92093-1503

Phone: (858) 822-6173

Fax:

After Hours Phone: (858)

822-6173

Provider Gender: Female

License number: A102678

NPI: 1801089065

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton, Ronald Reagan Ucla

Med Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

DE GUZMAN, JADE Q

Provider ID: 64856

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 657-7000

Fax:

After Hours Phone: (858)

657-7000

Provider Gender: Female

License number: A102678

NPI: 1801089065

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton, Ronald Reagan Ucla

Med Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

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

9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

DOEMENY, JOHN M

Provider ID: 126048

Board Certified Specialty: No

IHS RADIOLOGY MEDICAL

GROUP INC

4150 REGENTS PARK ROW

STE 195

LA JOLLA, CA 92037-9139

Phone: (858) 622-6464

Fax: (858) 622-6460

After Hours Phone: (858)

622-6464

Provider Gender: Male

License number: G50925

NPI: 1841243912

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital, Scripps Mercy Hospital

Chula Vista

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

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D. Directorio de proveedores de atención especializada

☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

DORROS, STEPHEN M

Provider ID: 64861
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858)
 657-7000
Provider Gender: Male
License number: G29061
NPI: 1942319959
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Tri City
 Medical Ctr, Ucsd Medical Ctr,
 Ucsd La Jolla John Sally
 Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No

☯ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

DWEK, JERRY R

Provider ID: 64866
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858)
 657-7000
Provider Gender: Male
License number: G86073
NPI: 1558335695
Provider English Spoken: Yes
Provider Language(s) Spoken:
 French, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
 Memorial Hospital, Sharp Chula
 Vista Med Ctr, Tri City Medical
 Ctr, Ucsd Medical Ctr, Pomerado
 Hospital, Ucsd La Jolla John
 Sally Thornton, Sharp Coronado
 Hosp And Healthcare Ctr, Rady
 Childrens Hospital San Diego,
 Palomar Medical Center
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

EGHTEDARI, MOHAMMAD

Provider ID: 110349
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
 926-8273
Provider Gender: Male
License number: A114372

NPI: 1740548734
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

EVORA, DARRYL K

Provider ID: 64871
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858)
 657-7000
Provider Gender: Male
License number: G76577
NPI: 1790751188
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp
 Memorial Hospital, Ucsd Medical
 Ctr, Sharp Chula Vista Med Ctr,
 Sharp Coronado Hosp And
 Healthcare Ctr, Ucsd La Jolla
 John Sally Thornton, Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No

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D. Directorio de proveedores de atención especializada

<p>♿ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>	<p>4150 REGENTS PARK ROW STE 195 LA JOLLA, CA 92037-9139 <i>Phone:</i> (858) 622-6464 <i>Fax:</i> <i>After Hours Phone:</i> (858) 622-6464 <i>Provider Gender:</i> Female <i>License number:</i> A109806 <i>NPI:</i> 1962521419 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Alvarado Hospital Llc, Redlands Community Hosp, Barstow Community Hospital, Kindred Hospital Riverside, Victor Valley Global Med Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No</p>	<p>French <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Green Hospital, Scripps Memorial Hospital, Scripps Mercy Hospital, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No</p>
<p>FARID, NIKDOKHT <i>Provider ID:</i> 64875 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (858) 657-7000 <i>Fax:</i> <i>After Hours Phone:</i> (858) 657-7000 <i>Provider Gender:</i> Female <i>License number:</i> A94195 <i>NPI:</i> 1205151172 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No</p>	<p>♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>	<p>FOWLER, KATHRYN J <i>Provider ID:</i> 201290 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female <i>License number:</i> C154877 <i>NPI:</i> 1255457941 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No</p>
<p>♿ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>	<p>FLISZAR, EVELYNE <i>Provider ID:</i> 64877 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (858) 657-7000 <i>Fax:</i> <i>After Hours Phone:</i> (858) 657-7000 <i>Provider Gender:</i> Female <i>License number:</i> A60712 <i>NPI:</i> 1164449955 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i></p>	
<p>FIROOZNA, NILOFAR <i>Provider ID:</i> 126170 <i>Board Certified Specialty:</i> No IHS RADIOLOGY MEDICAL GROUP INC</p>		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

<p>♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group</p>	<p>LA JOLLA, CA 92037-1300 <i>Phone:</i> (858) 657-7000 <i>Fax:</i> <i>After Hours Phone:</i> (858) 657-7000 <i>Provider Gender:</i> Male <i>License number:</i> C141231 <i>NPI:</i> 1861491516 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>	<p>Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>
<p>FRANKE, MARK A <i>Provider ID:</i> 126054 <i>Board Certified Specialty:</i> No IHS RADIOLOGY MEDICAL GROUP INC 4150 REGENTS PARK ROW STE 195 LA JOLLA, CA 92037-9139 <i>Phone:</i> (858) 622-6464 <i>Fax:</i> <i>After Hours Phone:</i> (858) 622-6464 <i>Provider Gender:</i> Male <i>License number:</i> A118792 <i>NPI:</i> 1114246329 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Santa Monica UCLA Med Ctr, Ronald Reagan UCLA Med Ctr, Alvarado Hospital Llc <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc</p>	<p>FRIEND, CHRISTOPHER J <i>Provider ID:</i> 120855 <i>Board Certified Specialty:</i> No UCSD RADIOLOGY AT LA JOLLA 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (858) 657-6641 <i>Fax:</i> <i>After Hours Phone:</i> (858) 657-6641 <i>Provider Gender:</i> Male <i>License number:</i> C141231 <i>NPI:</i> 1861491516 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd</p>	<p>GENTILI, AMILCARE <i>Provider ID:</i> 64882 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Male <i>License number:</i> A44208 <i>NPI:</i> 1922086594 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Italian <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Green Hospital, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM <i>Website:</i></p>
<p>FRIEND, CHRISTOPHER J <i>Provider ID:</i> 120848 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR</p>	<p>FRIEND, CHRISTOPHER J <i>Provider ID:</i> 120848 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR</p>	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Email:
Medical Group(s):
IPA:

GRISSOM, MURRAY J

Provider ID: 271568
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
 926-8273
Provider Gender: Male
License number: A147782
NPI: 1720465396
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HAHN, MICHAEL E

Provider ID: 98503
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
 926-8273
Provider Gender: Male

License number: A119409
NPI: 1356573992
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility: W
Hours: M-F 8AM-5PM, SA
 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HANDWERKER, JASON

Provider ID: 98759
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858)
 657-7000
Provider Gender: Male
License number: A114704
NPI: 1316166630
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: University Of
 California Irvine Med Ctr, Ucsd
 Medical Ctr, Ucsd La Jolla John
 Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility: W

Hours: M-F 8AM-5PM, SA
 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HANSEN, ROBERT B

Provider ID: 113853
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (619) 543-3405
Fax:
After Hours Phone: (619)
 543-3405
Provider Gender: Male
License number: A97152
NPI: 1972643906
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: George L
 Mee Memorial Hosp, Ucsd
 Medical Ctr, Ucsd La Jolla John
 Sally Thornton, Dameron
 Hospital Assoc, St Josephs Med
 Center Of Stockton, Memorial
 Hospital Med Ctr, John C
 Fremont Hospital, Mountains
 Community Hosp, Lodi Memorial
 Hospital, Oak Valley Dist Hosp
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility: W
Hours: M-F 8AM-5PM, SA
 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

HARMAN, SCOTT A

Provider ID: 126067
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
4150 REGENTS PARK ROW
STE 195
LA JOLLA, CA 92037-9139
Phone: (858) 622-6464
Fax: (858) 622-6460
After Hours Phone: (858) 622-6464
Provider Gender: Male
License number: G57284
NPI: 1124071311
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HAUSCHILDT, JOHN P

Provider ID: 64902
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Male
License number: G76429
NPI: 1922072099

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Sharp Chula Vista Med Ctr, Sharp Coronado Hosp And Healthcare Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HILLER, LUCAS P

Provider ID: 64907
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A91321
NPI: 1417160474
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Scripps Green Hospital, Ucsd La Jolla John Sally Thornton, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula

Vista, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HSIAO, ALBERT

Provider ID: 117381
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-6641
Fax: (858) 657-6686
After Hours Phone: (858) 657-6641
Provider Gender: Male
License number: A105882
NPI: 1457546244
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

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D. Directorio de proveedores de atención especializada

HUANG, BRADY K

Provider ID: 64916
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A108832
NPI: 1407860299
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Scripps Green Hospital,
Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HUGHES, TUDOR H

Provider ID: 64918
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858)
657-7000
Provider Gender: Male
License number: A83748

NPI: 1932187127
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

IMBESI, STEVEN G

Provider ID: 64923
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858)
657-7000
Provider Gender: Male
License number: G79078
NPI: 1891710554
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Saddleback
Memorial Med Ctr, Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA

9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ISHIOKA, KEVIN M

Provider ID: 83631
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858)
657-7000
Provider Gender: Male
License number: A93286
NPI: 1437362498
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas,
Scripps Memorial Hospital,
Scripps Mercy Hospital Chula
Vista, Scripps Mercy Hospital,
Ucsd Medical Ctr, Ucsd La Jolla
John Sally Thornton, Scripps
Green Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

JOHNSON, JOHN O

Provider ID: 126079
Board Certified Specialty: No

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D. Directorio de proveedores de atención especializada

IHS RADIOLOGY MEDICAL GROUP INC
4150 REGENTS PARK ROW STE 195
LA JOLLA, CA 92037-9139
Phone: (858) 622-6464
Fax: (858) 622-6460
After Hours Phone: (858) 622-6464
Provider Gender: Male
License number: G59632
NPI: 1073565792
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KARIMI, AFSHIN

Provider ID: 64934
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Male
License number: A96518
NPI: 1952511214
Provider English Spoken: Yes
Provider Language(s) Spoken: Persian

Cultural Competency: No
Hospital Affiliation: Scripps Green Hospital, Pioneers Memorial Hospital, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, University Of California Irvine Med Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Temecula Valley Hospital Inc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KAROW, DAVID S

Provider ID: 64439
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6173
Fax:
After Hours Phone: (858) 822-6173
Provider Gender: Male
License number: A96935
NPI: 1932490703
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Santa Monica Ucla Med Ctr, Ucsd Medical Ctr, Ronald Reagan Ucla Med Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No

Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KAROW, DAVID S

Provider ID: 64935
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Male
License number: A96935
NPI: 1932490703
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Santa Monica Ucla Med Ctr, Ucsd Medical Ctr, Ronald Reagan Ucla Med Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KHANNA, PARITOSH

Provider ID: 64442

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6173
Fax:
After Hours Phone: (858)
822-6173
Provider Gender: Male
License number: C54827
NPI: 1568572832
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KHANNA, PARITOSH

Provider ID: 64938
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858)
657-7000
Provider Gender: Male
License number: C54827
NPI: 1568572832
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi

Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KIKOLSKI, STEVEN G

Provider ID: 64939
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858)
657-7000
Provider Gender: Male
License number: A106307
NPI: 1063647485
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Scripps
Mercy Hospital, Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton, Scripps Mercy Hospital
Chula Vista, Scripps Memorial
Hospital Encinitas, Scripps
Green Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W

Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KINNEY, THOMAS B

Provider ID: 64941
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858)
657-7000
Provider Gender: Male
License number: G64176
NPI: 1992732671
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KINNE, ERICA L

Provider ID: 83294
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 657-7000

Fax:

After Hours Phone: (858)
657-7000

Provider Gender: Female

License number: A110179

NPI: 1487803946

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Loma Linda University Med
Ctr, Scripps Memorial Hospital,
Scripps Mercy Hospital, Ucsd La
Jolla John Sally Thornton,
Scripps Mercy Hospital Chula
Vista, Scripps Memorial Hospital
Encinitas, Scripps Green
Hospital, Loma Linda University
Childrens Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA
9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

KRUK, PETER G

Provider ID: 64948

Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

Phone: (858) 657-7000

Fax:

After Hours Phone: (858)
657-7000

Provider Gender: Male

License number: A96070

NPI: 1366480634

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital, Sharp Memorial
Hospital, Ucsd Medical Ctr,
Sharp Chula Vista Med Ctr, Ucsd
La Jolla John Sally Thornton,
Sharp Coronado Hosp And
Healthcare Ctr, Rady Childrens
Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA
9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

LADD, WILLIAM A

Provider ID: 64949

Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

Phone: (858) 657-7000

Fax:

After Hours Phone: (858)
657-7000

Provider Gender: Male

License number: G63024

NPI: 1063463230

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps
Memorial Hospital, Scripps
Memorial Hospital Encinitas,
Ucsd Medical Ctr, Ucsd La Jolla
John Sally Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA
9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

LECOMTE, MATTHEW D

Provider ID: 283488

Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

License number: A171824

NPI: 1508210683

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

LEE, ROLAND R

Provider ID: 64954

Board Certified Specialty: No
UCSD MEDICAL GROUP

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858)
657-7000
Provider Gender: Male
License number: G57800
NPI: 1639190028
Provider English Spoken: Yes
Provider Language(s) Spoken:
Chinese, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LIM, VIVIAN

Provider ID: 125929
Board Certified Specialty: No
UCSD RADIOLOGY AT LA
JOLLA
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-6641
Fax:
After Hours Phone: (858)
657-6641
Provider Gender: Female
License number: G58509
NPI: 1295796753
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Scripps
Memorial Hospital, Rady
Childrens Hospital San Diego,
Scripps Green Hospital, Ucsd
Medical Ctr, Ucsd La Jolla John
Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LIZERBRAM, ERIC K

Provider ID: 126092
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC
4150 REGENTS PARK ROW
STE 195
LA JOLLA, CA 92037-9139
Phone: (858) 622-6464
Fax: (858) 622-6460
After Hours Phone: (858)
622-6464
Provider Gender: Male
License number: G74959
NPI: 1598718926
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA:
LUBISICH, JOHN P
Provider ID: 126098
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC
4150 REGENTS PARK ROW
STE 195
LA JOLLA, CA 92037-9139
Phone: (858) 622-6464
Fax: (858) 622-6460
After Hours Phone: (858)
622-6464
Provider Gender: Male
License number: G77575
NPI: 1194863902
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado
Hospital Llc, Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc
MAFEE, MAHMOOD F
Provider ID: 64965
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 657-7000

Fax:

After Hours Phone: (858)
657-7000

Provider Gender: Male

License number: A31751

NPI: 1356431373

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA
9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

MAREK BYKOWSKI, JULIE L

Provider ID: 64969

Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

Phone: (858) 657-7000

Fax:

After Hours Phone: (858)
657-7000

Provider Gender: Female

License number: A96803

NPI: 1699988667

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA
9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

MEISINGER, QUINN C

Provider ID: 117245

Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

Phone: (858) 657-6641

Fax:

After Hours Phone: (858)
657-6641

Provider Gender: Male

License number: A123683

NPI: 1215222757

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA
9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

MEISINGER, QUINN C

Provider ID: 118375

Board Certified Specialty: No

UCSD RADIOLOGY AT LA
JOLLA

9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

Phone: (858) 657-6641

Fax:

After Hours Phone: (858)
657-6641

Provider Gender: Male

License number: A123683

NPI: 1215222757

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

MISRA, CHANDAN

Provider ID: 118480

Board Certified Specialty: No
UCSD RADIOLOGY AT LA
JOLLA

9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

Phone: (858) 657-6641

Fax:

After Hours Phone: (858)
657-6641

Provider Gender: Male

License number: A146108

NPI: 1821356825

Provider English Spoken: Yes

Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Sutter Santa Rosa Regional Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MOFFIT, BRIAN J

Provider ID: 126119
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
4150 REGENTS PARK ROW STE 195
LA JOLLA, CA 92037-9139
Phone: (858) 622-6464
Fax: (858) 622-6460
After Hours Phone: (858) 622-6464
Provider Gender: Male
License number: G51551
NPI: 1508817305
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MURPHY, PAUL M

Provider ID: 118360
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-6641
Fax:
After Hours Phone: (858) 657-6641
Provider Gender: Male
License number: A123586
NPI: 1295050946
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ronald Reagan Ucla Med Ctr, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr, Santa Monica Ucla Med Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

NAHEEDY, JOHN H

Provider ID: 64461
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503

Phone: (858) 822-6173
Fax:
After Hours Phone: (858) 822-6173
Provider Gender: Male
License number: A99832
NPI: 1760695761
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Sharp Coronado Hosp And Healthcare Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

NAHEEDY, JOHN H

Provider ID: 64991
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Male
License number: A99832
NPI: 1760695761
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Sharp Coronado Hosp And Healthcare

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

NEWTON, ISABEL G

Provider ID: 84301
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Female
License number: A108128
NPI: 1306068697
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

NEWTON, ISABEL G

Provider ID: 84302
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6173
Fax:
After Hours Phone: (858) 822-6173
Provider Gender: Female
License number: A108128
NPI: 1306068697
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

NORBASH, ALEXANDER M

Provider ID: 125637
Board Certified Specialty: No
UCSD RADIOLOGY AT LA JOLLA
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-6641
Fax:
After Hours Phone: (858) 657-6641
Provider Gender: Male
License number: G62865

NPI: 1790752269
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

OBOYLE, MARY K

Provider ID: 64998
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 543-3000
Fax:
After Hours Phone: (800) 543-3000
Provider Gender: Female
License number: G73501
NPI: 1568487999
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p><i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p> <p>OBRZUT, SEBASTIAN <i>Provider ID:</i> 64999 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (858) 657-7000 <i>Fax:</i> <i>After Hours Phone:</i> (858) 657-7000 <i>Provider Gender:</i> Male <i>License number:</i> A85028 <i>NPI:</i> 1083714398 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p> <p>OJEDA-FOURNIER, HAYDEE <i>Provider ID:</i> 65000 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (858) 657-7000 <i>Fax:</i> <i>After Hours Phone:</i> (858) 657-7000</p>	<p><i>Provider Gender:</i> Female <i>License number:</i> A99462 <i>NPI:</i> 1871537191 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p> <p>OLOUGHLIN, BRIAN J <i>Provider ID:</i> 126125 <i>Board Certified Specialty:</i> No IHS RADIOLOGY MEDICAL GROUP INC 4150 REGENTS PARK ROW STE 195 LA JOLLA, CA 92037-9139 <i>Phone:</i> (858) 622-6464 <i>Fax:</i> <i>After Hours Phone:</i> (858) 622-6464 <i>Provider Gender:</i> Male <i>License number:</i> A120064 <i>NPI:</i> 1972709087 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Santa Monica Ucla Med Ctr, Alvarado Hospital Llc, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista,</p>	<p>Scripps Memorial Hospital Encinitas, Scripps Green Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p> <p>OSHAUGHNESSY, LOUISE S <i>Provider ID:</i> 126131 <i>Board Certified Specialty:</i> No IHS RADIOLOGY MEDICAL GROUP INC 4150 REGENTS PARK ROW STE 195 LA JOLLA, CA 92037-9139 <i>Phone:</i> (858) 622-6464 <i>Fax:</i> (858) 622-6460 <i>After Hours Phone:</i> (858) 622-6464 <i>Provider Gender:</i> Female <i>License number:</i> G48800 <i>NPI:</i> 1285685925 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Alvarado Hospital Llc, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

PAKBAZ, RAMIN S

Provider ID: 64463
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
Phone: (858) 822-6173
Fax:
After Hours Phone: (858)
 822-6173
Provider Gender: Male
License number: A73947
NPI: 1811072457
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Farsi
Cultural Competency: No
Hospital Affiliation: Sutter
 Roseville Medical Center, Mercy
 General Hospital, Mercy San
 Juan Hospital, Scripps Green
 Hospital, Scripps Memorial
 Hospital, Scripps Mercy Hospital,
 Scripps Memorial Hospital
 Encinitas, Ucsd Medical Ctr,
 Paradise Valley Hospital, Scripps
 Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☒ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

PAKBAZ, RAMIN S

Provider ID: 65005
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300

Phone: (858) 657-7000
Fax:
After Hours Phone: (858)
 657-7000
Provider Gender: Male
License number: A73947
NPI: 1811072457
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Farsi
Cultural Competency: No
Hospital Affiliation: Sutter
 Roseville Medical Center, Mercy
 General Hospital, Mercy San
 Juan Hospital, Scripps Green
 Hospital, Scripps Memorial
 Hospital, Scripps Mercy Hospital,
 Scripps Memorial Hospital
 Encinitas, Ucsd Medical Ctr,
 Paradise Valley Hospital, Scripps
 Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☒ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

PATHRIA, MINI N

Provider ID: 65011
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
 926-8273
Provider Gender: Female
License number: A43771

NPI: 1699739318
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Hindi
Cultural Competency: No
Hospital Affiliation: Scripps
 Green Hospital, Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☒ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

PATIL, AMOL A

Provider ID: 98854
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858)
 657-7000
Provider Gender: Male
License number: A133973
NPI: 1225355720
Provider English Spoken: Yes
Provider Language(s) Spoken:
 French, Hindi
Cultural Competency: No
Hospital Affiliation: Sierra Vista
 Regional Med Ctr, Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton, Goleta Valley Cottage
 Hosp
Medi-Cal Open Panel: No
Min/Max Age: None

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

PRETORIUS, DOLORES H

Provider ID: 65018
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Female
License number: C39102
NPI: 1902839418
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

RESNICK, DONALD L

Provider ID: 65026
Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-6641
Fax: (858) 657-6686
After Hours Phone: (858) 657-6641
Provider Gender: Male
License number: G18577
NPI: 1164450938
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Scripps Green Hospital, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

RIAD, SHAREEF M

Provider ID: 65027
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-3405
Fax:
After Hours Phone: (619) 543-3405
Provider Gender: Male
License number: A106536
NPI: 1417111477
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps

Green Hospital, Lakewood Regional Med Ctr, Pacific Alliance Medical Center, San Antonio Comm Hosp, Tri City Medical Ctr, Ucsd Medical Ctr, Alvarado Hospital Llc, Ukiah Valley Med Ctr, Providence St Mary Medical Center, Kaweah Delta District Hosp
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

RICHMAN, KATHERINE M

Provider ID: 65028
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Female
License number: G80333
NPI: 1992898993
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ROBERTS, ANNE C

Provider ID: 65032
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858)
657-7000
Provider Gender: Female
License number: G58654
NPI: 1669497996
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ROMINE, LORENE E

Provider ID: 65033
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

Phone: (858) 657-7000
Fax:
After Hours Phone: (858)
657-7000
Provider Gender: Female
License number: A87658
NPI: 1720209786
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Cedars Sinai Medical
Center, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SAMPATH, SRINATH C

Provider ID: 110180
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-6641
Fax:
After Hours Phone: (858)
657-6641
Provider Gender: Male
License number: A108197
NPI: 1891982328
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Tamil
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally

Thornton

Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SANTILLAN, CYNTHIA S

Provider ID: 65043
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A90879
NPI: 1932132404
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SCHECHTER, MARK S

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Provider ID: 126137
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
4150 REGENTS PARK ROW STE 195
LA JOLLA, CA 92037-9139
Phone: (858) 622-6464
Fax: (858) 622-6460
After Hours Phone: (858) 622-6464
Provider Gender: Male
License number: G42390
NPI: 1942253018
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, El Centro Regional Medical Center, Selma Community Hospital, Adventist Medical Center, Adventist Med Ctr Reedley, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SCHWARTZBERG, ROSS E

Provider ID: 126144
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
4150 REGENTS PARK ROW STE 195
LA JOLLA, CA 92037-9139

Phone: (858) 622-6464
Fax: (858) 622-6460
After Hours Phone: (858) 622-6464
Provider Gender: Male
License number: G72997
NPI: 1215976766
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SIRLIN, CLAUDE B

Provider ID: 65061
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: G80184
NPI: 1730261793
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Saddleback Memorial Med Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None

American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SLATER, JERRY

Provider ID: 283311
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A172254
NPI: 1851746382
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SNYDER, WILLIAM C

Provider ID: 126151
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

4150 REGENTS PARK ROW
STE 195
LA JOLLA, CA 92037-9139
Phone: (858) 622-6464
Fax: (866) 558-4329
After Hours Phone: (858)
622-6464
Provider Gender: Male
License number: A65059
NPI: 1477505162
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado
Hospital Llc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SOHELI, AYDIN C

Provider ID: 98875
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858)
657-7000
Provider Gender: Male
License number: A120965
NPI: 1235443789
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Scripps Memorial Hospital,

Scripps Mercy Hospital, Scripps
Mercy Hospital Chula Vista,
Scripps Memorial Hospital
Encinitas, Scripps Green
Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SPOTO, GARY P

Provider ID: 126157
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC
4150 REGENTS PARK ROW
STE 195
LA JOLLA, CA 92037-9139
Phone: (858) 622-6464
Fax: (858) 622-6460
After Hours Phone: (858)
622-6464
Provider Gender: Male
License number: G58131
NPI: 1659332062
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista, Scripps Memorial
Hospital, Scripps Memorial
Hospital Encinitas, Scripps
Green Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

STANFILL, JOHN G

Provider ID: 84902
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858)
657-7000
Provider Gender: Male
License number: A124808
NPI: 1831364330
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Scripps
Memorial Hospital, Scripps
Mercy Hospital, Scripps Mercy
Hospital Chula Vista, Scripps
Memorial Hospital Encinitas,
Scripps Green Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

TADROS, ANTHONY S

Provider ID: 116033
Board Certified Specialty: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273

Fax:

After Hours Phone: (800)
926-8273

Provider Gender: Male

License number: A128627

NPI: 1306112057

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd
Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

TADROS, ANTHONY S

Provider ID: 268545

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A128627

NPI: 1306112057

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd
Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

TAMAYO-MURILLO, DORATHY E

Provider ID: 126828

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 657-6641

Fax:

After Hours Phone: (858)

657-6641

Provider Gender: Female

License number: A152645

NPI: 1700225711

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

TAMAYO-MURILLO, DORATHY E

Provider ID: 126832

Board Certified Specialty: No

UCSD RADIOLOGY AT LA
JOLLA

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 657-6641

Fax:

After Hours Phone: (858)

657-6641

Provider Gender: Female

License number: A152645

NPI: 1700225711

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

TENA, ROWENA G

Provider ID: 126163

Board Certified Specialty: No

IHS RADIOLOGY MEDICAL

GROUP INC

4150 REGENTS PARK ROW

STE 195

LA JOLLA, CA 92037-9139

Phone: (858) 622-6464

Fax: (858) 622-6460

After Hours Phone: (858)

622-6464

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Provider Gender: Female
License number: A69607
NPI: 1629029335
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Vibra Hospital Of San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

TOBIN, MICHAEL L

Provider ID: 126216
Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 4150 REGENTS PARK ROW STE 195
 LA JOLLA, CA 92037-9139
Phone: (858) 622-6464
Fax: (858) 622-6460
After Hours Phone: (858) 622-6464
Provider Gender: Male
License number: A45908
NPI: 1730132150
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None

American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

TSUKADA, GLENN H

Provider ID: 126201
Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 4150 REGENTS PARK ROW STE 195
 LA JOLLA, CA 92037-9139
Phone: (858) 622-6464
Fax: (858) 622-6460
After Hours Phone: (858) 622-6464
Provider Gender: Male
License number: A60235
NPI: 1710938394
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Pomerado Hospital, Alvarado Hospital Llc, Scripps Memorial Hospital, Grossmont Hospital, Scripps Mercy Hospital, Ucsd Medical Ctr, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Scripps Green Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA:
TYAGI, AVISHKAR
Provider ID: 84936
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Male
License number: A123065
NPI: 1740440148
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, San Dimas Community Hospital, Lakewood Regional Med Ctr, Pacific Alliance Medical Center, San Antonio Comm Hosp, Tri City Medical Ctr, Palomar Health Downtown Campus, Pomerado Hospital, Alvarado Hospital Llc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

VINOCUR, DANIEL N

Provider ID: 64484
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

LA JOLLA, CA 92093-1503
 Phone: (858) 822-6173
 Fax:
 After Hours Phone: (858) 822-6173
 Provider Gender: Male
 License number: A115727
 NPI: 1770711830
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

VINOCUR, DANIEL N

Provider ID: 65086
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-7000
 Fax:
 After Hours Phone: (858) 657-7000
 Provider Gender: Male
 License number: A115727
 NPI: 1770711830
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No

Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

WAGNER, THAO N

Provider ID: 84946
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-7000
 Fax:
 After Hours Phone: (858) 657-7000
 Provider Gender: Female
 License number: A123521
 NPI: 1821067935
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Vietnamese
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Scripps Green Hospital
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website:
 Email:

Medical Group(s):
 IPA:
WANG, LEE L
 Provider ID: 118161
 Board Certified Specialty: No
 UCSD RADIOLOGY AT LA JOLLA
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-6641
 Fax:
 After Hours Phone: (858) 657-6641
 Provider Gender: Male
 License number: A146921
 NPI: 1003119975
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital, Scripps Green Hospital, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

WEIHE, ELIZABETH

Provider ID: 102369
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-6641
 Fax:
 After Hours Phone: (858) 657-6641

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Female
License number: A135679
NPI: 1386884302
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

YEN, ANDREW C

Provider ID: 65094
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A89413
NPI: 1942499116
Provider English Spoken: Yes
Provider Language(s) Spoken: Mandarin
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ZAKHARY, MINA M

Provider ID: 84249
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Male
License number: A124821
NPI: 1114185626
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Hebrew
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Scripps Green Hospital, Ucsd Medical Ctr, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Memorial Hospital Encinitas, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ZINK BRODY, GORDON C
Provider ID: 126194
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
4150 REGENTS PARK ROW
STE 195
LA JOLLA, CA 92037-9139
Phone: (858) 622-6464
Fax: (858) 622-6460
After Hours Phone: (858) 622-6464
Provider Gender: Male
License number: G68636
NPI: 1689610362
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc, Oak Valley Dist Hosp, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Scripps Green Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

RADIOLOGY DIAGNOSTIC

BECKETT, RYAN D

Provider ID: 283217
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A172431
NPI: 1932561347
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CHENG, KAREN Y

Provider ID: 283227
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A144517
NPI: 1427430511
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

COVELL, DUSTIN M

Provider ID: 239901
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A160221
NPI: 1942615893
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

EAJAZI, ALIREZA

Provider ID: 283522
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A171288
NPI: 1669835005
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MORENO, MARIO A

Provider ID: 283316
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A151572
NPI: 1871957308
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd

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D. Directorio de proveedores de atención especializada

Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SCHULTZ, HEATHER M

Provider ID: 240343
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
 926-8273
Provider Gender: Female
License number: A139567
NPI: 1871910810
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

YORK, VINCENT M

Provider ID: 283518
Board Certified Specialty: No

UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
 926-8273
Provider Gender: Male
License number: A170712
NPI: 1790146611
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

RADIOLOGY

AMMIRATI, GUISEPPE

Provider ID: 127776
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 9834 GENESEE AVE STE 411
 LA JOLLA, CA 92037-1264
Phone: (858) 677-1755
Fax: (858) 677-1771
After Hours Phone: (858)
 677-1755
Provider Gender: Male
License number: A97964
NPI: 1861653990
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Italian, Spanish
Cultural Competency: No
Hospital Affiliation: St Jude

Medical Center, Paradise Valley
 Hospital, Scripps Memorial
 Hospital, Scripps Mercy Hospital,
 Scripps Mercy Hospital Chula
 Vista, Scripps Memorial Hospital
 Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

DOEMENY, JOHN M

Provider ID: 269748
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 4150 REGENTS PARK ROW
 STE 195
 LA JOLLA, CA 92037-9139
Phone: (858) 622-6464
Fax: (866) 558-4329
After Hours Phone: (858)
 622-6464
Provider Gender: Male
License number: G50925
NPI: 1841243912
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital, Scripps Mercy Hospital
 Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Community Care Ipa Llc

FRANKE, MARK A

Provider ID: 269633
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4150 REGENTS PARK ROW
STE 195
LA JOLLA, CA 92037-9139
Phone: (858) 622-6464
Fax: (866) 558-4329
After Hours Phone: (858)
622-6464
Provider Gender: Male
License number: A118792
NPI: 1114246329
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Santa Monica
Ucla Med Ctr, Ronald Reagan
Ucla Med Ctr, Alvarado Hospital
Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MOFFIT, BRIAN J

Provider ID: 269527
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4150 REGENTS PARK ROW
STE 195
LA JOLLA, CA 92037-9139

Phone: (858) 622-6464
Fax: (866) 558-4329
After Hours Phone: (858)
622-6464
Provider Gender: Male
License number: G51551
NPI: 1508817305
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SCHWARTZBERG, ROSS E

Provider ID: 245630
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4150 REGENTS PARK ROW
STE 195
LA JOLLA, CA 92037-9139
Phone: (858) 622-6464
Fax:
After Hours Phone: (858)
622-6464
Provider Gender: Male
License number: G72997
NPI: 1215976766
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado
Hospital Llc
Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

TENA, ROWENA G , MD

Provider ID: 269826
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4150 REGENTS PARK ROW
STE 195
LA JOLLA, CA 92037-9139
Phone: (858) 622-6464
Fax: (866) 558-4329
After Hours Phone: (858)
622-6464
Provider Gender: Female
License number: A69607
NPI: 1629029335
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista, Vibra Hospital Of
San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

**REGISTERED DIETITIAN /
NUTRITIONIST**

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D. Directorio de proveedores de atención especializada

ROBERTS, TRACI L

Provider ID: 268237
Board Certified Specialty: No
UCSD MEDICAL GROUP
9850 GENESEE AVE STE 320
LA JOLLA, CA 92037-1208
Phone: (858) 864-9800
Fax:
After Hours Phone: (858)
864-9800
Provider Gender: Female
License number: 86084895
NPI: 1003385691
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

ROBERTS, TRACI L

Provider ID: 268238
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6100
Fax:
After Hours Phone: (858)
822-6100
Provider Gender: Female
License number: 86084895
NPI: 1003385691
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

ROBERTS, TRACI L

Provider ID: 268239
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: 86084895
NPI: 1003385691
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SIEVERING, DENISE

Provider ID: 268249
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: 86061948
NPI: 1356478929
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

REGISTERED PHYSICAL THERAPIST

BECHERER, KELLEY D

Provider ID: 118456
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (855) 543-0333
Fax:
After Hours Phone: (855)
543-0333
Provider Gender: Female
License number: PT43240

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D. Directorio de proveedores de atención especializada

NPI: 1306219472

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Ucsd Medical Group

BECHERER, KELLEY D

Provider ID: 258297

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR # LLD

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: PT43240

NPI: 1306219472

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Ucsd Medical Group

BERGERON, PATRICK R

Provider ID: 206533

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: PT41083

NPI: 1285061390

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

BERGERON, PATRICK R

Provider ID: 258296

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR # LLD

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: PT41083

NPI: 1285061390

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

BUNOSKY, ABIGAIL S

Provider ID: 246021

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR # LLD

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: PT40519

NPI: 1780018416

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

BURGESS, CATHERINE E

Provider ID: 258346

Board Certified Specialty: No

UCSD MEDICAL GROUP

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

9350 CAMPUS POINT DR # LLD No
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: PT35850
 NPI: 1205287687
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessability: Hours: M-SA 9AM-5PM
 Website: Email: Medical Group(s):
 IPA: Ucsd Medical Group

CHIEN, PEI S
 Provider ID: 214699
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax: After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: PT295605
 NPI: 1891260238
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Chinese
 Cultural Competency: No
 Hospital Affiliation: Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessability: Hours: M-SA 9AM-5PM
 Website: Email: Medical Group(s):
 IPA: Ucsd Medical Group

CHIEN, PEI S
 Provider ID: 258324
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR # LLD
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: PT295605
 NPI: 1891260238
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Chinese
 Cultural Competency: No
 Hospital Affiliation: Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessability: Hours: M-SA 9AM-5PM
 Website: Email: Medical Group(s):
 IPA: Ucsd Medical Group

HERMAS, LAUREN D
 Provider ID: 258316
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR # LLD
 LA JOLLA, CA 92037-1300

Phone: (858) 657-6879
 Fax: (858) 657-6873
 After Hours Phone: (858) 657-6879
 Provider Gender: Female
 License number: PT22469
 NPI: 1376856153
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessability: Hours: M-SA 9AM-5PM
 Website: Email: Medical Group(s):
 IPA: Ucsd Medical Group

HOOPER, JASON K
 Provider ID: 258357
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR # LLD
 LA JOLLA, CA 92037-1300
 Phone: (858) 543-0333
 Fax: (858) 657-1809
 After Hours Phone: (858) 543-0333
 Provider Gender: Male
 License number: PT43019
 NPI: 1699158022
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessability: Hours: M-SA 9AM-5PM

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D. Directorio de proveedores de atención especializada

Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KIERNAN, KRISTEN

Provider ID: 258358
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # LLD
LA JOLLA, CA 92037-1300
Phone: (858) 657-6879
Fax: (858) 657-6873
After Hours Phone: (858)
657-6879
Provider Gender: Female
License number: PT292711
NPI: 1215216379
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LE, YVONNE T

Provider ID: 202665
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273

Provider Gender: Female
License number: PT295301
NPI: 1942780424
Provider English Spoken: Yes
Provider Language(s) Spoken:
Vietnamese
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LE, YVONNE T

Provider ID: 258444
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # LLD
LA JOLLA, CA 92037-1300
Phone: (858) 657-6879
Fax: (858) 657-6873
After Hours Phone: (858)
657-6879
Provider Gender: Female
License number: PT295301
NPI: 1942780424
Provider English Spoken: Yes
Provider Language(s) Spoken:
Vietnamese
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MAROLLA, ALICE R

Provider ID: 241145
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # LLD
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: PT296117
NPI: 1477018729
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MCCULLOUGH, KERRY A

Provider ID: 258395
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # LLD
LA JOLLA, CA 92037-1300

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D. Directorio de proveedores de atención especializada

Phone: (858) 657-6879
Fax: (858) 657-6873
After Hours Phone: (858)
657-6879

Provider Gender: Female
License number: PT34541
NPI: 1780756262

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MITCHELL, JEFFREY A

Provider ID: 84286
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-6879
Fax: (858) 657-6873
After Hours Phone: (858)
657-6879

Provider Gender: Male
License number: PT37484
NPI: 1497827638
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MOELLER, LISA K

Provider ID: 258404
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # LLD
LA JOLLA, CA 92037-1300

Phone: (858) 657-6879
Fax: (858) 657-6873
After Hours Phone: (858)
657-6879
Provider Gender: Female
License number: PT18807
NPI: 1033664677
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

NALBANDIAN, SARAH

Provider ID: 210312
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # LLD
LA JOLLA, CA 92037-1300

Phone: (855) 543-0333
Fax: (858) 857-1809
After Hours Phone: (855)
543-0333
Provider Gender: Female
License number: PT295291
NPI: 1871069922
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

NUTHALL, KAITLIN M

Provider ID: 129198
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:

After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: PT291757
NPI: 1992210090
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr, Sharp Memorial
Hospital
Medi-Cal Open Panel: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

NUTHALL, KAITLIN M

Provider ID: 202327
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: PT291757
NPI: 1992210090
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

NUTHALL, KAITLIN M

Provider ID: 258431
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # LLD

LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: PT291757
NPI: 1992210090
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

OBISPO MCQUERRY, MICHELLE A

Provider ID: 258380
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # LLD
LA JOLLA, CA 92037-1300
Phone: (858) 657-6879
Fax: (858) 657-6873
After Hours Phone: (858)
657-6879
Provider Gender: Female
License number: PT38043
NPI: 1962769075
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

RUDD, CHRISTOPHER D

Provider ID: 207559
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: PT291997
NPI: 1831539337
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

RUDD, CHRISTOPHER D

Provider ID: 258372
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # LLD

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D. Directorio de proveedores de atención especializada

LA JOLLA, CA 92037-1300
 Phone: (855) 543-0333
 Fax: (858) 657-6873
 After Hours Phone: (855) 543-0333
 Provider Gender: Male
 License number: PT291997
 NPI: 1831539337
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

SANO, NISHIKI

Provider ID: 276719
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9400 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: PT296276
 NPI: 1497399091
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

SKINNER, NICOLE J

Provider ID: 206546
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: PT18043
 NPI: 1386964997
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

TRIMM, CASSIDY M

Provider ID: 122382
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300
 Phone: (855) 543-0333
 Fax:
 After Hours Phone: (855) 543-0333
 Provider Gender: Male
 License number: PT293496
 NPI: 1740708478
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

TRIMM, CASSIDY M

Provider ID: 258442
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (855) 543-0333
 Fax: (858) 657-6873
 After Hours Phone: (855) 543-0333
 Provider Gender: Male
 License number: PT293496
 NPI: 1740708478
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

TRIMM, CASSIDY M

Provider ID: 258443
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # LLD
LA JOLLA, CA 92037-1300
Phone: (855) 543-0333
Fax: (858) 657-6873
After Hours Phone: (855)

543-0333
Provider Gender: Male
License number: PT293496
NPI: 1740708478
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

VASQUEZ, BENJAMIN P

Provider ID: 128896
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: PT294934
NPI: 1568938413
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

VASQUEZ, BENJAMIN P

Provider ID: 200968
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:

After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: PT294934
NPI: 1568938413
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

VASQUEZ, BENJAMIN P

Provider ID: 258480
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # LLD
LA JOLLA, CA 92037-1300
Phone: (858) 657-6879
Fax: (858) 657-6873
After Hours Phone: (858)

657-6879
Provider Gender: Male
License number: PT294934
NPI: 1568938413
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

WILLIAMS, STACY M

Provider ID: 258496
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # LLD

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

LA JOLLA, CA 92037-1300
Phone: (858) 657-6879
Fax: (858) 657-6873
After Hours Phone: (858) 657-6879
Provider Gender: Female
License number: PT37862
NPI: 1689962169
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

YU, AUDRINE A

Provider ID: 128619
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: PT295026
NPI: 1639271208
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):

No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

YU, AUDRINE A
Provider ID: 258481
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # LLD
LA JOLLA, CA 92037-1300
Phone: (858) 657-6879
Fax: (858) 657-6873
After Hours Phone: (858) 657-6879
Provider Gender: Female
License number: PT295026
NPI: 1639271208
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

RHEUMATOLOGY

CEPONIS, ARNOLDAS

Provider ID: 65137
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # 2B
LA JOLLA, CA 92037-1300

Phone: (858) 249-2500
Fax:
After Hours Phone: (858) 249-2500
Provider Gender: Male
License number: A106525
NPI: 1144423039
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CORR, MARY P

Provider ID: 64854
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Female
License number: G61357
NPI: 1255389417
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FIRESTEIN, GARY S

Provider ID: 65169
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # 2B
LA JOLLA, CA 92037-1300
Phone: (858) 249-2500
Fax:
After Hours Phone: (858)
249-2500
Provider Gender: Male
License number: G46824
NPI: 1699790808
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GINSBERG, MARK H

Provider ID: 64885
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

Phone: (858) 657-7000
Fax:
After Hours Phone: (858)
657-7000
Provider Gender: Male
License number: G29521
NPI: 1659396778
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HEPBURN, BONNIE

Provider ID: 100920
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # LLB
(0912
LA JOLLA, CA 92037-1300
Phone: (858) 657-8440
Fax:
After Hours Phone: (858)
657-8440
Provider Gender: Female
License number: G83568
NPI: 1104972850
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None

American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KAVANAUGH, ARTHUR F

Provider ID: 65210
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # 2B
LA JOLLA, CA 92037-1300
Phone: (858) 249-2500
Fax:
After Hours Phone: (858)
249-2500
Provider Gender: Male
License number: C50307
NPI: 1679584486
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LEE, SUSAN J

Provider ID: 65230
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 657-6110
Fax: (858) 657-6191
After Hours Phone: (858) 657-6110
Provider Gender: Female
License number: A67596
NPI: 1386677045
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MIDDLETON, GREGORY D

Provider ID: 124158
Board Certified Specialty: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (858) 657-8200
Fax:
After Hours Phone: (858) 657-8200
Provider Gender: Male
License number: C54037
NPI: 1104891290
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MIDDLETON, GREGORY D

Provider ID: 65252
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-2347
Fax:
After Hours Phone: (619) 543-2347
Provider Gender: Male
License number: C54037
NPI: 1104891290
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SINGH, ABHA

Provider ID: 102136
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

Phone: (858) 657-6110
Fax:
After Hours Phone: (858) 657-6110
Provider Gender: Female
License number: A136137
NPI: 1710144423
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SPEECH PATHOLOGIST

DOCKTER, ANDI M

Provider ID: 248062
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # LLA
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Female
License number: SP26061
NPI: 1073150801
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

DOCKTER, ANDI M

Provider ID: 248064
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 657-8590
Fax:
After Hours Phone: (858)
657-8590
Provider Gender: Female
License number: SP26061
NPI: 1073150801
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LINNEMEYER, KRISTEN E

Provider ID: 83703
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

Phone: (858) 657-6879
Fax: (858) 657-6873
After Hours Phone: (858)
657-6879
Provider Gender: Female
License number: SP21053
NPI: 1013070085
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

UNGER, LINDSEY A

Provider ID: 265338
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: SP20362
NPI: 1972936813
Provider English Spoken: Yes
Provider Language(s) Spoken:
Sign Language
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):

No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SURGERY CARDIOVASCULAR

BOYS, JOSHUA A

Provider ID: 243533
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7777
Fax:
After Hours Phone: (858)
657-7777
Provider Gender: Male
License number: A125954
NPI: 1114368990
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

COLETTA, JOELLE M

Provider ID: 210528
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR

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D. Directorio de proveedores de atención especializada

LA JOLLA, CA 92037-1300
 Phone: (619) 543-7777
 Fax:
 After Hours Phone: (619) 543-7777
 Provider Gender: Female
 License number: A55001
 NPI: 1447222377
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Green Hospital, Sharp Memorial Hospital, Ucsd Medical Ctr, Rady Childrens Hospital San Diego, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network, Ucsd Medical Group

GOLTS, EUGENE M
 Provider ID: 210077
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9434 MEDICAL CENTER DR FL 1
 LA JOLLA, CA 92037-1337
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A82530
 NPI: 1316000649
 Provider English Spoken: Yes
 Provider Language(s) Spoken:

Ukrainian
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Tri City Medical Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network, Ucsd Medical Group


GRAMINS, DANIEL L
 Provider ID: 210047
 Board Certified Specialty: Yes
 UCSD MEDICAL GROUP
 9434 MEDICAL CENTER DR FL 1
 LA JOLLA, CA 92037-1337
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: G79711
 NPI: 1164495750
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Tri City Medical Ctr, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM

Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group
MADANI, MICHAEL M
 Provider ID: 210286
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (619) 543-7777
 Fax:
 After Hours Phone: (619) 543-7777
 Provider Gender: Male
 License number: A67201
 NPI: 1518999069
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Tri City Medical Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network, Ucsd Medical Group

ONAITIS, MARK
 Provider ID: 210296
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503


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D. Directorio de proveedores de atención especializada

Phone: (858) 657-7777
 Fax: (858) 657-5058
 After Hours Phone: (858) 657-7777
 Provider Gender: Male
 License number: C144886
 NPI: 1841310638
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr, Tri City Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:  Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group


ONAITIS, MARK

Provider ID: 210297
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9434 MEDICAL CENTER DR # 1
 LA JOLLA, CA 92037-1337
 Phone: (858) 657-7777
 Fax: (858) 657-5058
 After Hours Phone: (858) 657-7777
 Provider Gender: Male
 License number: C144886
 NPI: 1841310638
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr, Tri City Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999

American Sign Language (ASL): No
 Accessibility:  Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group


POLLEMA, TRAVIS L

Provider ID: 210576
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9434 MEDICAL CENTER DR FL 1
 LA JOLLA, CA 92037-1337
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: 20A12742
 NPI: 1871752956
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No

Accessibility:  Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

PRETORIUS, GERT D

Provider ID: 210571
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300
 Phone: (619) 543-6886
 Fax:
 After Hours Phone: (619) 543-6886
 Provider Gender: Male
 License number: A113774
 NPI: 1629385836
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Afrikaans
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Tri City Medical Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:  Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network, Ucsd Medical Group

THISTLETHWAITE, PATRICIA A

Provider ID: 210505
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (619) 543-7777
 Fax:
 After Hours Phone: (619) 543-7777
 Provider Gender: Female
 License number: G84093
 NPI: 1831121789
 Provider English Spoken: Yes
 Provider Language(s) Spoken:

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D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego, Tri
City Medical Ctr, Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network, Ucsd Medical Group

Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

EISENSTEIN, SAMUEL G
Provider ID: 110352
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 657-7237
Fax: (858) 228-1731
After Hours Phone: (858)
657-7237
Provider Gender: Male
License number: A132251
NPI: 1194983932

NPI: 1043558653
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, University
Hsp Of San Diego Co
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SURGERY COLON SURGERY

BEIERMEISTER, KEITH A
Provider ID: 71996
Board Certified Specialty: Yes
HEALTH EXCEL IPA INC
9834 GENESEE AVE STE 201
LA JOLLA, CA 92037-1225
Phone: (858) 558-2272
Fax: (858) 558-2285
After Hours Phone: (858)
558-2272
Provider Gender: Male
License number: A125321
NPI: 1508002775
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LIU, SHANGLEI
Provider ID: 273364
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A128073

PARRY, LISA A
Provider ID: 278551
Board Certified Specialty: Yes
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A131297
NPI: 1235369067
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:

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D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Ucsd Medical Group

WORSEY, MICHAEL J

Provider ID: 102362
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9834 GENESEE AVE STE 201
LA JOLLA, CA 92037-1225
Phone: (858) 558-2272
Fax: (858) 558-2285
After Hours Phone: (858)
558-2272
Provider Gender: Male
License number: A69016
NPI: 1629091145
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 15/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

SURGERY CRITICAL CARE

ADAMS, LAURA M

Provider ID: 284408
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female

License number: A169184
NPI: 1144616541
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HIGGINSON, SARA M

Provider ID: 243003
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A123464
NPI: 1578852471

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Ucsd Medical Group

POTENZA, BRUCE M

Provider ID: 277299
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-7200
Fax:
After Hours Phone: (619)
543-7200
Provider Gender: Male
License number: G77333
NPI: 1548281496
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

TADLOCK, MATTHEW D

Provider ID: 272849
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: C54740
NPI: 1881666956
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

VENTRO, GEORGE J

Provider ID: 284419
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A169299
NPI: 1548604648
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Ucsd Medical Group
WEAVER, JESSICA L
Provider ID: 243240
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A163176
NPI: 1396044657
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SURGERY GENERAL VASCULAR

BANDYK, DENNIS F
Provider ID: 275339
Board Certified Specialty: No
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR
LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273

Provider Gender: Male
License number: G89003
NPI: 1649282039
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BANDYK, DENNIS F

Provider ID: 275340
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: G89003
NPI: 1649282039
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

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D. Directorio de proveedores de atención especializada

Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BANDYK, DENNIS F

Provider ID: 275341
Board Certified Specialty: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (888) 926-8273
Fax:
After Hours Phone: (888)
926-8273
Provider Gender: Male
License number: G89003
NPI: 1649282039
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BARLEBEN, ANDREW R

Provider ID: 275371
Board Certified Specialty: Yes
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273

Provider Gender: Male
License number: A99417
NPI: 1497936900
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BARLEBEN, ANDREW R

Provider ID: 275373
Board Certified Specialty: No
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR FL
1
LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A99417
NPI: 1497936900
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BUNKE, NISHA

Provider ID: 273130
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 410
LA JOLLA, CA 92037-1212
Phone: (858) 550-0330
Fax: (858) 550-0676
After Hours Phone: (858)
550-0330
Provider Gender: Female
License number: A101022
NPI: 1891812962
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

HOWE, STEVEN C

Provider ID: 206760
Board Certified Specialty: No
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR FL
1
LA JOLLA, CA 92037-1337

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>Phone: (858) 657-7777 Fax: (858) 657-5058 After Hours Phone: (858) 657-7777 Provider Gender: Male License number: G79076 NPI: 1497702740 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Tri City Medical Ctr Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group</p>	<p>Min/Max Age: None American Sign Language (ASL): No Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:</p>	<p>9434 MEDICAL CENTER DR FL 1 LA JOLLA, CA 92037-1337 Phone: (800) 926-8273 Fax: After Hours Phone: (800) 926-8273 Provider Gender: Male License number: 20A16931 NPI: 1770742264 Provider English Spoken: Yes Provider Language(s) Spoken: Arabic Cultural Competency: No Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group</p>
<p>LANE, JOHN S Provider ID: 83682 Board Certified Specialty: Yes UCSD MEDICAL GROUP 9434 MEDICAL CENTER DR FL 1 LA JOLLA, CA 92037-1337 Phone: (800) 926-8273 Fax: After Hours Phone: (800) 926-8273 Provider Gender: Male License number: G81602 NPI: 1043390172 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, University Of California Irvine Med Ctr Medi-Cal Open Panel: No</p>	<p>LUCAS, SARAH P Provider ID: 268031 Board Certified Specialty: No HEALTH EXCEL IPA INC 9850 GENESEE AVE STE 410 LA JOLLA, CA 92037-1212 Phone: (858) 550-0330 Fax: (888) 550-0676 After Hours Phone: (858) 550-0330 Provider Gender: Female License number: A155280 NPI: 1952537326 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Health Excel Ipa Inc</p>	<p>AL-NOURI, OMAR Provider ID: 211905 Board Certified Specialty: No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 Phone: (800) 926-8273 Fax: After Hours Phone: (800) 926-8273 Provider Gender: Male License number: 20A16931 NPI: 1770742264 Provider English Spoken: Yes Provider Language(s) Spoken: Arabic Cultural Competency: No</p>
<hr/> <p>SURGERY GENERAL</p> <hr/>		
<p>AL-NOURI, OMAR Provider ID: 211904 Board Certified Specialty: No UCSD MEDICAL GROUP</p>		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

ARMANI, AVA

Provider ID: 118845
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8200
Fax:
After Hours Phone: (858) 657-8200
Provider Gender: Female
License number: A118231
NPI: 1861759383
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Medical Ctr At Ucsf, Ucsf Medical Center At Mission Bay, Ucsf Medical Center At Mount Zion, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Ucsd Medical Group
ARMANI, AVA
Provider ID: 282142
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6100
Fax:
After Hours Phone: (858) 822-6100
Provider Gender: Female
License number: A118231
NPI: 1861759383
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Medical Ctr At Ucsf, Ucsf Medical Center At Mission Bay, Ucsf Medical Center At Mount Zion, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BANDYK, DENNIS F

Provider ID: 65120
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273

Provider Gender: Male
License number: G89003
NPI: 1649282039
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BANDYK, DENNIS F

Provider ID: 65370
Board Certified Specialty: No
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR FL 1
LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: G89003
NPI: 1649282039
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W

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D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

BARLEBEN, ANDREW R

Provider ID: 83206
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9434 MEDICAL CENTER DR FL 1
 LA JOLLA, CA 92037-1337
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A99417
 NPI: 1497936900
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

BAUMGARTNER, JOEL M

Provider ID: 64407
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503

Phone: (858) 822-6100
 Fax: (858) 534-4813
 After Hours Phone: (858) 822-6100
 Provider Gender: Male
 License number: A121105
 NPI: 1679629257
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

BHOYRUL, SUNIL

Provider ID: 245411
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 9850 GENESEE AVE STE 570
 LA JOLLA, CA 92037-1229
 Phone: (858) 457-4917
 Fax: (858) 646-0017
 After Hours Phone: (858) 457-4917
 Provider Gender: Male
 License number: A61911
 NPI: 1366559320
 Provider English Spoken: Yes
 Provider Language(s) Spoken: French, Hindi
 Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):

No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Health Excel Ipa Inc

BLAIR, SARAH L

Provider ID: 64410
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
 Phone: (858) 822-6100
 Fax:
 After Hours Phone: (858) 822-6100
 Provider Gender: Female
 License number: G85042
 NPI: 1710918008
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

BORTZ, PASCAL G

Provider ID: 274087
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 9850 GENESEE AVE STE 570
 LA JOLLA, CA 92037-1229

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 480-1634
Fax: (858) 457-3287
After Hours Phone: (619) 480-1634
Provider Gender: Male
License number: A139519
NPI: 1821330796
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 16/100
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

BOUVET, MICHAEL

Provider ID: 64412
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6191
Fax:
After Hours Phone: (858) 822-6191
Provider Gender: Male
License number: G69035
NPI: 1033177803
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:
CLARY, BRYAN M
Provider ID: 202568
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: G134895
NPI: 1982787131
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

COIMBRA, RAUL S

Provider ID: 64851
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Male
License number: A74573
NPI: 1356372791
Provider English Spoken: Yes
Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

COOPER, MATTHEW D

Provider ID: 245536
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 570
LA JOLLA, CA 92037-1229
Phone: (858) 457-4917
Fax: (858) 646-0017
After Hours Phone: (858) 457-4917
Provider Gender: Male
License number: A133250
NPI: 1528353190
Provider English Spoken: Yes
Provider Language(s) Spoken: Khmer
Cultural Competency: No
Hospital Affiliation: Stanford Health Care, Scripps Memorial Hospital
Medi-Cal Open Panel: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: 18/100

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

GOLTS, EUGENE M

Provider ID: 65177

Board Certified Specialty: No
UCSD MEDICAL GROUP

9350 CAMPUS POINT DR # LLB
(0912

LA JOLLA, CA 92037-1300

Phone: (858) 657-8440

Fax:

After Hours Phone: (858)
657-8440

Provider Gender: Male

License number: A82530

NPI: 1316000649

Provider English Spoken: Yes

Provider Language(s) Spoken:

Ukrainian

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital, Tri City
Medical Ctr, Ucsd Medical Ctr,
Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network, Ucsd Medical Group

HORGAN, SANTIAGO

Provider ID: 64912

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (619) 471-0701

Fax: (619) 543-3763

After Hours Phone: (619)
471-0701

Provider Gender: Male

License number: SFP11

NPI: 1932297231

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA
9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

HORGAN, SANTIAGO

Provider ID: 65193

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (619) 471-0701

Fax: (619) 543-7480

After Hours Phone: (619)

471-0701

Provider Gender: Male

License number: SFP11

NPI: 1932297231

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

JACOBSEN, GARTH R

Provider ID: 201728

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (619) 471-0755

Fax:

After Hours Phone: (619)

471-0755

Provider Gender: Male

License number: A99668

NPI: 1265649966

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Email:
Medical Group(s):
IPA: Ucsd Medical Group

JACOBSEN, GARTH R

Provider ID: 65200
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-6886
Fax:
After Hours Phone: (619)
543-6886
Provider Gender: Male
License number: A99668
NPI: 1265649966
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KELLY, KAITLYN J

Provider ID: 83648
Board Certified Specialty: Yes
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6100
Fax: (858) 312-7010
After Hours Phone: (858)
822-6100
Provider Gender: Female

License number: A124613
NPI: 1124272430
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LOWY, ANDREW M

Provider ID: 64448
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6100
Fax: (858) 822-6192
After Hours Phone: (858)
822-6100
Provider Gender: Male
License number: G87988
NPI: 1346218179
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA:

MADANI, MICHAEL M

Provider ID: 64963
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858)
657-7000
Provider Gender: Male
License number: A67201
NPI: 1518999069
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital, Tri City
Medical Ctr, Ucsd Medical Ctr,
Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network, Ucsd Medical Group

MEKEEL, KRISTIN L

Provider ID: 65246
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 543-6886
Fax:
After Hours Phone: (619) 543-6886
Provider Gender: Female
License number: C54096
NPI: 1104861947
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MICHELOTTI, MARCOS J

Provider ID: 65251
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8200
Fax:
After Hours Phone: (858) 657-8200
Provider Gender: Male
License number: A107144
NPI: 1275711590
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Loma Linda University Childrens Hospital, Loma Linda University Med Ctr,

Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

OWENS, ERIK L

Provider ID: 65003
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Male
License number: G84727
NPI: 1578506523
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

PARRY, LISA A

Provider ID: 110404
Board Certified Specialty: No
UCSD MEDICAL GROUP

3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A131297
NPI: 1235369067
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

RAMAMOORTHY, SONIA L

Provider ID: 65022
Board Certified Specialty: Yes
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Female
License number: A65709
NPI: 1801812656
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

RASCHKE, ERIC T

Provider ID: 270298
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: 20A17495
NPI: 1316386659
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SANTORELLI, JARRETT E

Provider ID: 272304
Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A161482
NPI: 1033529201
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SEDRAK, MICHAEL F

Provider ID: 84776
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 471-0701
Fax:
After Hours Phone: (619)
471-0701
Provider Gender: Male
License number: A82582
NPI: 1750464111
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None

American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SICKLICK, JASON K

Provider ID: 64480
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6100
Fax:
After Hours Phone: (858)
822-6100
Provider Gender: Male
License number: A112500
NPI: 1487700779
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

VEERAPONG, JULA

Provider ID: 119378
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 822-6173
Fax:
After Hours Phone: (858) 822-6173
Provider Gender: Female
License number: C149942
NPI: 1801039490
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Sharp Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

WALLACE, ANNE M

Provider ID: 65087
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 294-3746
Fax:
After Hours Phone: (619) 294-3746
Provider Gender: Female
License number: G73000
NPI: 1699732941
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):

No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

WALLACE, ANNE M

Provider ID: 65318
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-6886
Fax:
After Hours Phone: (619) 543-6886
Provider Gender: Female
License number: G73000
NPI: 1699732941
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

WHITE, REBEKAH R

Provider ID: 110739
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503

Phone: (858) 822-2124
Fax:
After Hours Phone: (858) 822-2124
Provider Gender: Female
License number: C143450
NPI: 1750400784
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

YANG, GENE

Provider ID: 280568
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A169156
NPI: 1568807089
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group</p>	<p>9400 CAMPUS POINT DR LA JOLLA, CA 92093-1350 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Male <i>License number:</i> A154951 <i>NPI:</i> 1578058665 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group</p>	<p>Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>
<hr/> SURGERY HAND ORTHOPEDIC <hr/>		
<p>STEPHENSON, SAMUEL K <i>Provider ID:</i> 284935 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Male <i>License number:</i> A154951 <i>NPI:</i> 1578058665 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group</p>	<p>STEPHENSON, SAMUEL K <i>Provider ID:</i> 284936 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP</p>	<p>SURGERY NEUROLOGICAL</p>
<p>STEPHENSON, SAMUEL K <i>Provider ID:</i> 284936 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP</p>	<p>ABRAMS, REID <i>Provider ID:</i> 124050 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (858) 657-7000 <i>Fax:</i> <i>After Hours Phone:</i> (858) 657-7000 <i>Provider Gender:</i> Male <i>License number:</i> G59829 <i>NPI:</i> 1548202245 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical</p>	<p>BARBA, DAVID <i>Provider ID:</i> 275678 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9350 CAMPUS POINT DR # 2A LA JOLLA, CA 92037-1300 <i>Phone:</i> (619) 543-5540 <i>Fax:</i> (619) 287-7663 <i>After Hours Phone:</i> (619) 543-5540 <i>Provider Gender:</i> Male <i>License number:</i> G42092 <i>NPI:</i> 1093730251 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Scripps Memorial Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i></p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Email:
Medical Group(s):
IPA: Ucsd Medical Group

BARBA, DAVID

Provider ID: 65122
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-5540
Fax: (619) 287-7663
After Hours Phone: (619)
543-5540
Provider Gender: Male
License number: G42092
NPI: 1093730251
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr, Ucsd La Jolla
John Sally Thornton, Scripps
Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BEAUMONT, THOMAS L

Provider ID: 214126
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503

Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A159281
NPI: 1497067573
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BEN-HAIM, SHARONA

Provider ID: 244070
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A124866
NPI: 1942469663
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hebrew, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BLASKIEWICZ, DONALD J

Provider ID: 270282
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A109748
NPI: 1215176839
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Palomar
Health Downtown Campus, Ucsd
La Jolla John Sally Thornton,
Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CIACCI, JOSEPH D

Provider ID: 65149
Board Certified Specialty: No
UCSD MEDICAL GROUP

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-6886
Fax:
After Hours Phone: (619)
543-6886
Provider Gender: Male
License number: A50933
NPI: 1992725675
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton, Childrens Hosp And
Resrch Ctr At Oakland, Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

COUFAL, FRANK J

Provider ID: 65701
Board Certified Specialty: Yes
HEALTH EXCEL IPA INC
9834 GENESEE AVE STE 411
LA JOLLA, CA 92037-1264
Phone: (858) 677-1755
Fax: (858) 677-1771
After Hours Phone: (858)
677-1755
Provider Gender: Male
License number: A50766
NPI: 1760495303
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps

Memorial Hospital, Alvarado
Hospital Llc, Encompass Health
Rehabilitation Hospital Of Tustin,
Scripps Memorial Hospital
Encinitas, Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

KHALESSI, ALEXANDER A

Provider ID: 244036
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A95850
NPI: 1073786661
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton, Rady Childrens
Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network, Ucsd Medical Group

KHALESSI, ALEXANDER A

Provider ID: 65212
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8630
Fax: (619) 543-6832
After Hours Phone: (858)
657-8630
Provider Gender: Male
License number: A95850
NPI: 1073786661
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton, Rady Childrens
Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network, Ucsd Medical Group

MARSHALL, LAWRENCE F

Provider ID: 244149
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: C36547
NPI: 1750306171
Provider English Spoken: Yes
Provider Language(s) Spoken: German, Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MARSHALL, LAWRENCE F

Provider ID: 65245
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: C36547
NPI: 1750306171
Provider English Spoken: Yes
Provider Language(s) Spoken: German, Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

NGUYEN, ANDREW D

Provider ID: 244139
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A91563
NPI: 1720216542
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish, Vietnamese
Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus, Ucsd Medical Ctr, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

OLSON, SCOTT E

Provider ID: 244054
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A83715
NPI: 1376568659
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Palomar Health Downtown Campus, Ucsd Medical Ctr, Pomerado Hospital, Palomar Medical Center, Scripps Green Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

OLSON, SCOTT E

Provider ID: 244055
Board Certified Specialty: No
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR FL 1
LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A83715
NPI: 1376568659
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

John Sally Thornton, Tri City Medical Ctr, Palomar Health Downtown Campus, Ucsd Medical Ctr, Pomerado Hospital, Palomar Medical Center, Scripps Green Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

OSORIO, JOSEPH A
Provider ID: 242005
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A128616
NPI: 1437416591
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Ucsd Medical Group
OSORIO, JOSEPH A
Provider ID: 242006
Board Certified Specialty: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A128616
NPI: 1437416591
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

PHAM, MARTIN H
Provider ID: 244159
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A121590
NPI: 1609130921

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SANTIAGO DIEPPA, DAVID R
Provider ID: 271118
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A132049
NPI: 1083984983
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

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D. Directorio de proveedores de atención especializada

IPA: Ucsd Medical Group

SANTIAGO DIEPPA, DAVID R

Provider ID: 271119

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A132049

NPI: 1083984983

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

SCHWARTZ, MARC S

Provider ID: 244022

Board Certified Specialty: Yes

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: G86573

NPI: 1508960188

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Good

Samaritan Hospital Los Angeles,

Valley Presbyterian Hosp, Martin

Luther King Jr Community

Hospital, Huntington Memorial

Hospital, Providence Saint Johns

Health Center, Ucsd Medical Ctr,

Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

SCHWARTZ, MARC S

Provider ID: 244023

Board Certified Specialty: No

UCSD MEDICAL GROUP

3855 HEALTH SCIENCES DR

LA JOLLA, CA 92093-1503

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: G86573

NPI: 1508960188

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Good

Samaritan Hospital Los Angeles,

Ucsd Medical Ctr, Ucsd La Jolla

John Sally Thornton, Valley

Presbyterian Hosp, Martin Luther

King Jr Community Hospital,

Huntington Memorial Hospital,

Providence Saint Johns Health
Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

STEINBERG, JEFFREY A

Provider ID: 271100

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A131786

NPI: 1982044715

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

STEINBERG, JEFFREY A

Provider ID: 271101

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A131786
NPI: 1982044715
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

TAYLOR, WILLIAM R

Provider ID: 65309
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-5540
Fax:
After Hours Phone: (619)
543-5540
Provider Gender: Male
License number: G72205
NPI: 1528084522
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No

Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

TUNG, HOWARD

Provider ID: 244083
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-5540
Fax:
After Hours Phone: (619)
543-5540
Provider Gender: Male
License number: G58235
NPI: 1538153341
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Rady
Childrens Hospital San Diego,
Scripps Green Hospital, Tri City
Medical Ctr, Palomar Medical
Center, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

TUNG, HOWARD

Provider ID: 65313

Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-6886
Fax:
After Hours Phone: (619)
543-6886
Provider Gender: Male
License number: G58235
NPI: 1538153341
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Rady
Childrens Hospital San Diego,
Scripps Green Hospital, Tri City
Medical Ctr, Palomar Medical
Center, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

U, HOI S

Provider ID: 244133
Board Certified Specialty: Yes
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: G27898
NPI: 1164468146
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken: *Medi-Cal Open Panel:* Yes
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

YOO, FRANK K , MD

Provider ID: 248120
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 9850 GENESEE AVE STE 560
 LA JOLLA, CA 92037-1229
Phone: (858) 909-9033
Fax: (858) 429-4009
After Hours Phone: (858) 909-9033
Provider Gender: Male
License number: G86513
NPI: 1295774545
Provider English Spoken: Yes
Provider Language(s) Spoken: Korean, Spanish, Telugu, Vietnamese
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas, Tri City Medical Ctr, Palomar Health Downtown Campus, Pomerado Hospital, Alvarado Hospital Llc, Paradise Valley Hospital, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Scripps Mercy Hospital

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

YOO, FRANK K

Provider ID: 91795
Board Certified Specialty: No
 CALIFORNIA CANCER ASSOCS FOR RESEARCH AND EXCELL
 9850 GENESEE AVE STE 560
 LA JOLLA, CA 92037-1229
Phone: (858) 909-9033
Fax: (858) 429-4009
After Hours Phone: (858) 909-9033
Provider Gender: Male
License number: G86513
NPI: 1295774545
Provider English Spoken: Yes
Provider Language(s) Spoken: Korean, Spanish, Telugu, Vietnamese
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas, Tri City Medical Ctr, Palomar Health Downtown Campus, Pomerado Hospital, Alvarado Hospital Llc, Paradise Valley Hospital, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes

Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

SURGERY ORTHOPEDIC

ALLEN, RICHARD T

Provider ID: 124053
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9400 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
Phone: (858) 657-8200
Fax:
After Hours Phone: (858) 657-8200
Provider Gender: Male
License number: A83513
NPI: 1962660175
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ALLEN, RICHARD T

Provider ID: 65115

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8200
Fax: (858) 657-8235
After Hours Phone: (858) 657-8200
Provider Gender: Male
License number: A83513
NPI: 1962660175
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ATTENELLO, JOHN D

Provider ID: 271083
Board Certified Specialty: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A166979
NPI: 1629456553
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd

Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

ATTENELLO, JOHN D

Provider ID: 271084
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A166979
NPI: 1629456553
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BALL, SCOTT T

Provider ID: 124052
Board Certified Specialty: No

UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (858) 657-8200
Fax:
After Hours Phone: (858) 657-8200
Provider Gender: Male
License number: A75221
NPI: 1952325318
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BALL, SCOTT T

Provider ID: 65119
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8200
Fax: (619) 543-7480
After Hours Phone: (858) 657-8200
Provider Gender: Male
License number: A75221
NPI: 1952325318
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BROWN, RICHARD A

Provider ID: 55521
Board Certified Specialty: No
TORREY PINES
ORTHOPAEDIC MED GRP INC
9850 GENESEE AVE STE 210
LA JOLLA, CA 92037-1206
Phone: (858) 535-1075
Fax: (858) 453-9810
After Hours Phone: (858)
535-1075
Provider Gender: Male
License number: A43071
NPI: 1477571958
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Mammoth
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

BUKATA, SUSAN V

Provider ID: 277947
Board Certified Specialty: No

UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: C55109
NPI: 1932140639
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CHANG, DOUGLAS G

Provider ID: 124123
Board Certified Specialty: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (858) 657-8200
Fax:
After Hours Phone: (858)
657-8200
Provider Gender: Male
License number: A77281
NPI: 1962450031
Provider English Spoken: Yes
Provider Language(s) Spoken:
German
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CHANG, DOUGLAS G

Provider ID: 65139
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-2347
Fax:
After Hours Phone: (619)
543-2347
Provider Gender: Male
License number: A77281
NPI: 1962450031
Provider English Spoken: Yes
Provider Language(s) Spoken:
German
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CHIARAPPA, FRANK E

Provider ID: 244460
Board Certified Specialty: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A164466
NPI: 1932536828
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CHOI, JIHOON

Provider ID: 284786
Board Certified Specialty: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (800) 926-8273
Fax: (888) 539-8181
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A151613
NPI: 1285097741
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd

Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CHOI, JIHOON

Provider ID: 284787
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A151613
NPI: 1285097741
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CIDAMBI, KRISHNA R

Provider ID: 124274
Board Certified Specialty: No

UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 865-7820
Fax:
After Hours Phone: (858)
865-7820
Provider Gender: Male
License number: A118350
NPI: 1275836959
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Tamil
Cultural Competency: No
Hospital Affiliation: Providence St
Joseph Hospital, Hoag
Orthopedic Institute, Ucsd
Medical Ctr, Ucsd La Jolla John
Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CIDAMBI, KRISHNA R

Provider ID: 124275
Board Certified Specialty: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (858) 657-8235
Fax:
After Hours Phone: (858)
657-8235
Provider Gender: Male
License number: A118350
NPI: 1275836959
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Spanish, Tamil
Cultural Competency: No
Hospital Affiliation: Providence St Joseph Hospital, Hoag Orthopedic Institute, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

COVEY, DANA C
Provider ID: 104619
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-8200
Fax: (619) 543-7480
After Hours Phone: (858) 657-8200
Provider Gender: Male
License number: G89432
NPI: 1780651794

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA:
DALSTROM, DAVID J
Provider ID: 125855
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9400 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
Phone: (858) 657-8200
Fax:
After Hours Phone: (858) 657-8200
Provider Gender: Male
License number: A112715
NPI: 1942333075
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Mammoth Hospital, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FLINT, JAMES H
Provider ID: 203177
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9400 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A156864

NPI: 1629239140
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

GARFIN, STEVEN R
Provider ID: 123783
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9400 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
Phone: (858) 657-8200
Fax:
After Hours Phone: (858) 657-8200
Provider Gender: Male
License number: G29309
NPI: 1679515829
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:

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D. Directorio de proveedores de atención especializada

Medical Group(s):

IPA:

GOEB, YANNICK L

Provider ID: 284792

Board Certified Specialty: No

UCSD MEDICAL GROUP

9400 CAMPUS POINT DR

LA JOLLA, CA 92093-1350

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A170529

NPI: 1730542747

Provider English Spoken: Yes

Provider Language(s) Spoken:

German, Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

GOEB, YANNICK L

Provider ID: 284793

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A170529

NPI: 1730542747

Provider English Spoken: Yes

Provider Language(s) Spoken:

German, Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

GONZALES, FRANCIS B

Provider ID: 123851

Board Certified Specialty: No

UCSD MEDICAL GROUP

9400 CAMPUS POINT DR

LA JOLLA, CA 92093-1350

Phone: (858) 657-8200

Fax:

After Hours Phone: (858)

657-8200

Provider Gender: Male

License number: A112963

NPI: 1841476546

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

GONZALES, FRANCIS B

Provider ID: 65178

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 657-8200

Fax: (619) 543-7480

After Hours Phone: (858)

657-8200

Provider Gender: Male

License number: A112963

NPI: 1841476546

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

HACKLEY, DAVID R

Provider ID: 127803

Board Certified Specialty: No

HEALTH EXCEL IPA INC

9850 GENESEE AVE STE 210

LA JOLLA, CA 92037-1206

Phone: (858) 535-1075

Fax: (858) 453-9810

After Hours Phone: (858)

535-1075

Provider Gender: Male

License number: G75801

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

NPI: 1790703288
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Mammoth Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

HENTZEN, ERIC R

Provider ID: 65190
Board Certified Specialty: Yes
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8200
Fax: (619) 543-7480
After Hours Phone: (858) 657-8200
Provider Gender: Male
License number: A83117
NPI: 1245411180
Provider English Spoken: Yes
Provider Language(s) Spoken: German, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA:
KULIDJIAN, ANNA A
Provider ID: 65224
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8200
Fax: (619) 543-7480
After Hours Phone: (858) 657-8200
Provider Gender: Female
License number: A97060
NPI: 1215183066
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MEUNIER, MATTHEW J

Provider ID: 126580
Board Certified Specialty: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (858) 657-8200
Fax:
After Hours Phone: (858) 657-8200
Provider Gender: Male
License number: A72975

NPI: 1265470553
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MEUNIER, MATTHEW J

Provider ID: 65248
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8200
Fax: (619) 543-7480
After Hours Phone: (858) 657-8200
Provider Gender: Male
License number: A72975
NPI: 1265470553
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MEYER, ROBERT S

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider ID: 65250
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8200
Fax: (619) 543-7480
After Hours Phone: (858)
657-8200
Provider Gender: Male
License number: G76677
NPI: 1316997646
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MITCHELL, JOSEPH

Provider ID: 271139
Board Certified Specialty: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A167659
NPI: 1699161471
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd

Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MITCHELL, JOSEPH

Provider ID: 271140
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A167659
NPI: 1699161471
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MOHLENBROCK, WILLIAM C

Provider ID: 127870
Board Certified Specialty: Yes

HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 210
LA JOLLA, CA 92037-1206
Phone: (858) 535-1075
Fax: (858) 453-9810
After Hours Phone: (858)
535-1075
Provider Gender: Male
License number: C29014
NPI: 1053334243
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

ROBERTSON, CATHERINE M

Provider ID: 65288
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8200
Fax: (619) 543-7480
After Hours Phone: (858)
657-8200
Provider Gender: Female
License number: A87544
NPI: 1952565780
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical

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D. Directorio de proveedores de atención especializada

<p>Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA:</p>	<p>9350 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (858) 657-8200 <i>Fax:</i> (619) 543-7480 <i>After Hours Phone:</i> (858) 657-8200 <i>Provider Gender:</i> Female <i>License number:</i> A60259 <i>NPI:</i> 1740206747 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> German <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA:</p>	<p><i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Ucsd Medical Group</p>
<p>SCHWARTZ, ALEXANDRA K <i>Provider ID:</i> 124198 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9400 CAMPUS POINT DR LA JOLLA, CA 92093-1350 <i>Phone:</i> (858) 657-8200 <i>Fax:</i> <i>After Hours Phone:</i> (858) 657-8200 <i>Provider Gender:</i> Female <i>License number:</i> A60259 <i>NPI:</i> 1740206747 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> German <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA:</p>	<p>SULLIVAN, THOMAS B <i>Provider ID:</i> 285245 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9400 CAMPUS POINT DR LA JOLLA, CA 92093-1350 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Male <i>License number:</i> A138132 <i>NPI:</i> 1437565488 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> German <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Ucsd Medical Group</p>	<p>SULLIVAN, THOMAS B <i>Provider ID:</i> 285246 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Male <i>License number:</i> A138132 <i>NPI:</i> 1437565488 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> German <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Ucsd Medical Group</p>
<p>SCHWARTZ, ALEXANDRA K <i>Provider ID:</i> 65297 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP</p>	<p>SULLIVAN, THOMAS B <i>Provider ID:</i> 285245 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9400 CAMPUS POINT DR LA JOLLA, CA 92093-1350 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Male <i>License number:</i> A138132 <i>NPI:</i> 1437565488 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> German <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes</p>	<p>SWENSON, FRANK C <i>Provider ID:</i> 127822 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 9850 GENESEE AVE STE 210</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

LA JOLLA, CA 92037-1206
Phone: (858) 535-1075
Fax: (858) 453-9810
After Hours Phone: (858) 535-1075
Provider Gender: Male
License number: G47541
NPI: 1942228432
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

THUNDER, RICHARD M

Provider ID: 108882
Board Certified Specialty: No
TORREY PINES
ORTHOPAEDIC MED GRP INC
9850 GENESEE AVE STE 210
LA JOLLA, CA 92037-1206
Phone: (858) 535-1075
Fax: (858) 453-9810
After Hours Phone: (858) 535-1075
Provider Gender: Male
License number: A72768
NPI: 1780602276
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Scripps

Memorial Hospital, Mammoth Hospital
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

VITALE, KENNETH C

Provider ID: 104657
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8200
Fax: (619) 543-7480
After Hours Phone: (858) 657-8200
Provider Gender: Male
License number: C132964
NPI: 1730176868
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ZLOMISLIC, VINKO

Provider ID: 124281
Board Certified Specialty: No

UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8200
Fax: (619) 543-7480
After Hours Phone: (858) 657-8200
Provider Gender: Male
License number: A112819
NPI: 1346351509
Provider English Spoken: Yes
Provider Language(s) Spoken: Serbo-Croatian, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ZLOMISLIC, VINKO

Provider ID: 124285
Board Certified Specialty: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (858) 657-8200
Fax:
After Hours Phone: (858) 657-8200
Provider Gender: Male
License number: A112819
NPI: 1346351509
Provider English Spoken: Yes
Provider Language(s) Spoken: Serbo-Croatian, Spanish
Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SURGERY PLASTIC

CHAO, JAMES J

Provider ID: 65141
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-2347
Fax:
After Hours Phone: (619) 543-2347
Provider Gender: Male
License number: G85358
NPI: 1093740789
Provider English Spoken: Yes
Provider Language(s) Spoken: Chinese, Mandarin
Cultural Competency: No
Hospital Affiliation: Temecula Valley Hospital Inc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GOSMAN, AMANDA A

Provider ID: 64887
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax: (858) 966-4064
After Hours Phone: (858) 657-7000
Provider Gender: Female
License number: A96153
NPI: 1164436291
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

HINCHCLIFF, KATHARINE

Provider ID: 277289
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273

Provider Gender: Female
License number: A135631
NPI: 1346674561
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network, Ucsd Medical Group

KOLB, FREDERIC J

Provider ID: 246238
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: F39
NPI: 1790341832
Provider English Spoken: Yes
Provider Language(s) Spoken: French
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network, Ucsd Medical Group

MOFID, MEHRDAD M

Provider ID: 262291
Board Certified Specialty: Yes
HEALTH EXCEL IPA INC
4150 REGENTS PARK ROW
STE 300
LA JOLLA, CA 92037-1417
Phone: (858) 909-9000
Fax: (858) 909-9009
After Hours Phone: (858) 909-9000
Provider Gender: Male
License number: A83432
NPI: 1225244155
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Scripps Memorial Hospital, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ *Accessibility:* P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

REID, CHRISTOPHER M

Provider ID: 224796
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A122947
NPI: 1982964276
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network, Ucsd Medical Group

SURGERY THORACIC

COLETTA, JOELLE M

Provider ID: 64852
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Female
License number: A55001
NPI: 1447222377
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps

Green Hospital, Sharp Memorial Hospital, Ucsd Medical Ctr, Rady Childrens Hospital San Diego, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network, Ucsd Medical Group

HOWE, STEVEN C

Provider ID: 90049
Board Certified Specialty: No
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR FL 1
LA JOLLA, CA 92037-1337
Phone: (858) 657-7777
Fax: (858) 657-5058
After Hours Phone: (858) 657-7777
Provider Gender: Male
License number: G79076
NPI: 1497702740
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Tri City Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Email:
Medical Group(s):
IPA: Ucsd Medical Group

JAMIESON, STUART W

Provider ID: 65201
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-6886
Fax:
After Hours Phone: (619)
543-6886
Provider Gender: Male
License number: A35080
NPI: 1649203415
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital, Ucsd
Medical Ctr, Ucsd La Jolla John
Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KEARNS, MARK J

Provider ID: 274296
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

Phone: (858) 657-8817
Fax: (888) 539-8781
After Hours Phone: (858)
657-8817
Provider Gender: Male
License number: A158916
NPI: 1033683719
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Cedars Sinai
Medical Center, Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KEARNS, MARK J

Provider ID: 274297
Board Certified Specialty: No
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR FL
1
LA JOLLA, CA 92037-1337
Phone: (858) 647-8817
Fax: (858) 853-9878
After Hours Phone: (858)
647-8817
Provider Gender: Male
License number: A158916
NPI: 1033683719
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Cedars Sinai
Medical Center, Ucsd La Jolla
John Sally Thornton, Ucsd

Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

ONAITIS, MARK

Provider ID: 112339
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 657-7777
Fax:
After Hours Phone: (858)
657-7777
Provider Gender: Male
License number: C144886
NPI: 1841310638
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr, Tri City Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

POLLEMA, TRAVIS L

Provider ID: 99659
Board Certified Specialty: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR FL
1
LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: 20A12742
NPI: 1871752956
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

PRETORIUS, GERT D

Provider ID: 65019
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax: (619) 543-3604
After Hours Phone: (858)
657-7000
Provider Gender: Male
License number: A113774
NPI: 1629385836
Provider English Spoken: Yes
Provider Language(s) Spoken:
Afrikaans
Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego, Tri
City Medical Ctr, Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network, Ucsd Medical Group

RAMIREZ, ALFREDO R

Provider ID: 256390
Board Certified Specialty: No
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR FL
1
LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A101070
NPI: 1003829417
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: University
Hsp Of San Diego Co, Ucsd
Medical Ctr, Ucsd La Jolla John
Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SAKAKIBARA, NAOHIDE

Provider ID: 65291
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-7777
Fax:
After Hours Phone: (619)
543-7777
Provider Gender: Male
License number: A67153
NPI: 1588697916
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SIDERIS, ANTONIOS

Provider ID: 285652
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: A173526
NPI: 1134495336
Provider English Spoken: Yes
Provider Language(s) Spoken:
French, Greek, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SIDERIS, ANTONIOS

Provider ID: 285653
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A173526
NPI: 1134495336
Provider English Spoken: Yes
Provider Language(s) Spoken:
French, Greek, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group
SIDERIS, ANTONIOS
Provider ID: 285654
Board Certified Specialty: No
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR FL
1
LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A173526
NPI: 1134495336
Provider English Spoken: Yes
Provider Language(s) Spoken:
French, Greek, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SIDERIS, ANTONIOS
Provider ID: 285654
Board Certified Specialty: No
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR FL
1
LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A173526
NPI: 1134495336
Provider English Spoken: Yes
Provider Language(s) Spoken:
French, Greek, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

THISTLETHWAITE, PATRICIA A

Provider ID: 65311
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

Phone: (858) 657-7777
Fax: (619) 543-2652
After Hours Phone: (858)
657-7777
Provider Gender: Female
License number: G84093
NPI: 1831121789
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego, Tri
City Medical Ctr, Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network, Ucsd Medical Group

SURGICAL ONCOLOGY

BARONE, ROBERT M

Provider ID: 279697
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: G22669
NPI: 1528083573
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Sharp Memorial Hospital, Scripps Mercy Hospital, Scripps Memorial Hospital, Sharp Mary Birch Hosp For Women And Newborns
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HYAMS, DAVID M

Provider ID: 276537
Board Certified Specialty: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: G42387
NPI: 1992755391
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Desert Regional Med Ctr, Eisenhower Medical Ctr, John F Kennedy Memorial Hosp
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

RACE, ALICE J

Provider ID: 271831
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A169163
NPI: 1982086922
Provider English Spoken: Yes
Provider Language(s) Spoken: Mandarin
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

UROLOGY

ALBO, MICHAEL E

Provider ID: 65112
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

Phone: (619) 543-6886
Fax:
After Hours Phone: (619) 543-6886
Provider Gender: Male
License number: G81920
NPI: 1912938499
Provider English Spoken: Yes
Provider Language(s) Spoken: German, Spanish
Cultural Competency: No
Hospital Affiliation: Ronald Reagan Ucla Med Ctr, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ANTHONY, JULIAN N

Provider ID: 212451
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9834 GENESEE AVE STE 416
LA JOLLA, CA 92037-1264
Phone: (858) 458-0099
Fax: (858) 429-7935
After Hours Phone: (858) 458-0099
Provider Gender: Male
License number: A82316
NPI: 1841392552
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Paradise Valley

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital, Sharp Chula Vista Med Ctr, Sharp Memorial Hospital, Pomerado Hospital, Tri City Medical Ctr, Palomar Health Downtown Campus, Palomar Medical Center, Scripps Memorial Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

BASTUBA, MARTIN D

Provider ID: 212801
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 630
LA JOLLA, CA 92037-1217
Phone: (858) 657-0999
Fax: (619) 265-1429
After Hours Phone: (858) 657-0999
Provider Gender: Male
License number: G76872
NPI: 1790769016
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Alvarado Hospital Llc, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

BUTLER, PHILIP A

Provider ID: 205157
Board Certified Specialty: Yes
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 440
LA JOLLA, CA 92037-1212
Phone: (858) 453-5944
Fax: (858) 429-7295
After Hours Phone: (858) 453-5944
Provider Gender: Male
License number: G47129
NPI: 1184665911
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

Provider ID: 212801
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 630
LA JOLLA, CA 92037-1217
Phone: (858) 657-0999
Fax: (619) 265-1429
After Hours Phone: (858) 657-0999
Provider Gender: Male
License number: G76872
NPI: 1790769016
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Alvarado Hospital Llc, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

BUTLER, PHILIP A , MD

Provider ID: 65710
Board Certified Specialty: Yes
GENESIS HEALTHCARE PARTNERS PC
9850 GENESEE AVE STE 440
LA JOLLA, CA 92037-1212

Phone: (858) 453-5944
Fax: (858) 429-7295
After Hours Phone: (858) 453-5944
Provider Gender: Male
License number: G47129
NPI: 1184665911
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

BUTLER, PHILIP A

Provider ID: 65710
Board Certified Specialty: No
GENESIS HEALTHCARE PARTNERS PC
9850 GENESEE AVE STE 440
LA JOLLA, CA 92037-1212
Phone: (858) 453-5944
Fax:
After Hours Phone: (858) 453-5944
Provider Gender: Male
License number: G47129
NPI: 1184665911
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Memorial Hospital Encinitas,
Scripps Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

COHEN, EDWARD S

Provider ID: 204368
Board Certified Specialty: Yes
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 440
LA JOLLA, CA 92037-1212
Phone: (858) 453-5944
Fax: (858) 429-7925
After Hours Phone: (858)
453-5944
Provider Gender: Male
License number: G56844
NPI: 1093756827
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas,
Scripps Memorial Hospital, Ucsd
Medical Ctr, Scripps Mercy
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,

Health Excel Ipa Inc
COHEN, EDWARD S
Provider ID: 65713
Board Certified Specialty: No
GENESIS HEALTHCARE
PARTNERS PC
9850 GENESEE AVE STE 440
LA JOLLA, CA 92037-1212
Phone: (858) 453-5944
Fax:
After Hours Phone: (858)
453-5944
Provider Gender: Male
License number: G56844
NPI: 1093756827
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas,
Scripps Memorial Hospital, Ucsd
Medical Ctr, Scripps Mercy
Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

COHEN, EDWARD S , MD

Provider ID: 65713
Board Certified Specialty: Yes
GENESIS HEALTHCARE
PARTNERS PC
9850 GENESEE AVE STE 440
LA JOLLA, CA 92037-1212

Phone: (858) 453-5944
Fax: (858) 429-7925
After Hours Phone: (858)
453-5944
Provider Gender: Male
License number: G56844
NPI: 1093756827
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas,
Scripps Memorial Hospital, Ucsd
Medical Ctr, Scripps Mercy
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

CRAWFORD, ELWARD D

Provider ID: 244131
Board Certified Specialty: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (858) 657-7876
Fax: (888) 539-8781
After Hours Phone: (858)
657-7876
Provider Gender: Male
License number: G35350
NPI: 1902814379
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

DERWEESH, ITHAAR H
Provider ID: 64424
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6100
Fax: (858) 822-6316
After Hours Phone: (858)
822-6100
Provider Gender: Male
License number: C53383
NPI: 1003873720
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HSIEH, TUNG CHIN
Provider ID: 277239
Board Certified Specialty: No
UCSD MEDICAL GROUP
9850 GENESEE AVE STE 800
LA JOLLA, CA 92037-1219

Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A120604
NPI: 1073758652
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KADER, ANDREW K
Provider ID: 65204
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-6886
Fax: (858) 822-6188
After Hours Phone: (619)
543-6886
Provider Gender: Male
License number: A116234
NPI: 1184731127
Provider English Spoken: Yes
Provider Language(s) Spoken:
French
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None

American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KANE, CHRISTOPHER J
Provider ID: 64438
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6100
Fax:
After Hours Phone: (858)
822-6100
Provider Gender: Male
License number: G69249
NPI: 1083636294
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KANE, CHRISTOPHER J
Provider ID: 64932
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

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D. Directorio de proveedores de atención especializada

Phone: (619) 657-7876

Fax:

After Hours Phone: (619)
657-7876

Provider Gender: Male

License number: G69249

NPI: 1083636294

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA
9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

NAITOH, JOHN

Provider ID: 55260

Board Certified Specialty: No
GENESIS HEALTHCARE
PARTNERS PC

9850 GENESEE AVE STE 440
LA JOLLA, CA 92037-1212

Phone: (858) 453-5944

Fax: (858) 429-7925

After Hours Phone: (858)

453-5944

Provider Gender: Male

License number: G82079

NPI: 1629010509

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps
Memorial Hospital Encinitas,

Scripps Memorial Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

NAITOH, JOHN, MD

Provider ID: 55260

Board Certified Specialty: No
GENESIS HEALTHCARE
PARTNERS PC

9850 GENESEE AVE STE 440
LA JOLLA, CA 92037-1212

Phone: (858) 453-5944

Fax: (858) 552-2182

After Hours Phone: (858)

453-5944

Provider Gender: Male

License number: G82079

NPI: 1629010509

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps
Memorial Hospital Encinitas,

Scripps Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

NAITOH, JOHN

Provider ID: 55260

Board Certified Specialty: No
GENESIS HEALTHCARE
PARTNERS PC

9850 GENESEE AVE STE 440
LA JOLLA, CA 92037-1212

Phone: (858) 453-5944

Fax: (858) 552-2182

After Hours Phone: (858)

453-5944

Provider Gender: Male

License number: G82079

NPI: 1629010509

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps
Memorial Hospital Encinitas,

Scripps Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

NGUYEN, HUNG H , MD

Provider ID: 246842

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9850 GENESEE AVE STE 440
LA JOLLA, CA 92037-1212

Phone: (858) 453-5944

Fax: (858) 429-7925

After Hours Phone: (858)

453-5944

Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: A142209
NPI: 1023488806
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

NGUYEN, HUNG H

Provider ID: 248230
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 440
LA JOLLA, CA 92037-1212
Phone: (858) 453-5944
Fax: (858) 429-7925
After Hours Phone: (858) 453-5944
Provider Gender: Male
License number: A142209
NPI: 1023488806
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

SAKAMOTO, KYOKO

Provider ID: 64473
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6193
Fax:
After Hours Phone: (858) 822-6193
Provider Gender: Female
License number: A80808
NPI: 1740223619
Provider English Spoken: Yes
Provider Language(s) Spoken:
Japanese
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SIMON, SCOTT D

Provider ID: 284097
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9834 GENESEE AVE STE 224
LA JOLLA, CA 92037-1215
Phone: (858) 458-0099
Fax: (858) 429-7935
After Hours Phone: (858) 458-0099

Provider Gender: Male
License number: A89550
NPI: 1841237955
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc, Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

SUR, ROGER L

Provider ID: 65070
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Male
License number: G80585
NPI: 1932208022
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SUR, ROGER L

Provider ID: 65307
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-6886
Fax:
After Hours Phone: (619)
543-6886
Provider Gender: Male
License number: G80585
NPI: 1932208022
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ULOKO, MARIA I

Provider ID: 284963
Board Certified Specialty: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093-1350

Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A166093
NPI: 1326426016
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

YUH, BENJAMIN J

Provider ID: 277017
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9850 GENESEE AVE STE 440
LA JOLLA, CA 92037-1212
Phone: (858) 453-5944
Fax: (858) 429-7933
After Hours Phone: (858)
453-5944
Provider Gender: Male
License number: A125637
NPI: 1487092417
Provider English Spoken: Yes
Provider Language(s) Spoken:
Mandarin, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Methodist
Hosp Of Southern California, City
Of Hope National Med Ctr,

Huntington Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

YUH, BENJAMIN J

Provider ID: 283442
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9850 GENESEE AVE STE 440
LA JOLLA, CA 92037-1212
Phone: (858) 453-5944
Fax: (858) 429-7933
After Hours Phone: (858)
453-5944
Provider Gender: Male
License number: A125637
NPI: 1487092417
Provider English Spoken: Yes
Provider Language(s) Spoken:
Mandarin, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Methodist
Hosp Of Southern California, City
Of Hope National Med Ctr,
Huntington Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Health Excel Ipa Inc

LA MESA

ALLERGY IMMUNOLOGY

REDDY, SUMANA

Provider ID: 262115

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD

8860 CENTER DR STE 320
LA MESA, CA 91942-7001

Phone: (619) 377-6565

Fax: (619) 450-2111

After Hours Phone: (619)
377-6565

Provider Gender: Female

License number: C52581

NPI: 1053300251

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cambodian, Hindi, Spanish,
Telugu

Cultural Competency: No

Hospital Affiliation: Grossmont
Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

REDDY, SUMANA, MD

Provider ID: 82087

Board Certified Specialty: No
SUMANA AND ANANTHRAM
REDDY MD INC

8860 CENTER DR STE 320
LA MESA, CA 91942-7001

Phone: (619) 377-6565

Fax: (619) 450-2111

After Hours Phone: (619)
377-6565

Provider Gender: Female

License number: C52581

NPI: 1053300251

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cambodian, Hindi, Spanish,
Telugu

Cultural Competency: No

Hospital Affiliation: Grossmont
Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

REDDY, SUMANA

Provider ID: 82087

Board Certified Specialty: No
SUMANA AND ANANTHRAM
REDDY MD INC

8860 CENTER DR STE 320
LA MESA, CA 91942-7001

Phone: (619) 377-6565

Fax:

After Hours Phone: (619)
377-6565

Provider Gender: Female

License number: C52581

NPI: 1053300251

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cambodian, Hindi, Spanish,
Telugu

Cultural Competency: No

Hospital Affiliation: Grossmont
Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

ANESTHESIOLOGY PAIN MANAGEMENT

FISHER, CASEY J

Provider ID: 204414

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

7051 ALVARADO RD # 101
LA MESA, CA 91942-8901

Phone: (619) 625-1144

Fax:

After Hours Phone: (619)
625-1144

Provider Gender: Male

License number: A118592

NPI: 1275780686

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Scripps

Mercy Hospital, Pomerado

Hospital, Scripps Mercy Hospital

Chula Vista, Scripps Memorial

Hospital Encinitas

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

VERDOLIN, MICHAEL H , MD

Provider ID: 203328

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

7051 ALVARADO RD # 101

LA MESA, CA 91942-8901

Phone: (619) 625-1144

Fax: (619) 872-0964

After Hours Phone: (619)
625-1144

Provider Gender: Male

License number: A92149

NPI: 1477525657

Provider English Spoken: Yes

Provider Language(s) Spoken:

Italian, Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital, Sharp Chula Vista Med

Ctr, Sharp Coronado Hosp And

Healthcare Ctr, Scripps Mercy

Hospital Chula Vista

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Blue Shield Promise Health

Plan Direct, Community Care Ipa

Llc

ANESTHESIOLOGY

LEE, INSUN

Provider ID: 282101

Board Certified Specialty: No

HEALTH EXCEL IPA INC

5360 JACKSON DR STE 100

LA MESA, CA 91942-3012

Phone: (858) 571-3630

Fax: (858) 295-3948

After Hours Phone: (858)

571-3630

Provider Gender: Female

License number: A119066

NPI: 1447499199

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: 18/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

CARDIOLOGY

BOGHAIRI, ANOUSHIRAVAN

Provider ID: 210579

Board Certified Specialty: No

HEALTH EXCEL IPA INC

5565 GROSSMONT CENTER

DR STE 115

LA MESA, CA 91942-3021

Phone: (619) 698-6667

Fax: (619) 698-6684

After Hours Phone: (619)

698-6667

Provider Gender: Male

License number: A33832

NPI: 1255549184

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi, Persian

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 18/110

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc

REDDY, REDDIWANDLA S

Provider ID: 265392

Board Certified Specialty: No

HEALTH EXCEL IPA INC

5565 GROSSMONT CENTER

DR STE 202

LA MESA, CA 91942-3022

Phone: (619) 461-6130

Fax: (619) 461-3108

After Hours Phone: (619)

461-6130

Provider Gender: Male

License number: A38098

NPI: 1710996384

Provider English Spoken: Yes

Provider Language(s) Spoken:

Kannada, Spanish, Telugu

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital, Alvarado Hospital Llc

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):

No

♿ Accessibility:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Blue Shield Promise Health Plan Direct, Health Excel Ipa Inc

SHEREV, DIMITRI A , MD

Provider ID: 65688

Board Certified Specialty: No

SHEREV HEART AND VASCULAR CLINIC INC

8851 CENTER DR STE 304 LA MESA, CA 91942-3048

Phone: (619) 867-0557

Fax: (619) 867-0558

After Hours Phone: (619) 867-0557

Provider Gender: Male

License number: A70917

NPI: 1154323996

Provider English Spoken: Yes

Provider Language(s) Spoken:

Bulgarian, Malayalam, Russian, Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital, Grossmont Hospital,

Alvarado Community Hospital,

Sharp Memorial Hospital, Scripps

Memorial Hospital, Alvarado

Hospital Llc, Sharp Chula Vista

Med Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Health Excel Ipa Inc

YELLEN, LAURENCE G , MD

Provider ID: 269173

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

8851 CENTER DR STE 405 LA MESA, CA 91942-3198

Phone: (619) 582-2404

Fax: (619) 243-3236

After Hours Phone: (619)

582-2404

Provider Gender: Male

License number: G15453

NPI: 1477680551

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital, Alvarado Hospital Llc

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

CARDIOVASCULAR DISEASE

AZIMI, NASSIR A

Provider ID: 259741

Board Certified Specialty: No

HEALTH EXCEL IPA INC

5565 GROSSMONT CENTER DR STE 3 # 444

LA MESA, CA 91942-3007

Phone: (619) 567-7400

Fax: (877) 939-9674

After Hours Phone: (619)

567-7400

Provider Gender: Male

License number: A91478

NPI: 1366438764

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital, Sharp Memorial

Hospital, Sharp Chula Vista Med

Ctr, Alvarado Hospital Llc

Medi-Cal Open Panel: Yes

Min/Max Age: 18/199

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

BOGHAIRI, ANOUSHIRAVAN, MD

Provider ID: 269055

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

5565 GROSSMONT CENTER

DR STE 115

LA MESA, CA 91942-3021

Phone: (619) 698-6667

Fax: (619) 698-6684

After Hours Phone: (619)

698-6667

Provider Gender: Male

License number: A33832

NPI: 1255549184

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi, Persian

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.


Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>No ☯ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc</p>	<p>HEALTH EXCEL IPA INC 8851 CENTER DR STE 304 LA MESA, CA 91942-3048 <i>Phone:</i> (619) 867-0557 <i>Fax:</i> (619) 867-0558 <i>After Hours Phone:</i> (619) 867-0557 <i>Provider Gender:</i> Male <i>License number:</i> A122302 <i>NPI:</i> 1073768891</p>	<p><i>License number:</i> A41538 <i>NPI:</i> 1093730814 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Hindi, Spanish, Telugu <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Mercy Medical Center Merced Dominican Campus, Alvarado Hospital Llc, Grossmont Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No</p>
<p>DAWOOD, FARAH Z <i>Provider ID:</i> 283625 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 8851 CENTER DR STE 304 LA MESA, CA 91942-3048 <i>Phone:</i> (619) 867-0557 <i>Fax:</i> (619) 867-0558 <i>After Hours Phone:</i> (619) 867-0557 <i>Provider Gender:</i> Female <i>License number:</i> A143088 <i>NPI:</i> 1922263466 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic, Egyptian <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Scripps Memorial Hospital, Alvarado Hospital Llc, Grossmont Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No</p>	<p><i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> French, Italian, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Sharp Chula Vista Med Ctr, Alvarado Hosp Med Ctr, Scripps Memorial Hospital, Sharp Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc</p>	<p>☯ <i>Accessibility:</i> P, EB, IB, E, R, T <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc</p>
<p>FERNANDEZ, GENARO <i>Provider ID:</i> 283607 <i>Board Certified Specialty:</i> No</p>	<p>KOTHA, PURUSHOTHAM, MD <i>Provider ID:</i> 32053 <i>Board Certified Specialty:</i> No PURUSHOTHAM AND AKTHER KOTHA MD INC 8860 CENTER DR STE 400 LA MESA, CA 91942-7003 <i>Phone:</i> (619) 229-1995 <i>Fax:</i> <i>After Hours Phone:</i> (619) 229-1995 <i>Provider Gender:</i> Male</p>	<p>MEHRANPOUR, PAYAM <i>Provider ID:</i> 252973 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 8851 CENTER DR STE 405 LA MESA, CA 91942-3198 <i>Phone:</i> (619) 377-6262 <i>Fax:</i> (888) 533-3130 <i>After Hours Phone:</i> (619) 377-6262 <i>Provider Gender:</i> Male <i>License number:</i> A112670 <i>NPI:</i> 1790897387 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic, Farsi, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Sharp Memorial Hospital, Alvarado Hosp Med Ctr, Alvarado Hospital Llc, Scripps Memorial Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 18/99</p>


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D. Directorio de proveedores de atención especializada

American Sign Language (ASL): No
Accessibility: 
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

RAZI, BIJAN


Provider ID: 238787
Board Certified Specialty: No
HEALTH EXCEL IPA INC
8851 CENTER DR STE 405
LA MESA, CA 91942-3198
Phone: (619) 265-0200
Fax: (619) 287-2825
After Hours Phone: (619) 265-0200
Provider Gender: Male
License number: A37882
NPI: 1255365813
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Grossmont Hospital, Sharp Memorial Hospital, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

Accessibility: 
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

REDDY, REDDIWANDLA S


Provider ID: 265393
Board Certified Specialty: No

BLUE SHIELD PROMISE
HEALTH PLAN DIRECT
5565 GROSSMONT CENTER
DR STE 202
LA MESA, CA 91942-3022
Phone: (619) 461-6130
Fax: (619) 461-3108
After Hours Phone: (619) 461-6130
Provider Gender: Male
License number: A38098
NPI: 1710996384
Provider English Spoken: Yes
Provider Language(s) Spoken: Kannada, Spanish, Telugu
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Alvarado Hospital Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

Accessibility: 
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health Plan Direct, Health Excel Ipa Inc

SHEREV, DIMITRI A

Provider ID: 283638
Board Certified Specialty: No
HEALTH EXCEL IPA INC
8851 CENTER DR STE 304
LA MESA, CA 91942-3048
Phone: (619) 867-0557
Fax: (619) 867-0558
After Hours Phone: (619) 867-0557
Provider Gender: Male
License number: A70917
NPI: 1154323996
Provider English Spoken: Yes
Provider Language(s) Spoken:

Bulgarian, Malayalam, Russian, Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Alvarado Community Hospital, Sharp Memorial Hospital, Scripps Memorial Hospital, Alvarado Hospital Llc, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: 
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

CERTIFIED BEHAVIORAL ANALYST MASTERS

ALLEN, DAVID

Provider ID: 104053
Board Certified Specialty: No
LETS GROW INC
7373 UNIVERSITY AVE STE 202
LA MESA, CA 91942-0524
Phone: (619) 713-0737
Fax:
After Hours Phone: (619) 713-0737
Provider Gender: Male
License number: BCBA13011
NPI: 1306186549
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8:30AM-5PM, SA 9AM-5PM
Website:
<https://www.letsgrowaba.com/home.html>
Email:
Medical Group(s):
IPA:

ALLEN, SHARRONDA

Provider ID: 103951
Board Certified Specialty: No
 LETS GROW INC
 7373 UNIVERSITY AVE STE 202
 LA MESA, CA 91942-0524
Phone: (619) 713-0737
Fax:
After Hours Phone: (619) 713-0737
Provider Gender: Female
License number: BCBA8724
NPI: 1124385398
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

Accessibility: W
Hours: M-F 8:30AM-5PM, SA 9AM-5PM
Website:
<https://www.letsgrowaba.com/home.html>
Email:
Medical Group(s):
IPA:

MEDRANO, JOSEPH

Provider ID: 104072
Board Certified Specialty: No
 LETS GROW INC
 7373 UNIVERSITY AVE STE 202
 LA MESA, CA 91942-0524
Phone: (619) 713-0737
Fax:
After Hours Phone: (619) 713-0737
Provider Gender: Male
License number: BCBA15889
NPI: 1902218605
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8:30AM-5PM, SA 9AM-5PM
Website:
<https://www.letsgrowaba.com/home.html>
Email:
Medical Group(s):
IPA:

CERTIFIED NURSE PRACTITIONER

ALBANO, RIZALINA

Provider ID: 128828
Board Certified Specialty: No
 BALBOA NEPHROLOGY MED GRP INC
 8851 CENTER DR STE 505
 LA MESA, CA 91942-3059
Phone: (619) 461-3880
Fax:
After Hours Phone: (619) 461-3880

Provider Gender: Female
License number: NP95005436
NPI: 1811430820
Provider English Spoken: Yes
Provider Language(s) Spoken: Tagalog
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

LOYOLA, MARY ANN P , NPA

Provider ID: 242398
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 8851 CENTER DR STE 505
 LA MESA, CA 91942-3059
Phone: (619) 461-3880
Fax: (619) 461-3895
After Hours Phone: (619) 461-3880
Provider Gender: Female
License number: NP95011408
NPI: 1881154037
Provider English Spoken: Yes
Provider Language(s) Spoken: Tagalog
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

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D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

LOYOLA, MARY ANN P

Provider ID: 244503
Board Certified Specialty: No
HEALTH EXCEL IPA INC
8851 CENTER DR STE 505
LA MESA, CA 91942-3059
Phone: (619) 461-3880
Fax: (619) 461-3895
After Hours Phone: (619)
461-3880
Provider Gender: Female
License number: NP95011408
NPI: 1881154037
Provider English Spoken: Yes
Provider Language(s) Spoken:

Tagalog
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/120
American Sign Language (ASL):
No

⚡ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

NGILLA MCGRAW, MEAGHAN D

Provider ID: 238730
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
8881 FLETCHER PKWY STE
200
LA MESA, CA 91942-3135

Phone: (619) 464-6434
Fax:
After Hours Phone: (619)
464-6434
Provider Gender: Female
License number: NP23792
NPI: 1356461842
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
⚡ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

NGILLA MCGRAW, MEAGHAN D

Provider ID: 238731
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
8881 FLETCHER PKWY STE
205
LA MESA, CA 91942-3187
Phone: (619) 464-6434
Fax:
After Hours Phone: (619)
464-6434
Provider Gender: Female
License number: NP23792
NPI: 1356461842
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18

American Sign Language (ASL):
No
⚡ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

RAGUSA, JENNIFER T

Provider ID: 238697
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
8881 FLETCHER PKWY STE
200
LA MESA, CA 91942-3135
Phone: (619) 464-6434
Fax:

After Hours Phone: (619)
464-6434
Provider Gender: Female
License number: NP95003395
NPI: 1821455510
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No

⚡ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

RAGUSA, JENNIFER T

Provider ID: 238698
Board Certified Specialty: No
RADY CHILDRENS HEALTH

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NETWORK

8881 FLETCHER PKWY STE
205

LA MESA, CA 91942-3187

Phone: (619) 464-6434

Fax:

After Hours Phone: (619)

464-6434

Provider Gender: Female

License number: NP95003395

NPI: 1821455510

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

RESTELLI, LYNDSEY

Provider ID: 217692

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

8881 FLETCHER PKWY STE
200

LA MESA, CA 91942-3135

Phone: (619) 464-6434

Fax:

After Hours Phone: (619)

464-6434

Provider Gender: Female

License number: NP95007632

NPI: 1558854000

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

RESTELLI, LYNDSEY

Provider ID: 217693

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

8881 FLETCHER PKWY STE
205

LA MESA, CA 91942-3187

Phone: (619) 464-6434

Fax:

After Hours Phone: (619)

464-6434

Provider Gender: Female

License number: NP95007632

NPI: 1558854000

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

ROH, DONGYON

Provider ID: 259623

Board Certified Specialty: No
HEALTH EXCEL IPA INC

5360 JACKSON DR STE 100
LA MESA, CA 91942-3012

Phone: (619) 713-6514

Fax: (858) 430-3146

After Hours Phone: (619)

713-6514

Provider Gender: Female

License number: NP95004887

NPI: 1043760069

Provider English Spoken: Yes

Provider Language(s) Spoken:

Korean

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

EMERGENCY MEDICINE

BELLOMO, THOMAS N

Provider ID: 205600

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

5565 GROSSMONT CENTER
DR STE 2 # 2

LA MESA, CA 91942-3037

Phone: (619) 713-5375

Fax: (619) 713-5379

After Hours Phone: (619)

713-5375

Provider Gender: Male

License number: G69193

NPI: 1700926698

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland

Medi-Cal Open Panel: Yes
Min/Max Age: 0/25
American Sign Language (ASL): No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CHOW, BYRON C

Provider ID: 206096
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
5565 GROSSMONT CENTER DR STE 2 # 2
LA MESA, CA 91942-3037
Phone: (619) 713-5375
Fax: (619) 713-5379
After Hours Phone: (619) 713-5375

Provider Gender: Male
License number: A78116
NPI: 1619907607
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

KEARNEY, LAUREN K

Provider ID: 206220
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
5565 GROSSMONT CENTER DR STE 2 # 2
LA MESA, CA 91942-3037
Phone: (619) 713-5375
Fax: (619) 713-5379
After Hours Phone: (619) 713-5375

Provider Gender: Female
License number: G83666
NPI: 1740296268
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Palomar Health Downtown Campus, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

LOVEJOY, AMY E

Provider ID: 206106

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
5565 GROSSMONT CENTER DR STE 2 # 2
LA MESA, CA 91942-3037
Phone: (619) 713-5375
Fax: (619) 713-5379

After Hours Phone: (619) 713-5375
Provider Gender: Female
License number: A75176
NPI: 1790856557

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hospital Of Orange County

Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MINKA, GENEVIEVE M

Provider ID: 205335
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942-3037
Phone: (619) 713-5375
Fax: (619) 713-5379

After Hours Phone: (619) 713-5375
Provider Gender: Female

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: A77841
NPI: 1689646689
Provider English Spoken: Yes
Provider Language(s) Spoken: French
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MISHRA-OCCHINO, SEEMA S

Provider ID: 205405
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
5565 GROSSMONT CENTER DR STE 2 # 2
LA MESA, CA 91942-3037
Phone: (619) 713-5375
Fax: (619) 713-5379
After Hours Phone: (619) 713-5375
Provider Gender: Female
License number: A100307
NPI: 1689612830
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PARIKH, PAYAL

Provider ID: 205868
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
5565 GROSSMONT CENTER DR STE 2 # 2
LA MESA, CA 91942-3037
Phone: (619) 713-5375
Fax: (619) 713-5379
After Hours Phone: (619) 713-5375
Provider Gender: Female
License number: 20A10898
NPI: 1871757989
Provider English Spoken: Yes
Provider Language(s) Spoken: Gujarati, Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Kaiser Foundation Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PARKER, SHERINE B

Provider ID: 205786
Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942-3037
Phone: (619) 713-5375
Fax: (619) 713-5379
After Hours Phone: (619) 713-5375
Provider Gender: Female
License number: G81658
NPI: 1477626513
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Glendale Adventist Med Ctr, Glendale Memorial Hosp And Health Ctr, Tri City Medical Ctr, Rady Childrens Hospital San Diego, Valley Childrens Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PIERCE, MATTHEW A

Provider ID: 205929
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
5565 GROSSMONT CENTER DR STE 2 # 2
LA MESA, CA 91942-3037
Phone: (619) 713-5375
Fax: (619) 713-5379
After Hours Phone: (619) 713-5375

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D. Directorio de proveedores de atención especializada

Provider Gender: Male
License number: A148761
NPI: 1992125520
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

RILEY-HAGAN, MARGARET

Provider ID: 205986
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 5565 GROSSMONT CENTER
 DR STE 2 # 2
 LA MESA, CA 91942-3037
Phone: (619) 713-5375
Fax: (619) 713-5379
After Hours Phone: (619)
 713-5375
Provider Gender: Female
License number: A49609
NPI: 1548352388
Provider English Spoken: Yes
Provider Language(s) Spoken:
 French, Spanish
Cultural Competency: No
Hospital Affiliation: Palomar
 Medical Center, Rady Childrens
 Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):

No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

ROSE, OLGA D

Provider ID: 205953
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 5565 GROSSMONT CENTER
 DR STE 2 # 2
 LA MESA, CA 91942-3037
Phone: (619) 713-5375
Fax: (619) 713-5379
After Hours Phone: (619)
 713-5375
Provider Gender: Female
License number: A143536
NPI: 1740560044
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Russian
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Rady Childrens Hospital San
 Diego, Sharp Memorial Hospital,
 Scripps Memorial Hospital,
 Scripps Memorial Hospital
 Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE M , MD

Provider ID: 268693
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 5565 GROSSMONT CENTER
 DR
 LA MESA, CA 91942-3020
Phone: (619) 589-5414
Fax: (619) 589-7391
After Hours Phone: (619)
 589-5414
Provider Gender: Female
License number: HA7100
NPI: 1063558856
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc

DANDURAND, JOHN M , MD

Provider ID: 269782
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 5565 GROSSMONT CENTER
 DR
 LA MESA, CA 91942-3020
Phone: (619) 589-5414
Fax: (619) 589-7391
After Hours Phone: (619)
 589-5414

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Male
License number: HA2056
NPI: 1497901680
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

HEMATOLOGY / ONCOLOGY

BATRA, REEMA, MD
Provider ID: 58612
Board Certified Specialty: No
CANCER CENTER ONCOLOGY
MEDICAL GROUP INC
5555 GROSSMONT CENTER
DR
LA MESA, CA 91942-3019
Phone: (619) 644-3030
Fax: (619) 644-3638
After Hours Phone: (619)
644-3030
Provider Gender: Female
License number: A118846
NPI: 1629286505
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi, Mandarin
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):

No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc
BODKIN, DAVID J , MD
Provider ID: 44084
Board Certified Specialty: Yes
CANCER CENTER ONCOLOGY
MEDICAL GROUP INC
5555 GROSSMONT CENTER
DR
LA MESA, CA 91942-3019
Phone: (619) 644-3030
Fax: (619) 644-3638
After Hours Phone: (619)
644-3030

Provider Gender: Male
License number: G62107
NPI: 1134280605
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, French, Hindi, Korean,
Mandarin, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
Coronado Hosp And Healthcare
Ctr, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc
MEDIC, IGOR, MD
Provider ID: 119509
Board Certified Specialty: No

CANCER CENTER ONCOLOGY
MEDICAL GROUP INC
5555 GROSSMONT CENTER
DR
LA MESA, CA 91942-3019
Phone: (619) 644-3030
Fax: (619) 644-3638
After Hours Phone: (619)
644-3030
Provider Gender: Male
License number: A146970
NPI: 1154618593
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Serbian, Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

ZU, KAI, MD
Provider ID: 43199
Board Certified Specialty: No
CANCER CENTER ONCOLOGY
MEDICAL GROUP INC
5555 GROSSMONT CENTER
DR
LA MESA, CA 91942-3019
Phone: (619) 644-3030
Fax: (619) 644-3638
After Hours Phone: (619)
644-3030
Provider Gender: Male
License number: A74842
NPI: 1164583639
Provider English Spoken: Yes

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken:
Mandarin, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

ZU, KAI

Provider ID: 43199
Board Certified Specialty: No
CANCER CENTER ONCOLOGY
MEDICAL GROUP INC
5555 GROSSMONT CENTER
DR
LA MESA, CA 91942-3019
Phone: (619) 644-3030
Fax:
After Hours Phone: (619)
644-3030
Provider Gender: Male
License number: A74842
NPI: 1164583639
Provider English Spoken: Yes
Provider Language(s) Spoken:
Mandarin, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8:30AM-5PM, SA
9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc

INFECTIOUS DISEASE

HADDAD, FADI A

Provider ID: 40943
Board Certified Specialty: No
FADI A HADDAD MD INC
8860 CENTER DR STE 320
LA MESA, CA 91942-7001
Phone: (619) 376-1904
Fax:
After Hours Phone: (619)
376-1904
Provider Gender: Male
License number: A80687
NPI: 1689692956
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Alvarado Hospital Llc,
Scripps Mercy Hospital Chula
Vista, Grossmont Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 9AM-5PM, SA
9AM-5PM
Website: www.haddadclinic.com
Email:
Medical Group(s):
IPA:

INTERNAL MEDICINE CRITICAL CARE MEDICINE

CHRISTMAN, JAMESINA C

Provider ID: 259981
Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK
5565 GROSSMONT CENTER
DR STE 2
LA MESA, CA 91942-3037
Phone: (619) 713-5375
Fax: (519) 713-5379
After Hours Phone: (619)
713-5375
Provider Gender: Female
License number: A93574
NPI: 1538372032
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Childrens
Hosp Of Los Angeles, Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/99
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

INTERNAL MEDICINE

BODKIN, DAVID J

Provider ID: 44084
Board Certified Specialty: No
CANCER CENTER ONCOLOGY
MEDICAL GROUP INC
5555 GROSSMONT CENTER
DR
LA MESA, CA 91942-3019
Phone: (619) 644-3030
Fax: (619) 644-3638
After Hours Phone: (619)
644-3030
Provider Gender: Male

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D. Directorio de proveedores de atención especializada

License number: G62107
NPI: 1134280605
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, French, Hindi, Korean, Mandarin, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8:30AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

DELA CRUZ, JUNE T

Provider ID: 57266
Board Certified Specialty: No
SAN DIEGO CRITICAL CARE MED GRP INC
5555 GROSSMONT CENTER DR
LA MESA, CA 91942-3019
Phone: (619) 713-5014
Fax:
After Hours Phone: (619) 713-5014
Provider Gender: Female
License number: A54445
NPI: 1689784886
Provider English Spoken: Yes
Provider Language(s) Spoken: Tagalog
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Alvarado Hospital Llc
Medi-Cal Open Panel: No
Min/Max Age: None

American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FADDA, GEORGE Z

Provider ID: 241957
Board Certified Specialty: No
HEALTH EXCEL IPA INC
8851 CENTER DR STE 505
LA MESA, CA 91942-3059
Phone: (619) 461-3880
Fax: (619) 461-3895
After Hours Phone: (619) 461-3880
Provider Gender: Male
License number: A44918
NPI: 1619972247
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, French
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Alvarado Hospital Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 18/120
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

FAHID, AMIR H
Provider ID: 101612
Board Certified Specialty: No

SAN DIEGO CRITICAL CARE MED GRP INC
5555 GROSSMONT CENTER DR
LA MESA, CA 91942-3019
Phone: (619) 713-5014
Fax:
After Hours Phone: (619) 713-5014
Provider Gender: Male
License number: A128773
NPI: 1568740355
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GARLAPATI, ANITHA R

Provider ID: 57273
Board Certified Specialty: No
SAN DIEGO CRITICAL CARE MED GRP INC
5555 GROSSMONT CENTER DR
LA MESA, CA 91942-3019
Phone: (619) 713-5014
Fax:
After Hours Phone: (619) 713-5014
Provider Gender: Female
License number: A83701
NPI: 1477641967
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

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D. Directorio de proveedores de atención especializada

Hospital Affiliation: Alvarado

Hospital Llc

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

HASSANEIN, MOHAMED K

Provider ID: 109541

Board Certified Specialty: No
SAN DIEGO CRITICAL CARE
MED GRP INC

5555 GROSSMONT CENTER
DR

LA MESA, CA 91942-3019

Phone: (619) 713-5014

Fax:

After Hours Phone: (619)
713-5014

Provider Gender: Male

License number: A135448

NPI: 1164794673

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sutter

Medical Center Sacramento,
Sutter Roseville Medical Center,
Marin General Hosp

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

JALIL, ANMAR B

Provider ID: 108361

Board Certified Specialty: No
SAN DIEGO CRITICAL CARE
MED GRP INC

5555 GROSSMONT CENTER
DR

LA MESA, CA 91942-3019

Phone: (619) 713-5014

Fax:

After Hours Phone: (619)
713-5014

Provider Gender: Male

License number: A139378

NPI: 1588907174

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

MOHEDIN, BARZAN

Provider ID: 52461

Board Certified Specialty: No
SAN DIEGO CRITICAL CARE
MED GRP INC

5555 GROSSMONT CENTER
DR

LA MESA, CA 91942-3019

Phone: (619) 713-5014

Fax:

After Hours Phone: (619)
713-5014

Provider Gender: Male

License number: A50839

NPI: 1639235096

Provider English Spoken: Yes

Provider Language(s) Spoken:
Arabic, Farsi, Kurdish

Cultural Competency: No

Hospital Affiliation: Grossmont
Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

MURALIDHARA, SOWMYA A

Provider ID: 102750

Board Certified Specialty: No
SAN DIEGO CRITICAL CARE
MED GRP INC

5555 GROSSMONT CENTER
DR

LA MESA, CA 91942-3019

Phone: (619) 713-5014

Fax:

After Hours Phone: (619)
713-5014

Provider Gender: Female

License number: A114660

NPI: 1851533285

Provider English Spoken: Yes

Provider Language(s) Spoken:

Hindi, Kannada, Tamil

Cultural Competency: No

Hospital Affiliation: Alvarado
Hospital Llc

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Website:

Email:

Medical Group(s):

IPA:

PABAND, RASHID

Provider ID: 282914

Board Certified Specialty: No

HEALTH EXCEL IPA INC

5111 GARFIELD ST STE B

LA MESA, CA 91941-5148

Phone: (619) 698-9375

Fax: (619) 698-9378

After Hours Phone: (619)

698-9375

Provider Gender: Male

License number: A120108

NPI: 1407089451

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital, Alvarado Hospital Llc

Medi-Cal Open Panel: No

Min/Max Age: 18/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

PABAND, RASHID

Provider ID: 282916

Board Certified Specialty: No

HEALTH EXCEL IPA INC

5525 GROSSMONT CENTER

DR STE 609

LA MESA, CA 91942-3009

Phone: (858) 433-4200

Fax: (619) 768-1087

After Hours Phone: (858)

433-4200

Provider Gender: Male

License number: A120108

NPI: 1407089451

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital, Alvarado Hospital Llc

Medi-Cal Open Panel: No

Min/Max Age: 18/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

PAUL, RABEE Y

Provider ID: 102682

Board Certified Specialty: No

SAN DIEGO CRITICAL CARE

MED GRP INC

5555 GROSSMONT CENTER

DR

LA MESA, CA 91942-3019

Phone: (619) 713-5014

Fax:

After Hours Phone: (619)

713-5014

Provider Gender: Male

License number: A133752

NPI: 1659503241

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

SEIKALY, VICTOR E

Provider ID: 58388

Board Certified Specialty: No

SAN DIEGO CRITICAL CARE

MED GRP INC

5555 GROSSMONT CENTER

DR

LA MESA, CA 91942-3019

Phone: (619) 713-5014

Fax:

After Hours Phone: (619)

713-5014

Provider Gender: Male

License number: A50852

NPI: 1235158320

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

YATOOMA, SALAM D

Provider ID: 57287

Board Certified Specialty: No

SAN DIEGO CRITICAL CARE

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

MED GRP INC
5555 GROSSMONT CENTER
DR
LA MESA, CA 91942-3019
Phone: (619) 713-5014
Fax:
After Hours Phone: (619)
713-5014
Provider Gender: Male
License number: A102344
NPI: 1447448493
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic
Cultural Competency: No
Hospital Affiliation: Alvarado
Hospital Llc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

INTERVENTIONAL CARDIOLOGY

TAGHIZADEH, BEHZAD, MD
Provider ID: 269161
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
8851 CENTER DR STE 405
LA MESA, CA 91942-3198
Phone: (619) 582-2404
Fax:
After Hours Phone: (619)
582-2404
Provider Gender: Male
License number: C56208
NPI: 1275514986
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Alvarado Hospital Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MATERNAL AND FETAL MEDICINE

ADAMCZAK, JOANNA E
Provider ID: 258903
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
5555 GROSSMONT CENTER
DR
LA MESA, CA 91942-3019
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858)
966-6710
Provider Gender: Female
License number: A116982
NPI: 1447428420
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital, Tri City
Medical Ctr, Sharp Mary Birch
Hosp For Women And Newborns
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

ADAMCZAK, JOANNA E
Provider ID: 277211
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
5525 GROSSMONT CENTER
DR

LA MESA, CA 91942-3009
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858)
966-6710
Provider Gender: Female
License number: A116982
NPI: 1447428420
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital, Tri City
Medical Ctr, Sharp Mary Birch
Hosp For Women And Newborns
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

ADAMI, REBECCA R
Provider ID: 272676

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
5555 GROSSMONT CENTER
DR

LA MESA, CA 91942-3019

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)

966-6710

Provider Gender: Female

License number: A149389

NPI: 1992149447

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Sharp Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

ADAMI, REBECCA R

Provider ID: 277178

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

5525 GROSSMONT CENTER

DR

LA MESA, CA 91942-3009

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)

966-6710

Provider Gender: Female

License number: A149389

NPI: 1992149447

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Sharp Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

CASELE, HOLLY L

Provider ID: 258872

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

5555 GROSSMONT CENTER

DR

LA MESA, CA 91942-3019

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)

966-6710

Provider Gender: Female

License number: G87630

NPI: 1255348744

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Grossmont

Hospital, Tri City Medical Ctr,

Sharp Mary Birch Hosp For

Women And Newborns, Scripps

Memorial Hospital Encinitas,

Rady Childrens Hospital San
Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

CASELE, HOLLY L

Provider ID: 277246

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

5525 GROSSMONT CENTER

DR

LA MESA, CA 91942-3009

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)

966-6710

Provider Gender: Female

License number: G87630

NPI: 1255348744

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Grossmont

Hospital, Tri City Medical Ctr,

Sharp Mary Birch Hosp For

Women And Newborns, Scripps

Memorial Hospital Encinitas,

Rady Childrens Hospital San

Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ *Accessibility:*

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

CATANZARITE, VALERIAN A

Provider ID: 258848

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

5555 GROSSMONT CENTER DR

LA MESA, CA 91942-3019

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858) 966-6710

Provider Gender: Male

License number: G46026

NPI: 1174694939

Provider English Spoken: Yes

Provider Language(s) Spoken: Russian, Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Memorial Hospital, Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Grossmont Hospital, Tri City Medical Ctr, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Rady Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

CATANZARITE, VALERIAN A

Provider ID: 278851

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

5565 GROSSMONT CENTER DR STE 2 # 2

LA MESA, CA 91942-3037

Phone: (619) 713-5375

Fax: (619) 713-5379

After Hours Phone: (619) 713-5375

Provider Gender: Male

License number: G46026

NPI: 1174694939

Provider English Spoken: Yes

Provider Language(s) Spoken: Russian, Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Memorial Hospital, Scripps Memorial Hospital, Tri City Medical Ctr, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Grossmont Hospital, Scripps Memorial Hospital Encinitas, Rady Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

MCCULLOUGH, DEIRDRE M

Provider ID: 244873

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

5555 GROSSMONT CENTER DR

LA MESA, CA 91942-3019

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858) 966-6710

Provider Gender: Female

License number: C159758

NPI: 1639153018

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp Mary Birch Hosp For Women And Newborns

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

MCCULLOUGH, DEIRDRE M

Provider ID: 277261

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

5525 GROSSMONT CENTER DR

LA MESA, CA 91942-3009

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858) 966-6710

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: C159758
NPI: 1639153018
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Mary Birch Hosp For Women And Newborns
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

RICHARDSON, ALVIE C

Provider ID: 277318
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
5525 GROSSMONT CENTER DR
LA MESA, CA 91942-3009
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Male
License number: C160063
NPI: 1154305977
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SCHWENDEMANN, WADE D

Provider ID: 277306
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
5525 GROSSMONT CENTER DR
LA MESA, CA 91942-3009
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Male
License number: A109228
NPI: 1477563302
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Scripps Memorial Hospital, Grossmont Hospital, Sharp Memorial Hospital, Sharp Mary Birch Hosp For Women And Newborns, Tri City Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

TITH, TEVY

Provider ID: 277327
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
5525 GROSSMONT CENTER DR
LA MESA, CA 91942-3009
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: A103521
NPI: 1588816086
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Tri City Medical Ctr, Sharp Mary Birch Hosp For Women And Newborns, University Of California Irvine Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

WESTERMANN, MELISSA L

Provider ID: 255794
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
5555 GROSSMONT CENTER DR # 2
LA MESA, CA 91942-3019

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 966-6710
 Fax: (858) 966-6711
 After Hours Phone: (858) 966-6710
 Provider Gender: Female
 License number: A130149
 NPI: 1760730758
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Sharp Mary Birch Hosp For Women And Newborns, Earl And Lorraine Miller Childrens Hsp, Long Beach Memorial Med Ctr, University Of California Irvine Med Ctr, Sharp Memorial Hospital, Grossmont Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

WESTERMANN, MELISSA L
 Provider ID: 277355
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 5525 GROSSMONT CENTER DR
 LA MESA, CA 91942-3009
 Phone: (858) 966-6710
 Fax: (858) 966-6711
 After Hours Phone: (858) 966-6710
 Provider Gender: Female
 License number: A130149
 NPI: 1760730758

Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Sharp Mary Birch Hosp For Women And Newborns, Earl And Lorraine Miller Childrens Hsp, Long Beach Memorial Med Ctr, University Of California Irvine Med Ctr, Sharp Memorial Hospital, Grossmont Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

WILLIAMS, KRISTIN M
 Provider ID: 277384
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 5555 GROSSMONT CENTER DR
 LA MESA, CA 91942-3019
 Phone: (858) 966-6710
 Fax: (858) 966-6711
 After Hours Phone: (858) 966-6710
 Provider Gender: Female
 License number: A72985
 NPI: 1992847131
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Stanford Health Care, Lucile Salter Packard Childrens Hosp, San Mateo Medical Ctr, Sharp

Memorial Hospital, Sharp Mary Birch Hosp For Women And Newborns, Tri City Medical Ctr, California Pacific Med Ctr, Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

WILLIAMS, KRISTIN M
 Provider ID: 277385
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 5525 GROSSMONT CENTER DR
 LA MESA, CA 91942-3009
 Phone: (858) 966-6710
 Fax: (858) 966-6711
 After Hours Phone: (858) 966-6710
 Provider Gender: Female
 License number: A72985
 NPI: 1992847131
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Stanford Health Care, Lucile Salter Packard Childrens Hosp, San Mateo Medical Ctr, Sharp Memorial Hospital, Sharp Mary Birch Hosp For Women And Newborns, Tri City Medical Ctr, California Pacific Med Ctr, Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

DO, LUAN K

Provider ID: 262108

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD

8851 CENTER DR STE 505
LA MESA, CA 91942-3059

Phone: (619) 461-3880

Fax: (619) 461-3895

After Hours Phone: (619)
461-3880

Provider Gender: Male

License number: A65161

NPI: 1538156245

Provider English Spoken: Yes

Provider Language(s) Spoken:
Vietnamese

Cultural Competency: No

Hospital Affiliation: Alvarado
Hospital Llc, Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R, T

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

DO, LUAN K

Provider ID: 43077

Board Certified Specialty: No
BALBOA NEPHROLOGY MED
GRP INC

8851 CENTER DR STE 505
LA MESA, CA 91942-3059

Phone: (619) 461-3880

Fax: (619) 461-3895

After Hours Phone: (619)
461-3880

Provider Gender: Male

License number: A65161

NPI: 1538156245

Provider English Spoken: Yes

Provider Language(s) Spoken:
Vietnamese

Cultural Competency: No

Hospital Affiliation: Grossmont
Hospital, Alvarado Hospital Llc

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,
T, W

Hours: M-F 9AM-5PM, SA
9AM-5PM

Website: www.bnmg.org

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

DO, LUAN K , MD

Provider ID: 43077

Board Certified Specialty: No
BALBOA NEPHROLOGY MED
GRP INC

8851 CENTER DR STE 505
LA MESA, CA 91942-3059

Phone: (619) 461-3880

Fax: (619) 461-3895

After Hours Phone: (619)
461-3880

Provider Gender: Male

License number: A65161

NPI: 1538156245

Provider English Spoken: Yes

Provider Language(s) Spoken:

NEPHROLOGY

DO, LUAN K

Provider ID: 213088

Board Certified Specialty: No
HEALTH EXCEL IPA INC

8851 CENTER DR STE 505
LA MESA, CA 91942-3059

Phone: (619) 461-3880

Fax: (619) 461-3895

After Hours Phone: (619)
461-3880

Provider Gender: Male

License number: A65161

NPI: 1538156245

Provider English Spoken: Yes

Provider Language(s) Spoken:
Vietnamese

Cultural Competency: No

Hospital Affiliation: Alvarado
Hospital Llc, Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 18/120

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R, T

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>Vietnamese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Alvarado Hospital Llc, Grossmont Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> P, EB, IB, E, R, T <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>	<p><i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>	<p>8851 CENTER DR STE 505 LA MESA, CA 91942-3059 <i>Phone:</i> (619) 461-3880 <i>Fax:</i> (619) 461-3895 <i>After Hours Phone:</i> (619) 461-3880 <i>Provider Gender:</i> Male <i>License number:</i> A44918 <i>NPI:</i> 1619972247 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic, French <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Alvarado Hospital Llc <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> P, EB, IB, E, R, T, W <i>Hours:</i> M-F 9AM-5PM, SA 9AM-5PM <i>Website:</i> www.bnmg.org <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>
<p>FADDA, GEORGE Z <i>Provider ID:</i> 262184 <i>Board Certified Specialty:</i> No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 8851 CENTER DR STE 505 LA MESA, CA 91942-3059 <i>Phone:</i> (619) 461-3880 <i>Fax:</i> (619) 461-3895 <i>After Hours Phone:</i> (619) 461-3880 <i>Provider Gender:</i> Male <i>License number:</i> A44918 <i>NPI:</i> 1619972247 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic, French <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Alvarado Hospital Llc <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i></p>	<p>FADDA, GEORGE Z , MD <i>Provider ID:</i> 26465 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 8851 CENTER DR STE 505 LA MESA, CA 91942-3059 <i>Phone:</i> (619) 461-3880 <i>Fax:</i> (619) 461-3895 <i>After Hours Phone:</i> (619) 461-3880 <i>Provider Gender:</i> Male <i>License number:</i> A44918 <i>NPI:</i> 1619972247 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic, French <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Alvarado Hospital Llc <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>	<p>MILLER, LUCY M <i>Provider ID:</i> 212712 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 8851 CENTER DR STE 505 LA MESA, CA 91942-3059 <i>Phone:</i> (619) 461-3880 <i>Fax:</i> (619) 461-3895 <i>After Hours Phone:</i> (619) 461-3880 <i>Provider Gender:</i> Female <i>License number:</i> A53843 <i>NPI:</i> 1467458620 <i>Provider English Spoken:</i> Yes</p>
<p>FADDA, GEORGE Z <i>Provider ID:</i> 26466 <i>Board Certified Specialty:</i> No BALBOA NEPHROLOGY MED GRP INC</p>	<p>FADDA, GEORGE Z <i>Provider ID:</i> 26466 <i>Board Certified Specialty:</i> No BALBOA NEPHROLOGY MED GRP INC</p>	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken: Japanese, Portuguese, Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Alvarado Hospital Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 18/120
American Sign Language (ASL): No

♿ *Accessibility:* P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

MILLER, LUCY M

Provider ID: 262152

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD

8851 CENTER DR STE 505

LA MESA, CA 91942-3059

Phone: (619) 461-3880

Fax: (619) 461-3895

After Hours Phone: (619) 461-3880

Provider Gender: Female

License number: A53843

NPI: 1467458620

Provider English Spoken: Yes

Provider Language(s) Spoken: Japanese, Portuguese, Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont Hospital, Alvarado Hospital Llc

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

♿ *Accessibility:* P, EB, IB, E, R, T

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

MILLER, LUCY M , MD

Provider ID: 26595

Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC

8851 CENTER DR STE 505

LA MESA, CA 91942-3059

Phone: (619) 461-3880

Fax: (619) 461-3895

After Hours Phone: (619) 461-3880

Provider Gender: Female

License number: A53843

NPI: 1467458620

Provider English Spoken: Yes

Provider Language(s) Spoken: Japanese, Portuguese, Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont Hospital, Alvarado Hospital Llc

Medi-Cal Open Panel: Yes

Min/Max Age: 0/0

American Sign Language (ASL): No

♿ *Accessibility:* P, EB, IB, E, R, T

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

MILLER, LUCY M

Provider ID: 26595

Board Certified Specialty: No

BALBOA NEPHROLOGY MED GRP INC

8851 CENTER DR STE 505

LA MESA, CA 91942-3059

Phone: (619) 461-3880

Fax:

After Hours Phone: (619) 461-3880

Provider Gender: Female

License number: A53843

NPI: 1467458620

Provider English Spoken: Yes

Provider Language(s) Spoken: Japanese, Portuguese, Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont Hospital, Alvarado Hospital Llc

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL): No

♿ *Accessibility:* P, EB, IB, E, R, T, W

Hours: M-F 9AM-5PM, SA 9AM-5PM

Website: www.bnmg.org

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

THOMPSON, JOHN C

Provider ID: 214255

Board Certified Specialty: No

HEALTH EXCEL IPA INC

8851 CENTER DR STE 505

LA MESA, CA 91942-3059

Phone: (619) 461-3880

Fax: (619) 461-3895

After Hours Phone: (619) 461-3880

Provider Gender: Male

License number: G83902

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

NPI: 1770663890
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Alvarado Hospital Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 18/120
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

THOMPSON, JOHN C

Provider ID: 24866
Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC
8851 CENTER DR STE 505
LA MESA, CA 91942-3059
Phone: (619) 461-3880
Fax:
After Hours Phone: (619) 461-3880
Provider Gender: Male
License number: G83902
NPI: 1770663890
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Alvarado Hospital Llc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

♿ Accessibility: P, EB, IB, E, R, T, W
Hours: M-F 9AM-5PM, SA 9AM-5PM
Website: www.bnmg.org
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

THOMPSON, JOHN C , MD

Provider ID: 24866
Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC
8851 CENTER DR STE 505
LA MESA, CA 91942-3059
Phone: (619) 461-3880
Fax: (619) 461-3895
After Hours Phone: (619) 461-3880
Provider Gender: Male
License number: G83902
NPI: 1770663890
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Alvarado Hospital Llc
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No

♿ Accessibility: P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

THOMPSON, JOHN C

Provider ID: 262352
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
8851 CENTER DR STE 505
LA MESA, CA 91942-3059
Phone: (619) 461-3880
Fax: (619) 461-3895
After Hours Phone: (619) 461-3880
Provider Gender: Male
License number: G83902
NPI: 1770663890
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Alvarado Hospital Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

NEUROLOGY

CHENG, YU D

Provider ID: 26929
Board Certified Specialty: No
ER KAI GAO MD INC
8851 CENTER DR STE 603
LA MESA, CA 91942-3063

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 667-4545
Fax: (619) 667-4550
After Hours Phone: (619) 667-4545
Provider Gender: Male
License number: A79461
NPI: 1336226471
Provider English Spoken: Yes
Provider Language(s) Spoken: Chinese, Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 9AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GAO, ER-KAI

Provider ID: 26677
Board Certified Specialty: No
ER KAI GAO MD INC
8851 CENTER DR STE 603
LA MESA, CA 91942-3063
Phone: (619) 667-4545
Fax: (619) 667-4550
After Hours Phone: (619) 667-4545
Provider Gender: Male
License number: A71659
NPI: 1710064944
Provider English Spoken: Yes
Provider Language(s) Spoken: Chinese, Mandarin
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital
Medi-Cal Open Panel: No

Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 9AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MOHAMMAD, AHMAD SHAH

Provider ID: 212771
Board Certified Specialty: No
HEALTH EXCEL IPA INC
8851 CENTER DR STE 307
LA MESA, CA 91942-6006
Phone: (619) 337-7900
Fax: (619) 337-7902
After Hours Phone: (619) 337-7900
Provider Gender: Male
License number: A98831
NPI: 1902973472
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Farsi, French, German, Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

MOHAMMAD, AHMAD SHAH, MD

Provider ID: 39868
Board Certified Specialty: No
EAST COUNTY NEUROLOGY ASSOCIATES INC
8851 CENTER DR STE 307
LA MESA, CA 91942-6006
Phone: (619) 337-7900
Fax: (619) 337-7902
After Hours Phone: (619) 337-7900
Provider Gender: Male
License number: A98831
NPI: 1902973472
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Farsi, French, German, Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

MOHAMMAD, AHMAD SHAH

Provider ID: 39868
Board Certified Specialty: No
EAST COUNTY NEUROLOGY ASSOCIATES INC
8851 CENTER DR STE 307
LA MESA, CA 91942-6006

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 337-7900
 Fax: (619) 337-7902
 After Hours Phone: (619) 337-7900
 Provider Gender: Male
 License number: A98831
 NPI: 1902973472
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Arabic, Farsi, French, German, Spanish
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Sharp Chula Vista Med Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc

ONCOLOGY MEDICAL

BATRA, REEMA
 Provider ID: 58612
 Board Certified Specialty: No
 CANCER CENTER ONCOLOGY MEDICAL GROUP INC
 5555 GROSSMONT CENTER DR
 LA MESA, CA 91942-3019
 Phone: (619) 644-3030
 Fax:
 After Hours Phone: (619) 644-3030
 Provider Gender: Female
 License number: A118846

NPI: 1629286505
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Hindi, Mandarin
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-F 8:30AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

MEDIC, IGOR
 Provider ID: 119509
 Board Certified Specialty: No
 CANCER CENTER ONCOLOGY MEDICAL GROUP INC
 5555 GROSSMONT CENTER DR
 LA MESA, CA 91942-3019
 Phone: (619) 644-3030
 Fax:

After Hours Phone: (619) 644-3030
 Provider Gender: Male
 License number: A146970
 NPI: 1154618593
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Arabic, Serbian, Spanish
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W

Hours: M-F 8:30AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

OPHTHALMOLOGY

ABDALLAH, WALID F
 Provider ID: 269258
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 8851 CENTER DR # 406
 LA MESA, CA 91942-3017
 Phone: (619) 425-7755
 Fax: (619) 425-2138
 After Hours Phone: (619) 425-7755
 Provider Gender: Male
 License number: A146829
 NPI: 1871912717
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Arabic, Korean, Mandarin, Spanish
 Cultural Competency: No
 Hospital Affiliation: Good Samaritan Hospital Los Angeles, Childrens Hosp Of Los Angeles
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc

BINDER, NICHOLAS R
 Provider ID: 262355
 Board Certified Specialty: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 5565 GROSSMONT CENTER DR STE 2 # 3 LA MESA, CA 91942-3037 Phone: (619) 697-4600 Fax: (619) 464-5526 After Hours Phone: (619) 697-4600 Provider Gender: Male License number: A124698 NPI: 1306076716 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Scripps Memorial Hospital, Grossmont Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>	<p>NPI: 1306076716 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Scripps Memorial Hospital, Grossmont Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>	<p>No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Health Excel Ipa Inc</p>
<p>BINDER, NICHOLAS R , MD Provider ID: 268754 Board Certified Specialty: No COMMUNITY CARE IPA LLC 5565 GROSSMONT CENTER DR STE 2 # 3 LA MESA, CA 91942-3037 Phone: (619) 697-4600 Fax: (619) 464-5526 After Hours Phone: (619) 697-4600 Provider Gender: Male License number: A124698</p>	<p>CARRABY, ARNETT Provider ID: 116394 Board Certified Specialty: No CALIFORNIA RETINA ASSOCS 8851 CENTER DR # 406 LA MESA, CA 91942-3017 Phone: (619) 425-7755 Fax: After Hours Phone: (619) 425-7755 Provider Gender: Male License number: G47836 NPI: 1366530792 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish, Tagalog, Vietnamese Cultural Competency: No Hospital Affiliation: El Centro Regional Medical Center, Pioneers Memorial Hospital, Alvarado Hospital Llc Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL):</p>	<p>CARRABY, ARNETT Provider ID: 212808 Board Certified Specialty: No HEALTH EXCEL IPA INC 8851 CENTER DR # 406 LA MESA, CA 91942-3017 Phone: (619) 425-7755 Fax: (619) 425-2138 After Hours Phone: (619) 425-7755 Provider Gender: Male License number: G47836 NPI: 1366530792 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish, Tagalog, Vietnamese Cultural Competency: No Hospital Affiliation: El Centro Regional Medical Center, Pioneers Memorial Hospital, Alvarado Hospital Llc Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Health Excel Ipa Inc</p>
		<p>CARRABY, ARNETT, MD Provider ID: 269060 Board Certified Specialty: No</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

COMMUNITY CARE IPA LLC
 8851 CENTER DR # 406
 LA MESA, CA 91942-3017
 Phone: (619) 425-7755
 Fax: (619) 425-2138
 After Hours Phone: (619) 425-7755
 Provider Gender: Male
 License number: G47836
 NPI: 1366530792
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish, Tagalog, Vietnamese
 Cultural Competency: No
 Hospital Affiliation: El Centro Regional Medical Center, Pioneers Memorial Hospital, Alvarado Hospital Llc
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc

CHAVEZ, CESAR T , MD
 Provider ID: 268778
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 8851 CENTER DR # 406
 LA MESA, CA 91942-3017
 Phone: (619) 425-7755
 Fax: (619) 425-2138
 After Hours Phone: (619) 425-7755
 Provider Gender: Male
 License number: G51615
 NPI: 1720082563
 Provider English Spoken: Yes
 Provider Language(s) Spoken:

Spanish
 Cultural Competency: No
 Hospital Affiliation: El Centro Regional Medical Center, Paradise Valley Hospital, Scripps Mercy Hospital, Scripps Memorial Hospital Encinitas
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc


DELENGOCKY, TAYSON
 Provider ID: 116393
 Board Certified Specialty: No
 CALIFORNIA RETINA ASSOCS
 8851 CENTER DR # 406
 LA MESA, CA 91942-3017
 Phone: (619) 425-7755
 Fax:
 After Hours Phone: (619) 425-7755
 Provider Gender: Male
 License number: 20A12784
 NPI: 1164637153
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Farsi, French, Spanish, Tagalog, Vietnamese
 Cultural Competency: No
 Hospital Affiliation: El Centro Regional Medical Center, Alvarado Hospital Llc
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W

Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc
DELENGOCKY, TAYSON
 Provider ID: 265163
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 8851 CENTER DR # 406
 LA MESA, CA 91942-3017
 Phone: (619) 425-7755
 Fax: (619) 425-2138
 After Hours Phone: (619) 425-7755
 Provider Gender: Male
 License number: 20A12784
 NPI: 1164637153
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Farsi, French, Spanish, Tagalog, Vietnamese
 Cultural Competency: No
 Hospital Affiliation: El Centro Regional Medical Center, Alvarado Hospital Llc
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc


DELENGOCKY, TAYSON
 Provider ID: 268959
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 8851 CENTER DR # 406


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D. Directorio de proveedores de atención especializada

LA MESA, CA 91942-3017
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619) 425-7755
Provider Gender: Male
License number: 20A12784
NPI: 1164637153
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, French, Spanish, Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation: El Centro Regional Medical Center, Alvarado Hospital Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: 
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

ECHEGOYEN, JULIO C , MD
Provider ID: 268935
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
8851 CENTER DR # 406
LA MESA, CA 91942-3017
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619) 425-7755
Provider Gender: Male
License number: A121431
NPI: 1770801540
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Paradise Valley Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: 
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

FISH, STEVEN M
Provider ID: 269169
Board Certified Specialty: No
HEALTH EXCEL IPA INC
5565 GROSSMONT CENTER DR STE 551
LA MESA, CA 91942-3078
Phone: (619) 465-2020
Fax: (844) 897-3788
After Hours Phone: (619) 465-2020
Provider Gender: Male
License number: A164497
NPI: 1760877120
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: 
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

GOLLOGLY, HEIDRUN E
Provider ID: 262383
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
5565 GROSSMONT CENTER DR STE 551
LA MESA, CA 91942-3078
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800) 898-2020
Provider Gender: Female
License number: A134761
NPI: 1477879823
Provider English Spoken: Yes
Provider Language(s) Spoken: French, German, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Adventist Health And Rideout, Grossmont Hospital, Desert Regional Med Ctr, Paradise Valley Hospital, Scripps Mercy Hospital, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: 
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

GOLLOGLY, HEIDRUN E , MD
Provider ID: 269127
Board Certified Specialty: No
COMMUNITY CARE IPA LLC

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D. Directorio de proveedores de atención especializada

5565 GROSSMONT CENTER
DR STE 551
LA MESA, CA 91942-3078
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800) 898-2020
Provider Gender: Female
License number: A134761
NPI: 1477879823
Provider English Spoken: Yes
Provider Language(s) Spoken: French, German, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Adventist Health And Rideout, Grossmont Hospital, Desert Regional Med Ctr, Paradise Valley Hospital, Scripps Mercy Hospital, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
⌘ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

GOLLOGLY, HEIDRUN E

Provider ID: 275453
Board Certified Specialty: No
HEALTH EXCEL IPA INC
5565 GROSSMONT CENTER
DR STE 551
LA MESA, CA 91942-3078

Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800) 898-2020
Provider Gender: Female
License number: A134761
NPI: 1477879823
Provider English Spoken: Yes
Provider Language(s) Spoken: French, German, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Adventist Health And Rideout, Grossmont Hospital, Desert Regional Med Ctr, Paradise Valley Hospital, Scripps Mercy Hospital, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
⌘ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

HAIGHT, BRUCE T

Provider ID: 244880
Board Certified Specialty: No
HEALTH EXCEL IPA INC
5565 GROSSMONT CENTER
DR STE 3 # 551
LA MESA, CA 91942-3007
Phone: (619) 465-2020
Fax: (844) 897-3788
After Hours Phone: (619) 465-2020
Provider Gender: Male
License number: G41117

NPI: 1427029628
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
⌘ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

HAIGHT, BRUCE T , MD

Provider ID: 269112
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
5565 GROSSMONT CENTER
DR STE 3 # 551
LA MESA, CA 91942-3007
Phone: (619) 465-2020
Fax: (844) 897-3788
After Hours Phone: (619) 465-2020
Provider Gender: Male
License number: G41117
NPI: 1427029628
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
⌘ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

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D. Directorio de proveedores de atención especializada

<p><i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc</p> <p>HO, JOSEPH, MD <i>Provider ID:</i> 268884 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 5565 GROSSMONT CENTER DR STE 2 # 3 LA MESA, CA 91942-3037 <i>Phone:</i> (800) 898-2020 <i>Fax:</i> (844) 897-3788 <i>After Hours Phone:</i> (800) 898-2020 <i>Provider Gender:</i> Male <i>License number:</i> A137389 <i>NPI:</i> 1962766451 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Chinese, Mandarin <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Temecula Valley Hospital Inc, Southwest Healthcare System Murrieta, Scripps Memorial Hospital, Desert Regional Med Ctr, Grossmont Hospital, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc</p> <p>HUDSON, HENRY L <i>Provider ID:</i> 279225 <i>Board Certified Specialty:</i> Yes HEALTH EXCEL IPA INC</p>	<p>5565 GROSSMONT CENTER DR STE 551 LA MESA, CA 91942-3078 <i>Phone:</i> (800) 898-2020 <i>Fax:</i> (844) 897-3788 <i>After Hours Phone:</i> (800) 898-2020 <i>Provider Gender:</i> Male <i>License number:</i> G76091 <i>NPI:</i> 1851349195 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Memorial Hospital, Scripps Mercy Hospital, Tri City Medical Ctr, Rady Childrens Hospital San Diego, Scripps Memorial Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Health Excel Ipa Inc</p> <p>KHANDAN, SARA <i>Provider ID:</i> 269743 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 8851 CENTER DR # 406 LA MESA, CA 91942-3017 <i>Phone:</i> (619) 425-7755 <i>Fax:</i> (619) 425-3138 <i>After Hours Phone:</i> (619) 425-7755 <i>Provider Gender:</i> Female <i>License number:</i> A155828 <i>NPI:</i> 1063850808 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i></p>	<p>Farsi, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Hemet Valley Med Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc</p> <p>KOWNACKI, JOHN <i>Provider ID:</i> 244928 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 5565 GROSSMONT CENTER DR STE 3 # 551 LA MESA, CA 91942-3007 <i>Phone:</i> (619) 465-2020 <i>Fax:</i> (844) 897-3788 <i>After Hours Phone:</i> (619) 465-2020 <i>Provider Gender:</i> Male <i>License number:</i> G84672 <i>NPI:</i> 1225189418 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial</p>
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D. Directorio de proveedores de atención especializada

Health Holdings Medical
Group-Sd

KOWNACKI, JOHN

Provider ID: 262426
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
5565 GROSSMONT CENTER
DR STE 3 # 551
LA MESA, CA 91942-3007
Phone: (619) 465-2020
Fax: (844) 897-3788
After Hours Phone: (619)
465-2020
Provider Gender: Male
License number: G84672
NPI: 1225189418
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

KOWNACKI, JOHN, MD

Provider ID: 269085
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
5565 GROSSMONT CENTER
DR STE 3 # 551
LA MESA, CA 91942-3007

Phone: (619) 465-2020
Fax: (844) 897-3788
After Hours Phone: (619)
465-2020

Provider Gender: Male
License number: G84672
NPI: 1225189418
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

MANI, MAJID

Provider ID: 116386
Board Certified Specialty: Yes
CALIFORNIA RETINA ASSOCS
8851 CENTER DR # 406
LA MESA, CA 91942-3017
Phone: (619) 425-7755
Fax:
After Hours Phone: (619)
425-7755

Provider Gender: Male
License number: A60640
NPI: 1043261373

Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Spanish

Cultural Competency: No
Hospital Affiliation: El Centro
Regional Medical Center, Sharp
Memorial Hospital, Pioneers

Memorial Hospital, Scripps
Memorial Hospital, Ucsd Medical
Ctr

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

MANI, MAJID

Provider ID: 265199
Board Certified Specialty: No
HEALTH EXCEL IPA INC
8851 CENTER DR # 406
LA MESA, CA 91942-3017
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619)
425-7755

Provider Gender: Male
License number: A60640
NPI: 1043261373

Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Spanish

Cultural Competency: No
Hospital Affiliation: El Centro
Regional Medical Center, Sharp
Memorial Hospital, Pioneers
Memorial Hospital, Scripps
Memorial Hospital, Ucsd Medical
Ctr

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p><i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc</p> <p>MANI, MAJID, MD <i>Provider ID:</i> 269194 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 8851 CENTER DR # 406 LA MESA, CA 91942-3017 <i>Phone:</i> (619) 425-7755 <i>Fax:</i> (619) 425-2138 <i>After Hours Phone:</i> (619) 425-7755 <i>Provider Gender:</i> Male <i>License number:</i> A60640 <i>NPI:</i> 1043261373 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> El Centro Regional Medical Center, Sharp Memorial Hospital, Pioneers Memorial Hospital, Scripps Memorial Hospital, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc</p> <p>MANI, NASRIN <i>Provider ID:</i> 116388 <i>Board Certified Specialty:</i> No CALIFORNIA RETINA ASSOCS 8851 CENTER DR # 406</p>	<p>LA MESA, CA 91942-3017 <i>Phone:</i> (619) 425-7755 <i>Fax:</i> <i>After Hours Phone:</i> (619) 425-7755 <i>Provider Gender:</i> Female <i>License number:</i> A40473 <i>NPI:</i> 1023061314 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic, Faroese, Farsi, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital, Sharp Memorial Hospital, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc</p> <p>MANI, NASRIN <i>Provider ID:</i> 265201 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 8851 CENTER DR # 406 LA MESA, CA 91942-3017 <i>Phone:</i> (619) 425-7755 <i>Fax:</i> (619) 425-2138 <i>After Hours Phone:</i> (619) 425-7755 <i>Provider Gender:</i> Female <i>License number:</i> A40473 <i>NPI:</i> 1023061314 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic, Faroese, Farsi, Spanish <i>Cultural Competency:</i> No</p>	<p><i>Hospital Affiliation:</i> Scripps Memorial Hospital, Sharp Memorial Hospital, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc</p> <p>MANI, NASRIN, MD <i>Provider ID:</i> 269200 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 8851 CENTER DR # 406 LA MESA, CA 91942-3017 <i>Phone:</i> (619) 425-7755 <i>Fax:</i> (619) 425-2138 <i>After Hours Phone:</i> (619) 425-7755 <i>Provider Gender:</i> Female <i>License number:</i> A40473 <i>NPI:</i> 1023061314 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic, Faroese, Farsi, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital, Sharp Memorial Hospital, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i></p>
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D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

MCGRAW, JOSEPH P , MD

Provider ID: 269699
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
5565 GROSSMONT CENTER
DR STE 551
LA MESA, CA 91942-3078
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone: (619)
465-2020
Provider Gender: Male
License number: A155228
NPI: 1588624852
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

MILLER, DOUGLAS G

Provider ID: 262448
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
5565 GROSSMONT CENTER
DR STE 2 # 3
LA MESA, CA 91942-3037

Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800)
898-2020
Provider Gender: Male
License number: G52627
NPI: 1982636031
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

MONTGOMERY, GORDON J

Provider ID: 272247
Board Certified Specialty: No
HEALTH EXCEL IPA INC
8851 CENTER DR # 406
LA MESA, CA 91942-3017
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619)
425-7755
Provider Gender: Male
License number: G31591
NPI: 1144226234
Provider English Spoken: Yes
Provider Language(s) Spoken:
Korean, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Paradise
Valley Hospital, Scripps Mercy

Hospital Chula Vista, Scripps
Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc,
Imperial Health Holdings Medical
Group-Sd

MORRISON-REYES, JOSHUA A

Provider ID: 262325
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
5565 GROSSMONT CENTER
DR STE 3 # 551
LA MESA, CA 91942-3007
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone: (619)
465-2020
Provider Gender: Male
License number: A125435
NPI: 1235366782
Provider English Spoken: Yes
Provider Language(s) Spoken:
Armenian, Cantonese, Chinese,
Indonesian, Mandarin, Spanish,
Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Scripps Memorial
Hospital, Sharp Memorial
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p> <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd </p>	<p> Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd </p> <p> MOSS, JASON M <i>Provider ID:</i> 265205 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 8851 CENTER DR # 406 LA MESA, CA 91942-3017 <i>Phone:</i> (619) 425-7755 <i>Fax:</i> (619) 425-2138 <i>After Hours Phone:</i> (619) 425-7755 <i>Provider Gender:</i> Male <i>License number:</i> A130529 <i>NPI:</i> 1386961423 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> El Centro Regional Medical Center, Scripps Memorial Hospital, Sharp Chula Vista Med Ctr, Sharp Memorial Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc </p>	<p> <i>Phone:</i> (619) 425-7755 <i>Fax:</i> (619) 425-2138 <i>After Hours Phone:</i> (619) 425-7755 <i>Provider Gender:</i> Male <i>License number:</i> A130529 <i>NPI:</i> 1386961423 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> El Centro Regional Medical Center, Scripps Memorial Hospital, Sharp Chula Vista Med Ctr, Sharp Memorial Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc </p>
<p> MORRISON-REYES, JOSHUA A , MD <i>Provider ID:</i> 269182 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 5565 GROSSMONT CENTER DR STE 3 # 551 LA MESA, CA 91942-3007 <i>Phone:</i> (619) 465-2020 <i>Fax:</i> (619) 698-1189 <i>After Hours Phone:</i> (619) 465-2020 <i>Provider Gender:</i> Male <i>License number:</i> A125435 <i>NPI:</i> 1235366782 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Armenian, Cantonese, Chinese, Indonesian, Mandarin, Spanish, Tagalog, Vietnamese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Scripps Memorial Hospital, Sharp Memorial Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, </p>	<p> MOSS, JASON M , MD <i>Provider ID:</i> 268758 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 8851 CENTER DR # 406 LA MESA, CA 91942-3017 </p>	<p> NAJAFI, DAVID J <i>Provider ID:</i> 39835 <i>Board Certified Specialty:</i> No ALLIANCE RETINA CONSULTANTS INC 8262 UNIVERSITY AVE LA MESA, CA 91942-9321 <i>Phone:</i> (619) 668-0045 <i>Fax:</i> <i>After Hours Phone:</i> (619) 668-0045 <i>Provider Gender:</i> Male <i>License number:</i> A68124 <i>NPI:</i> 1396715991 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi, Persian, Spanish </p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Sharp Memorial Hospital, Grossmont Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

PAPASTERGIU, GEORGIOS

Provider ID: 116392
Board Certified Specialty: Yes
CALIFORNIA RETINA ASSOCS
8851 CENTER DR # 406
LA MESA, CA 91942-3017
Phone: (619) 425-7755
Fax:
After Hours Phone: (619) 425-7755
Provider Gender: Male
License number: A127706
NPI: 1790054393
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Farsi, French, Greek, Italian, Spanish
Cultural Competency: No
Hospital Affiliation: El Centro Regional Medical Center, Scripps Memorial Hospital, Sharp Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd
PAPASTERGIU, GEORGIOS
Provider ID: 265203
Board Certified Specialty: No
HEALTH EXCEL IPA INC
8851 CENTER DR # 406
LA MESA, CA 91942-3017
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619) 425-7755
Provider Gender: Male
License number: A127706
NPI: 1790054393
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Farsi, French, Greek, Italian, Spanish
Cultural Competency: No
Hospital Affiliation: El Centro Regional Medical Center, Scripps Memorial Hospital, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

PAPASTERGIU, GEORGIOS, MD

PAPASTERGIU, GEORGIOS, MD

PAPASTERGIU, GEORGIOS, MD

Provider ID: 269191
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
8851 CENTER DR # 406
LA MESA, CA 91942-3017
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619) 425-7755
Provider Gender: Male
License number: A127706
NPI: 1790054393
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Farsi, French, Greek, Italian, Spanish
Cultural Competency: No
Hospital Affiliation: El Centro Regional Medical Center, Scripps Memorial Hospital, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

PATEL, GITANE

Provider ID: 262322
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
5565 GROSSMONT CENTER DR STE 2 # 3
LA MESA, CA 91942-3037

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800) 898-2020

Provider Gender: Male
License number: A108603
NPI: 1710171434

Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Gujarati, Spanish, Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Paradise Valley Hospital, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

PATEL, SARJAN H

Provider ID: 262406
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
5565 GROSSMONT CENTER DR STE 2 # 3
LA MESA, CA 91942-3037
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800) 898-2020
Provider Gender: Male
License number: A114976
NPI: 1316199326

Provider English Spoken: Yes
Provider Language(s) Spoken: Gujarati, Hindi, Spanish, Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc, Grossmont Hospital, Scripps Memorial Hospital, Paradise Valley Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

PEAIRS, JAMES J

Provider ID: 126598
Board Certified Specialty: No
CALIFORNIA RETINA ASSOCS
8851 CENTER DR # 406
LA MESA, CA 91942-3017
Phone: (619) 425-7755
Fax:

After Hours Phone: (619) 425-7755
Provider Gender: Male
License number: A155296
NPI: 1609135623
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Sharp Chula Vista Med Ctr, El Centro Regional Medical Center, Sharp Memorial Hospital

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

PEAIRS, JAMES J , MD

Provider ID: 268820
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
8851 CENTER DR # 406
LA MESA, CA 91942-3017
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619) 425-7755

Provider Gender: Male
License number: A155296
NPI: 1609135623
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Sharp Chula Vista Med Ctr, El Centro Regional Medical Center, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

PONS, MAURICIO E

Provider ID: 116389
Board Certified Specialty: No
CALIFORNIA RETINA ASSOCS
8851 CENTER DR # 406
LA MESA, CA 91942-3017
Phone: (619) 425-7755
Fax:
After Hours Phone: (619)
425-7755
Provider Gender: Male
License number: A87650
NPI: 1376723759
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, El Centro
Regional Medical Center, Sharp
Memorial Hospital, Scripps
Mercy Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

PONS, MAURICIO E

Provider ID: 265257
Board Certified Specialty: No
HEALTH EXCEL IPA INC
8851 CENTER DR # 406
LA MESA, CA 91942-3017
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619)
425-7755

Provider Gender: Male
License number: A87650
NPI: 1376723759
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, El Centro
Regional Medical Center, Sharp
Memorial Hospital, Scripps
Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

PONS, MAURICIO E , MD

Provider ID: 269243
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
8851 CENTER DR # 406
LA MESA, CA 91942-3017
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619)
425-7755
Provider Gender: Male
License number: A87650
NPI: 1376723759
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, El Centro
Regional Medical Center, Sharp
Memorial Hospital, Scripps

Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

PRABHU, SUJATA P

Provider ID: 262395
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
5565 GROSSMONT CENTER
DR STE 2 # 3
LA MESA, CA 91942-3037
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800)
898-2020
Provider Gender: Female
License number: A115965
NPI: 1982872552
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Tagalog, Telugu,
Vietnamese
Cultural Competency: No
Hospital Affiliation: Paradise
Valley Hospital, Alvarado
Community Hospital, Scripps
Memorial Hospital, Grossmont
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

PRABHU, SUJATA P

Provider ID: 262396

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
5565 GROSSMONT CENTER
DR STE 3 # 551

LA MESA, CA 91942-3007

Phone: (800) 898-2020

Fax: (844) 897-3788

After Hours Phone: (800)
898-2020

Provider Gender: Female

License number: A115965

NPI: 1982872552

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Tagalog, Telugu,
Vietnamese

Cultural Competency: No

Hospital Affiliation: Paradise

Valley Hospital, Alvarado
Community Hospital, Scripps
Memorial Hospital, Grossmont
Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

RAJSBAUM, MARTIN

Provider ID: 117838

Board Certified Specialty: No
CALIFORNIA RETINA ASSOCS
8851 CENTER DR # 406
LA MESA, CA 91942-3017

Phone: (619) 425-7755

Fax:

After Hours Phone: (619)
425-7755

Provider Gender: Male

License number: A42670

NPI: 1912999400

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, Russian, Spanish,
Tagalog

Cultural Competency: No

Hospital Affiliation: Sharp Chula
Vista Med Ctr, Scripps Memorial
Hospital Encinitas, Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

RAJSBAUM, MARTIN

Provider ID: 265197

Board Certified Specialty: No
HEALTH EXCEL IPA INC
8851 CENTER DR # 406
LA MESA, CA 91942-3017

Phone: (619) 425-7755

Fax: (619) 425-2138

After Hours Phone: (619)
425-7755

Provider Gender: Male

License number: A42670

NPI: 1912999400

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, Russian, Spanish,
Tagalog

Cultural Competency: No

Hospital Affiliation: Sharp Chula
Vista Med Ctr, Scripps Memorial
Hospital Encinitas, Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

RICE, LAWRENCE S , MD

Provider ID: 269038

Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC
5565 GROSSMONT CENTER
DR STE 551

LA MESA, CA 91942-3078

Phone: (619) 465-2020

Fax: (619) 698-1189

After Hours Phone: (619)

465-2020

Provider Gender: Male

License number: C31021

NPI: 1922060805

Provider English Spoken: Yes

Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Alvarado Hospital Llc, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

RICE, LAWRENCE S

Provider ID: 272083
Board Certified Specialty: Yes
HEALTH EXCEL IPA INC
5565 GROSSMONT CENTER DR STE 551
LA MESA, CA 91942-3078
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone: (619) 465-2020
Provider Gender: Male
License number: C31021
NPI: 1922060805
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Alvarado Hospital Llc, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 8/200
American Sign Language (ASL):

No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

SASSANI, PATRICK P

Provider ID: 265194
Board Certified Specialty: No
HEALTH EXCEL IPA INC
8851 CENTER DR # 406
LA MESA, CA 91942-3017
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619) 425-7755
Provider Gender: Male
License number: A150205
NPI: 1033411061
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Sharp Chula Vista Med Ctr, El Centro Regional Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

Provider ID: 269077
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
8851 CENTER DR # 406
LA MESA, CA 91942-3017
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619) 425-7755
Provider Gender: Male
License number: A150205
NPI: 1033411061
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Sharp Chula Vista Med Ctr, El Centro Regional Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

SCHER, BARRY M , MD

Provider ID: 268829
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
8851 CENTER DR # 406
LA MESA, CA 91942-3017
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619) 425-7755
Provider Gender: Male
License number: G23827
NPI: 1235106899

SASSANI, PATRICK P , MD

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Paradise Valley Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SKAF, AYHAM R

Provider ID: 116391
Board Certified Specialty: No
 CALIFORNIA RETINA ASSOCS
 8851 CENTER DR # 406
 LA MESA, CA 91942-3017
Phone: (619) 425-7755
Fax:
After Hours Phone: (619) 425-7755
Provider Gender: Male
License number: A120584
NPI: 1285888628
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Spanish
Cultural Competency: No
Hospital Affiliation: El Centro Regional Medical Center, Sharp Memorial Hospital, Scripps Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

SKAF, AYHAM R

Provider ID: 265184
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 8851 CENTER DR # 406
 LA MESA, CA 91942-3017
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619) 425-7755
Provider Gender: Male
License number: A120584
NPI: 1285888628
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Spanish
Cultural Competency: No
Hospital Affiliation: El Centro Regional Medical Center, Sharp Memorial Hospital, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

SKAF, AYHAM R, MD

Provider ID: 269075
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC

8851 CENTER DR # 406
 LA MESA, CA 91942-3017
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619) 425-7755
Provider Gender: Male
License number: A120584
NPI: 1285888628
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Spanish
Cultural Competency: No
Hospital Affiliation: El Centro Regional Medical Center, Sharp Memorial Hospital, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

WASSERSTROM, JEFFREY P, MD

Provider ID: 66034
Board Certified Specialty: Yes
 COMMUNITY CARE IPA LLC
 5565 GROSSMONT CENTER DR STE 3 # 551
 LA MESA, CA 91942-3007
Phone: (619) 698-1088
Fax: (619) 698-1189
After Hours Phone: (619) 698-1088
Provider Gender: Male
License number: G54813
NPI: 1710922687
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

ZABANEH, ALEXANDER I

Provider ID: 214404
Board Certified Specialty: No
HEALTH EXCEL IPA INC
5565 GROSSMONT CENTER
DR STE 3
LA MESA, CA 91942-3007
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800) 898-2020
Provider Gender: Male
License number: A154697
NPI: 1346687233
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Paradise Valley Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

ZABANEH, ALEXANDER I

Provider ID: 262170
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
5565 GROSSMONT CENTER
DR STE 3
LA MESA, CA 91942-3007
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800) 898-2020
Provider Gender: Male
License number: A154697
NPI: 1346687233
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Paradise Valley Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

ZABANEH, ALEXANDER I , MD

Provider ID: 269123
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
5565 GROSSMONT CENTER
DR STE 551
LA MESA, CA 91942-3078
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800) 898-2020
Provider Gender: Male
License number: A154697
NPI: 1346687233
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Paradise Valley Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

OTOLARYNGOLOGY

BUSINO, ROWLEY S

Provider ID: 262172
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

5565 GROSSMONT CENTER
DR STE 3 # 101
LA MESA, CA 91942-3007
Phone: (619) 464-3353
Fax: (619) 464-6720
After Hours Phone: (619) 464-3353
Provider Gender: Female
License number: A112508
NPI: 1396997664
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, French, Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, South Coast Global Medical Center Inc, Orange County Global Medical Center Inc, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Sharp Chula Vista Med Ctr, Rady Childrens Hospital San Diego, Alvarado Hospital Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

BUSINO, ROWLEY S , MD
Provider ID: 53306
Board Certified Specialty: No
EAR NOSE AND THROAT OF SAN DIEGO A MED CORP
5565 GROSSMONT CENTER
DR STE 101
LA MESA, CA 91942-3021

Phone: (619) 464-3353
Fax: (619) 464-6720
After Hours Phone: (619) 464-3353
Provider Gender: Female
License number: A112508
NPI: 1396997664
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, French, Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, South Coast Global Medical Center Inc, Orange County Global Medical Center Inc, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Sharp Chula Vista Med Ctr, Rady Childrens Hospital San Diego, Alvarado Hospital Llc
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

DRISKILL, BRENT R
Provider ID: 121484
Board Certified Specialty: No
EAR NOSE AND THROAT OF SAN DIEGO A MED CORP
5565 GROSSMONT CENTER
DR STE 101
LA MESA, CA 91942-3021
Phone: (619) 464-3353
Fax: (619) 464-6720
After Hours Phone: (619) 464-3353

Provider Gender: Male
License number: C146197
NPI: 1477612372
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Sharp Chula Vista Med Ctr, Sharp Memorial Hospital, Alvarado Hosp Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

DRISKILL, BRENT R
Provider ID: 121484
Board Certified Specialty: No
EAR NOSE AND THROAT OF SAN DIEGO A MED CORP
5565 GROSSMONT CENTER
DR STE 101
LA MESA, CA 91942-3021
Phone: (619) 464-3353
Fax: (619) 464-6720
After Hours Phone: (619) 464-3353
Provider Gender: Male
License number: C146197
NPI: 1477612372
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Sharp Chula Vista Med Ctr, Sharp Memorial Hospital,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Alvarado Hosp Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

MCCALLION, PATRICK G , MD
Provider ID: 26600
Board Certified Specialty: Yes
EAR NOSE AND THROAT OF
SAN DIEGO A MED CORP
5565 GROSSMONT CENTER
DR STE 3 # 101
LA MESA, CA 91942-3007
Phone: (619) 464-3353
Fax: (619) 464-6720
After Hours Phone: (619)
464-3353
Provider Gender: Male
License number: G64989
NPI: 1134144454
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Alvarado Hospital Llc
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

MCCALLION, PATRICK G
Provider ID: 26600
Board Certified Specialty: Yes
EAR NOSE AND THROAT OF
SAN DIEGO A MED CORP
5565 GROSSMONT CENTER
DR STE 3 # 101
LA MESA, CA 91942-3007
Phone: (619) 464-3353
Fax: (619) 464-6720
After Hours Phone: (619)
464-3353
Provider Gender: Male
License number: G64989
NPI: 1134144454
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Alvarado Hospital Llc
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

MCCALLION, PATRICK G
Provider ID: 278439
Board Certified Specialty: Yes
HEALTH EXCEL IPA INC

5565 GROSSMONT CENTER
DR STE 3 # 101
LA MESA, CA 91942-3007
Phone: (619) 464-3353
Fax: (619) 464-6720
After Hours Phone: (619)
464-3353
Provider Gender: Male
License number: G64989
NPI: 1134144454
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Alvarado Hospital Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

MOLES, JEREMIAH J
Provider ID: 46814
Board Certified Specialty: No
EAR NOSE AND THROAT OF
SAN DIEGO A MED CORP
5565 GROSSMONT CENTER
DR STE 3 # 101
LA MESA, CA 91942-3007
Phone: (619) 464-3353
Fax: (619) 464-6720
After Hours Phone: (619)
464-3353
Provider Gender: Male
License number: A112009
NPI: 1003067745

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Farsi, Spanish, Tongan
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

MOLES, JEREMIAH J , MD

Provider ID: 46814
Board Certified Specialty: No
 EAR NOSE AND THROAT OF SAN DIEGO A MED CORP
 5565 GROSSMONT CENTER DR STE 3 # 101
 LA MESA, CA 91942-3007
Phone: (619) 464-3353
Fax: (619) 464-6720
After Hours Phone: (619) 464-3353
Provider Gender: Male
License number: A112009
NPI: 1003067745
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Farsi, Spanish, Tongan
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes

Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

PATSIAS, ALEXIS, MD

Provider ID: 243551
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 5565 GROSSMONT CENTER DR STE 101
 LA MESA, CA 91942-3021
Phone: (619) 464-3353
Fax: (619) 464-6720
After Hours Phone: (619) 464-3353
Provider Gender: Male
License number: A160436
NPI: 1326452855
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Sharp Chula Vista Med Ctr, Sharp Memorial Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s): IPA: Community Care Ipa Llc,

Health Excel Ipa Inc
PITZER, GEOFFREY B , MD
Provider ID: 103378
Board Certified Specialty: Yes
 EAR NOSE AND THROAT OF SAN DIEGO A MED CORP
 5565 GROSSMONT CENTER DR STE 3 # 101
 LA MESA, CA 91942-3007
Phone: (619) 464-3353
Fax: (619) 464-6720
After Hours Phone: (619) 464-3353
Provider Gender: Male
License number: A125888
NPI: 1770673238
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Alvarado Hospital Llc, Sharp Memorial Hospital, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s): IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

PITZER, GEOFFREY B
Provider ID: 103378
Board Certified Specialty: Yes
 MOUNTAIN HLTH & COMM SERVICES

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D. Directorio de proveedores de atención especializada

5565 GROSSMONT CENTER
DR STE 3 # 101
LA MESA, CA 91942-3007
Phone: (619) 464-3353
Fax: (619) 464-6720
After Hours Phone: (619)
464-3353
Provider Gender: Male
License number: A125888
NPI: 1770673238
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Alvarado Hospital Llc,
Sharp Memorial Hospital, Sharp
Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

PITZER, GEOFFREY B

Provider ID: 103378
Board Certified Specialty: Yes
EAR NOSE AND THROAT OF
SAN DIEGO A MED CORP
5565 GROSSMONT CENTER
DR STE 3 # 101
LA MESA, CA 91942-3007
Phone: (619) 464-3353
Fax: (619) 464-6720
After Hours Phone: (619)
464-3353
Provider Gender: Male

License number: A125888
NPI: 1770673238
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Alvarado Hospital Llc,
Sharp Memorial Hospital, Sharp
Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

PITZER, GEOFFREY B , MD

Provider ID: 103378
Board Certified Specialty: Yes
MOUNTAIN HLTH & COMM
SERVICES
5565 GROSSMONT CENTER
DR STE 3 # 101
LA MESA, CA 91942-3007
Phone: (619) 464-3353
Fax: (619) 464-6720
After Hours Phone: (619)
464-3353
Provider Gender: Male
License number: A125888
NPI: 1770673238
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Alvarado Hospital Llc,

Sharp Memorial Hospital, Sharp
Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

PITZER, GEOFFREY B

Provider ID: 278426
Board Certified Specialty: Yes
HEALTH EXCEL IPA INC
5565 GROSSMONT CENTER
DR STE 3 # 101
LA MESA, CA 91942-3007
Phone: (619) 464-3353
Fax: (619) 464-6720
After Hours Phone: (619)
464-3353
Provider Gender: Male
License number: A125888
NPI: 1770673238
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Alvarado Hospital Llc,
Sharp Memorial Hospital, Sharp
Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p><i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>	<p>5565 GROSSMONT CENTER DR LA MESA, CA 91942-3020 <i>Phone:</i> (619) 464-3353 <i>Fax:</i> (619) 464-6720 <i>After Hours Phone:</i> (619) 464-3353 <i>Provider Gender:</i> Male <i>License number:</i> A92839 <i>NPI:</i> 1558550053</p>	<p><i>Phone:</i> (619) 464-3353 <i>Fax:</i> (619) 464-6720 <i>After Hours Phone:</i> (619) 464-3353 <i>Provider Gender:</i> Male <i>License number:</i> A92839 <i>NPI:</i> 1558550053 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic, German, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Alvarado Hospital Llc, Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Sharp Chula Vista Med Ctr, Sharp Memorial Hospital, Sharp Coronado Hosp And Healthcare Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>
<p>RENSINK, MICHAEL J , MD <i>Provider ID:</i> 269082 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 5565 GROSSMONT CENTER DR STE 3 # 101 LA MESA, CA 91942-3007 <i>Phone:</i> (619) 464-3353 <i>Fax:</i> (619) 464-6720 <i>After Hours Phone:</i> (619) 464-3353 <i>Provider Gender:</i> Male <i>License number:</i> G20200 <i>NPI:</i> 1629001177 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr, Grossmont Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc</p>	<p><i>Provider Gender:</i> Male <i>License number:</i> A92839 <i>NPI:</i> 1558550053 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic, German, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Scripps Mercy Hospital, Sharp Memorial Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Sharp Chula Vista Med Ctr, Alvarado Hospital Llc, Sharp Coronado Hosp And Healthcare Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>	<p>SCHALCH LEPE, PAUL, MD <i>Provider ID:</i> 278433 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 5565 GROSSMONT CENTER DR STE 101 LA MESA, CA 91942-3021 <i>Phone:</i> (619) 464-3353 <i>Fax:</i> (619) 464-6720 <i>After Hours Phone:</i> (619) 464-3353</p>
<p>SCHALCH LEPE, PAUL, MD <i>Provider ID:</i> 122525 <i>Board Certified Specialty:</i> No MOUNTAIN HLTH & COMM SERVICES</p>	<p>SCHALCH LEPE, PAUL, MD <i>Provider ID:</i> 269980 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 5565 GROSSMONT CENTER DR STE 101 LA MESA, CA 91942-3021</p>	<p>SCHALCH LEPE, PAUL <i>Provider ID:</i> 278433 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 5565 GROSSMONT CENTER DR STE 101 LA MESA, CA 91942-3021 <i>Phone:</i> (619) 464-3353 <i>Fax:</i> (619) 464-6720 <i>After Hours Phone:</i> (619) 464-3353</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Male
License number: A92839
NPI: 1558550053
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, German, Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Alvarado Hospital Llc, Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Sharp Chula Vista Med Ctr, Sharp Memorial Hospital, Sharp Coronado Hosp And Healthcare Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

SKELTON, SEAN C

Provider ID: 122638

Board Certified Specialty: Yes
 EAR NOSE AND THROAT OF SAN DIEGO A MED CORP
 5565 GROSSMONT CENTER
 DR STE 3 # 101

LA MESA, CA 91942-3007

Phone: (619) 464-3353

Fax: (619) 464-6720

After Hours Phone: (619)

464-3353

Provider Gender: Male

License number: 20A7852

NPI: 1063592277

Provider English Spoken: Yes No

Provider Language(s) Spoken: Japanese

Cultural Competency: No

Hospital Affiliation: Grossmont Hospital, Sharp Chula Vista Med Ctr, Sharp Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

SKELTON, SEAN C

Provider ID: 269028

Board Certified Specialty: Yes
 COMMUNITY CARE IPA LLC
 5565 GROSSMONT CENTER
 DR STE 3 # 101

LA MESA, CA 91942-3007

Phone: (619) 464-3353

Fax: (619) 464-6720

After Hours Phone: (619)

464-3353

Provider Gender: Male

License number: 20A7852

NPI: 1063592277

Provider English Spoken: Yes

Provider Language(s) Spoken: Japanese

Cultural Competency: No

Hospital Affiliation: Grossmont Hospital, Sharp Chula Vista Med Ctr, Sharp Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

SKELTON, SEAN C

Provider ID: 278438

Board Certified Specialty: Yes
 HEALTH EXCEL IPA INC
 5565 GROSSMONT CENTER
 DR STE 3 # 101

LA MESA, CA 91942-3007

Phone: (619) 464-3353

Fax: (619) 464-6720

After Hours Phone: (619)

464-3353

Provider Gender: Male

License number: 20A7852

NPI: 1063592277

Provider English Spoken: Yes

Provider Language(s) Spoken: Japanese

Cultural Competency: No

Hospital Affiliation: Grossmont Hospital, Sharp Chula Vista Med Ctr, Sharp Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

PEDIATRIC EMERGENCY MEDICINE

JOSHI, WEENA E

Provider ID: 262233

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

5565 GROSSMONT CENTER
DR STE 2 # 2

LA MESA, CA 91942-3037

Phone: (619) 713-5375

Fax: (619) 713-5379

After Hours Phone: (619)
713-5375

Provider Gender: Female

License number: A91208

NPI: 1376862177

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,
Pomerado Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

KANTHARIA, TINA H

Provider ID: 206290

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

5565 GROSSMONT CENTER
DR # 22

LA MESA, CA 91942-3020

Phone: (619) 713-5375

Fax: (619) 713-5379

After Hours Phone: (619)
713-5375

Provider Gender: Female

License number: A126911

NPI: 1659632362

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

KAO, DANIEL J

Provider ID: 206407

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

5565 GROSSMONT CENTER
DR STE 2

LA MESA, CA 91942-3037

Phone: (619) 713-5375

Fax: (619) 713-5379

After Hours Phone: (619)
713-5375

Provider Gender: Male

License number: A90174

NPI: 1982917894

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

VARGAS, JACLYN

Provider ID: 285936

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

5555 GROSSMONT CENTER
DR

LA MESA, CA 91942-3019

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)
966-6710

Provider Gender: Female

License number: A144447

NPI: 1619359718

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,
Lac Usc Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

PEDIATRIC PULMONOLOGY

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

DUONG, THU A

Provider ID: 260355
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
5565 GROSSMONT CENTER
DR STE 2 # 2
LA MESA, CA 91942-3037
Phone: (619) 713-5375
Fax: (619) 713-5379
After Hours Phone: (619) 713-5375
Provider Gender: Female
License number: A127187
NPI: 1326309881
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

License number: A45273
NPI: 1982686200
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Hindi, Spanish, Syriac,
Telugu
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Rady Childrens
Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/21
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health
Plan Direct

DE LA ROSA, IVONNE E

Provider ID: 206028
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
5565 GROSSMONT CENTER
DR STE 2
LA MESA, CA 91942-3037
Phone: (619) 713-5375
Fax: (619) 713-5379
After Hours Phone: (619) 713-5375
Provider Gender: Female
License number: A49734
NPI: 1174695795
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas,
Scripps Memorial Hospital, Sharp
Memorial Hospital, Rady
Childrens Hospital San Diego, El
Centro Regional Medical Center,
Valley Childrens Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

CLAY, CORRIE T

Provider ID: 278807
Board Certified Specialty: No
BLUE SHIELD PROMISE
HEALTH PLAN DIRECT
8881 FLETCHER PKWY STE
200
LA MESA, CA 91942-3135
Phone: (619) 464-6434
Fax: (619) 464-5109
After Hours Phone: (619)
464-6434
Provider Gender: Female
License number: A91977
NPI: 1437207750
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Grossmont Hospital, Sharp Mary
Birch Hosp For Women And
Newborns
Medi-Cal Open Panel: Yes

PEDIATRICS

ADIGOPULA, BINA, MD

Provider ID: 218149
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
6942 UNIVERSITY AVE STE A
LA MESA, CA 91942-5963
Phone: (619) 698-2184
Fax: (619) 698-2084
After Hours Phone: (619)
698-2184
Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

IPA: Rady Childrens Health Network

DUONG, THU A

Provider ID: 103010
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942-3037
Phone: (619) 713-5375
Fax:
After Hours Phone: (619) 713-5375
Provider Gender: Female
License number: A127187
NPI: 1326309881
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

LANGLEY, GREGORY H

Provider ID: 205699
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
5565 GROSSMONT CENTER DR STE 2 # 2
LA MESA, CA 91942-3037

Phone: (619) 713-5375
Fax: (619) 713-5379
After Hours Phone: (619) 713-5375
Provider Gender: Male
License number: G88047
NPI: 1427049675
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PARKER, PAUL C

Provider ID: 276193
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
5555 GROSSMONT CENTER DR
LA MESA, CA 91942-3019
Phone: (619) 713-5375
Fax: (619) 713-5379
After Hours Phone: (619) 713-5375
Provider Gender: Male
License number: A54747
NPI: 1841202710
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Marian Regional Medical Center, Rady Childrens Hospital San Diego

Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SARWAR, NADIA

Provider ID: 257470
Board Certified Specialty: No
BLUE SHIELD PROMISE HEALTH PLAN DIRECT
5565 GROSSMONT CENTER DR STE 2 # 2
LA MESA, CA 91942-3037
Phone: (619) 713-5375
Fax: (619) 713-5379
After Hours Phone: (619) 713-5375
Provider Gender: Female
License number: C53771
NPI: 1093729022
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Urdu
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health Plan Direct

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D. Directorio de proveedores de atención especializada

WANG, EMILY J

Provider ID: 126803
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN
5565 GROSSMONT CENTER
DR STE 2
LA MESA, CA 91942-3037
Phone: (619) 713-5375
Fax:
After Hours Phone: (619)
713-5375
Provider Gender: Female
License number: A89393
NPI: 1427142363
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Scripps
Memorial Hospital Encinitas,
Rady Childrens Hospital San
Diego, Scripps Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

PHYSICAL MEDICINE / REHABILITATION

HURSHMAN, ALAN B

Provider ID: 259519
Board Certified Specialty: No
HEALTH EXCEL IPA INC
5360 JACKSON DR STE 100

LA MESA, CA 91942-3012
Phone: (619) 713-6514
Fax: (858) 430-3146
After Hours Phone: (619)
713-6514
Provider Gender: Male
License number: C155336
NPI: 1326031980
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

PHYSICIANS ASSISTANT

BARKER, SCOTT H

Provider ID: 269071
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
5565 GROSSMONT CENTER
DR STE 112
LA MESA, CA 91942-3021
Phone: (619) 465-0083
Fax: (619) 465-2267
After Hours Phone: (619)
465-0083
Provider Gender: Male
License number: PA22121
NPI: 1073886289
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado
Hospital Llc
Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

ELO, KRISTIN M , NPA

Provider ID: 241862
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
5555 GROSSMONT CENTER
DR
LA MESA, CA 91942-3019
Phone: (619) 644-3030
Fax:
After Hours Phone: (619)
644-3030
Provider Gender: Female
License number: PA19305
NPI: 1164664306

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

ELO, KRISTIN M

Provider ID: 55181
Board Certified Specialty: No
CANCER CENTER ONCOLOGY
MEDICAL GROUP INC

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D. Directorio de proveedores de atención especializada

5555 GROSSMONT CENTER
DR
LA MESA, CA 91942-3019
Phone: (619) 644-3030
Fax:
After Hours Phone: (619)
644-3030
Provider Gender: Female
License number: PA19305
NPI: 1164664306
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8:30AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

HOLM, TYLER A , NPA

Provider ID: 241022
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
8851 CENTER DR STE 601
LA MESA, CA 91942-3062
Phone: (619) 441-9811
Fax:
After Hours Phone: (619)
441-9811
Provider Gender: Male
License number: PA55864
NPI: 1326524299
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital

Medi-Cal Open Panel: Yes
Min/Max Age: 18/99
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

KAUR, LOVEPREET

Provider ID: 279947
Board Certified Specialty: No
HEALTH EXCEL IPA INC
7339 EL CAJON BLVD STE I
LA MESA, CA 91942-7435
Phone: (619) 698-0606
Fax: (619) 698-0609
After Hours Phone: (619)
698-0606
Provider Gender: Female
License number: PA58521
NPI: 1992329759
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

KEYES, AMY J , NPA

Provider ID: 247011
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
5565 GROSSMONT CENTER
DR STE 101

LA MESA, CA 91942-3021
Phone: (619) 464-3353
Fax:
After Hours Phone: (619)
464-3353
Provider Gender: Female
License number: PA56805
NPI: 1689046310
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

KHALEGHI, MANI

Provider ID: 259513
Board Certified Specialty: No
HEALTH EXCEL IPA INC
5360 JACKSON DR STE 100
LA MESA, CA 91942-3012
Phone: (619) 713-6514
Fax: (858) 430-3146
After Hours Phone: (619)
713-6514
Provider Gender: Male
License number: PA54238
NPI: 1275072423
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

LAHUSEN, KATIE M

Provider ID: 276901
Board Certified Specialty: No
HEALTH EXCEL IPA INC
7339 EL CAJON BLVD STE I
LA MESA, CA 91942-7435
Phone: (619) 698-0606
Fax: (619) 698-0609
After Hours Phone: (619)
698-0606
Provider Gender: Female
License number: PA57578
NPI: 1336601483
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

PINEDA, RUSSEL V

Provider ID: 259576
Board Certified Specialty: No
HEALTH EXCEL IPA INC
5360 JACKSON DR STE 100
LA MESA, CA 91942-3012
Phone: (619) 713-6514
Fax: (858) 430-3146
After Hours Phone: (619)
713-6514
Provider Gender: Male

License number: PA57473
NPI: 1528533007
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

RAYMOND, ALAIN L , NPA

Provider ID: 269057
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
8851 CENTER DR STE 505
LA MESA, CA 91942-3059
Phone: (619) 461-3880
Fax: (619) 461-3895
After Hours Phone: (619)
461-3880
Provider Gender: Male
License number: PA21466
NPI: 1164729125
Provider English Spoken: Yes
Provider Language(s) Spoken:
French
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SACKNOFF, STEFANIE S

Provider ID: 118247
Board Certified Specialty: No
CANCER CENTER ONCOLOGY
MEDICAL GROUP INC
5555 GROSSMONT CENTER
DR
LA MESA, CA 91942-3019
Phone: (619) 644-3030
Fax:
After Hours Phone: (619)
644-3030
Provider Gender: Female
License number: PA51280
NPI: 1720418833
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8:30AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Ucsd Medical Group

SACKNOFF, STEFANIE S

Provider ID: 268946
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
5555 GROSSMONT CENTER
DR
LA MESA, CA 91942-3019
Phone: (619) 644-3030
Fax: (619) 644-3638
After Hours Phone: (619)
644-3030
Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: PA51280
NPI: 1720418833
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Ucsd Medical Group

SUNA SITTO, MOHEEN

Provider ID: 269776
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
7051 ALVARADO RD # 101
LA MESA, CA 91942-8901
Phone: (619) 625-1144
Fax:
After Hours Phone: (619)
625-1144
Provider Gender: Female
License number: PA22855
NPI: 1497196729
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

WRAY, AMY G
Provider ID: 118286
Board Certified Specialty: No
CANCER CENTER ONCOLOGY
MEDICAL GROUP INC
5555 GROSSMONT CENTER
DR
LA MESA, CA 91942-3019
Phone: (619) 644-3030
Fax:
After Hours Phone: (619)
644-3030
Provider Gender: Female
License number: PA17578
NPI: 1396762076
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8:30AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

WRAY, AMY G
Provider ID: 268840
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
5555 GROSSMONT CENTER
DR
LA MESA, CA 91942-3019
Phone: (619) 644-3030
Fax: (619) 644-3638
After Hours Phone: (619)
644-3030
Provider Gender: Female
License number: PA17578

NPI: 1396762076
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

PODIATRIST

COLLINS, MICHAEL L

Provider ID: 108901
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
8851 CENTER DR STE 601
LA MESA, CA 91942-3062
Phone: (619) 441-9811
Fax: (619) 425-0539
After Hours Phone: (619)
441-9811
Provider Gender: Male
License number: DPM5146
NPI: 1912294711
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Scripps
Mercy Hospital, Scripps Mercy
Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p><i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>	<p>5555 GROSSMONT CENTER DR LA MESA, CA 91942-3019 <i>Phone:</i> (619) 461-1920 <i>Fax:</i> <i>After Hours Phone:</i> (619) 461-1920 <i>Provider Gender:</i> Male <i>License number:</i> A71932 <i>NPI:</i> 1770589293 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>	<p><i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>
<p>VALLONE, MELCHIOR P <i>Provider ID:</i> 26555 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 5129 GARFIELD ST LA MESA, CA 91941-5103 <i>Phone:</i> (619) 465-3200 <i>Fax:</i> (619) 465-3700 <i>After Hours Phone:</i> (619) 465-3200 <i>Provider Gender:</i> Male <i>License number:</i> DPM2201 <i>NPI:</i> 1093998965 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc</p>	<p>ALHADDAD, FIRAS <i>Provider ID:</i> 78437 <i>Board Certified Specialty:</i> No SAN DIEGO CRITICAL CARE MED GRP INC 5555 GROSSMONT CENTER DR LA MESA, CA 91942-3019 <i>Phone:</i> (619) 713-5014 <i>Fax:</i> <i>After Hours Phone:</i> (619) 713-5014 <i>Provider Gender:</i> Male <i>License number:</i> A123243 <i>NPI:</i> 1295963460 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic</p>	<p>BAGHERI, KAVEH <i>Provider ID:</i> 57290 <i>Board Certified Specialty:</i> No SAN DIEGO CRITICAL CARE MED GRP INC 5555 GROSSMONT CENTER DR LA MESA, CA 91942-3019 <i>Phone:</i> (619) 713-5014 <i>Fax:</i> <i>After Hours Phone:</i> (619) 713-5014 <i>Provider Gender:</i> Male <i>License number:</i> A52496 <i>NPI:</i> 1174542252 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>
PULMONARY DISEASES		
<p>AL-NASER, RAED A <i>Provider ID:</i> 57289 <i>Board Certified Specialty:</i> No SAN DIEGO CRITICAL CARE MED GRP INC</p>	<p>ALHADDAD, FIRAS <i>Provider ID:</i> 78437 <i>Board Certified Specialty:</i> No SAN DIEGO CRITICAL CARE MED GRP INC 5555 GROSSMONT CENTER DR LA MESA, CA 91942-3019 <i>Phone:</i> (619) 713-5014 <i>Fax:</i> <i>After Hours Phone:</i> (619) 713-5014 <i>Provider Gender:</i> Male <i>License number:</i> A123243 <i>NPI:</i> 1295963460 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic</p>	<p>BAGHERI, KAVEH <i>Provider ID:</i> 57290 <i>Board Certified Specialty:</i> No SAN DIEGO CRITICAL CARE MED GRP INC 5555 GROSSMONT CENTER DR LA MESA, CA 91942-3019 <i>Phone:</i> (619) 713-5014 <i>Fax:</i> <i>After Hours Phone:</i> (619) 713-5014 <i>Provider Gender:</i> Male <i>License number:</i> A52496 <i>NPI:</i> 1174542252 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>

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D. Directorio de proveedores de atención especializada

POKALA, SATHYA P

Provider ID: 57292

Board Certified Specialty: No
SAN DIEGO CRITICAL CARE
MED GRP INC

5555 GROSSMONT CENTER
DR

LA MESA, CA 91942-3019

Phone: (619) 713-5014

Fax:

After Hours Phone: (619)

713-5014

Provider Gender: Male

License number: A51070

NPI: 1972523769

Provider English Spoken: Yes

Provider Language(s) Spoken:

Hindi

Cultural Competency: No

Hospital Affiliation: Grossmont
Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

Phone: (619) 644-4500

Fax: (619) 740-4547

After Hours Phone: (619)

644-4500

Provider Gender: Female

License number: G78635

NPI: 1053348920

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Palomar

Health Downtown Campus,

Sharp Chula Vista Med Ctr,

Sharp Memorial Hospital,

Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 19/100

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

Hospital Affiliation: Sharp

Memorial Hospital, Palomar

Health Downtown Campus,

Palomar Medical Center, Sharp

Chula Vista Med Ctr, Grossmont

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 19/100

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

JABBARI, SIAVASH, MD

Provider ID: 268785

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

5555 GROSSMONT CENTER

DR

LA MESA, CA 91942-3019

Phone: (619) 740-4500

Fax: (619) 740-8499

After Hours Phone: (619)

740-4500

Provider Gender: Male

License number: A99269

NPI: 1720314107

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi

Cultural Competency: No

Hospital Affiliation: Sharp Chula

Vista Med Ctr, Grossmont

Hospital, Sharp Memorial

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

RADIATION ONCOLOGY

COLEMAN, LORI A , MD

Provider ID: 221089

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

5555 GROSSMONT CENTER
DR

LA MESA, CA 91942-3019

LA MESA, CA 91942-3019

Phone: (619) 740-4500

Fax: (619) 740-8499

After Hours Phone: (619)

740-4500

Provider Gender: Female

License number: A74873

NPI: 1184668741

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

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D. Directorio de proveedores de atención especializada

Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

PEJAVAR, SUNANDA M , MD

Provider ID: 221075
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 5555 GROSSMONT CENTER
 DR
 LA MESA, CA 91942-3019
 Phone: (619) 740-4500
 Fax:
 After Hours Phone: (619)
 740-4500
 Provider Gender: Female
 License number: A103733
 NPI: 1912232513
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Kannada, Spanish
 Cultural Competency: No
 Hospital Affiliation: Grossmont
 Hospital, Sharp Memorial
 Hospital, Sharp Chula Vista Med
 Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 19/100
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

UHL, BARRY M , MD

Provider ID: 204684
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 5555 GROSSMONT CENTER
 DR
 LA MESA, CA 91942-3019

Phone: (619) 740-4500
 Fax: (619) 740-8499
 After Hours Phone: (619)
 740-4500
 Provider Gender: Male
 License number: A71969
 NPI: 1811936693
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Palomar
 Medical Center, Grossmont
 Hospital, Sharp Chula Vista Med
 Ctr, Sharp Memorial Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 19/100
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

VOLPP, PAUL B , MD

Provider ID: 221104
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 5555 GROSSMONT CENTER
 DR
 LA MESA, CA 91942-3019
 Phone: (619) 740-4500
 Fax:
 After Hours Phone: (619)
 740-4500
 Provider Gender: Male
 License number: A86307
 NPI: 1225186232
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp

Memorial Hospital, Sharp Chula
 Vista Med Ctr, Grossmont
 Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 19/100
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

WEINSTEIN, GEOFFREY D , MD

Provider ID: 220040
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 5555 GROSSMONT CENTER
 DR
 LA MESA, CA 91942-3019
 Phone: (619) 740-4500
 Fax:
 After Hours Phone: (619)
 740-4500
 Provider Gender: Male
 License number: A54109
 NPI: 1841233947
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Grossmont
 Hospital, Sharp Memorial
 Hospital, Palomar Health
 Downtown Campus, Sharp Chula
 Vista Med Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 19/100
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Email:
Medical Group(s):
IPA: Community Care Ipa Llc

ZENTNER, PHILLIP G , MD
Provider ID: 221094
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 5555 GROSSMONT CENTER
 DR
 LA MESA, CA 91942-3019
Phone: (619) 740-8499
Fax:
After Hours Phone: (619)
 740-8499
Provider Gender: Male
License number: G83516
NPI: 1063452415
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
 Memorial Hospital, Palomar
 Medical Center, Grossmont
 Hospital, Sharp Chula Vista Med
 Ctr, Mercy Medical Center
 Redding
Medi-Cal Open Panel: Yes
Min/Max Age: 19/100
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

**RADIOLOGY DIAGNOSTIC
 X-RAY**

BRANNIGAN, THOMAS J
Provider ID: 114572
Board Certified Specialty: No

X RAY MEDICAL GROUP INC
 8860 CENTER DR STE 100
 LA MESA, CA 91942-7000
Phone: (619) 740-4045
Fax:
After Hours Phone: (619)
 740-4045
Provider Gender: Male
License number: G65789
NPI: 1598710030
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
 Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

BRANNIGAN, THOMAS J
Provider ID: 41347
Board Certified Specialty: No
 X RAY MEDICAL GROUP INC
 5555 GROSSMONT CENTER
 DR
 LA MESA, CA 91942-3019
Phone: (619) 740-5100
Fax:
After Hours Phone: (619)
 740-5100
Provider Gender: Male
License number: G65789
NPI: 1598710030
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
 Hospital

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

CHANG, WEILING
Provider ID: 118293
Board Certified Specialty: No
 X RAY MEDICAL GROUP INC
 5555 GROSSMONT CENTER
 DR
 LA MESA, CA 91942-3019
Phone: (619) 740-5100
Fax:
After Hours Phone: (619)
 740-5100
Provider Gender: Female
License number: A90535
NPI: 1659326460
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
 Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

ELLISON, HARRY P
Provider ID: 114776
Board Certified Specialty: No
 X RAY MEDICAL GROUP INC

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D. Directorio de proveedores de atención especializada

5555 GROSSMONT CENTER
DR
LA MESA, CA 91942-3019
Phone: (619) 740-5100
Fax:
After Hours Phone: (619)
740-5100
Provider Gender: Male
License number: G50309
NPI: 1780639039
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

ELLISON, HARRY P

Provider ID: 114778
Board Certified Specialty: No
X RAY MEDICAL GROUP INC
8860 CENTER DR STE 100
LA MESA, CA 91942-7000
Phone: (619) 740-4045
Fax:
After Hours Phone: (619)
740-4045
Provider Gender: Male
License number: G50309
NPI: 1780639039
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital
Medi-Cal Open Panel: No

Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

ELLISON, JON G

Provider ID: 111122
Board Certified Specialty: No
X RAY MEDICAL GROUP INC
5555 GROSSMONT CENTER
DR
LA MESA, CA 91942-3019
Phone: (619) 740-5100
Fax:
After Hours Phone: (619)
740-5100
Provider Gender: Male
License number: A117199
NPI: 1760630669

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

ELLISON, JON G

Provider ID: 111124
Board Certified Specialty: No
X RAY MEDICAL GROUP INC
8860 CENTER DR STE 100

LA MESA, CA 91942-7000
Phone: (619) 740-4045
Fax:
After Hours Phone: (619)
740-4045
Provider Gender: Male
License number: A117199
NPI: 1760630669
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

JACOBSEN, JAMES C

Provider ID: 114564
Board Certified Specialty: No
X RAY MEDICAL GROUP INC
5555 GROSSMONT CENTER
DR
LA MESA, CA 91942-3019
Phone: (619) 740-5100
Fax:
After Hours Phone: (619)
740-5100
Provider Gender: Male
License number: A87878
NPI: 1356394811
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital
Medi-Cal Open Panel: No
Min/Max Age: None

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc	<i>Phone:</i> (619) 461-1830 <i>Fax:</i> <i>After Hours Phone:</i> (619) 461-1830 <i>Provider Gender:</i> Female <i>License number:</i> A91263 <i>NPI:</i> 1952514978 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Grossmont Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc	<i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc
JACOBSEN, JAMES C <i>Provider ID:</i> 114567 <i>Board Certified Specialty:</i> No X RAY MEDICAL GROUP INC 8860 CENTER DR STE 100 LA MESA, CA 91942-7000 <i>Phone:</i> (619) 740-4045 <i>Fax:</i> <i>After Hours Phone:</i> (619) 740-4045 <i>Provider Gender:</i> Male <i>License number:</i> A87878 <i>NPI:</i> 1356394811 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc	MOORE, BRIAN S <i>Provider ID:</i> 115375 <i>Board Certified Specialty:</i> No X RAY MEDICAL GROUP INC 8860 CENTER DR STE 100 LA MESA, CA 91942-7000 <i>Phone:</i> (619) 740-4045 <i>Fax:</i> <i>After Hours Phone:</i> (619) 740-4045 <i>Provider Gender:</i> Male <i>License number:</i> G68336 <i>NPI:</i> 1831144005 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No	NAUMANN, MICHAEL T <i>Provider ID:</i> 113619 <i>Board Certified Specialty:</i> No X RAY MEDICAL GROUP INC 8881 FLETCHER PKWY STE 102 LA MESA, CA 91942-3129 <i>Phone:</i> (619) 461-1830 <i>Fax:</i> (619) 460-2774 <i>After Hours Phone:</i> (619) 461-1830 <i>Provider Gender:</i> Female <i>License number:</i> A116596 <i>NPI:</i> 1386821171 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc
LIU, JENNA I <i>Provider ID:</i> 269009 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 5555 GROSSMONT CENTER DR LA MESA, CA 91942-3019	MOORE, BRIAN S <i>Provider ID:</i> 115375 <i>Board Certified Specialty:</i> No X RAY MEDICAL GROUP INC 8860 CENTER DR STE 100 LA MESA, CA 91942-7000 <i>Phone:</i> (619) 740-4045 <i>Fax:</i> <i>After Hours Phone:</i> (619) 740-4045 <i>Provider Gender:</i> Male <i>License number:</i> G68336 <i>NPI:</i> 1831144005 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No	NAUMANN, MICHAEL T <i>Provider ID:</i> 113621 <i>Board Certified Specialty:</i> No X RAY MEDICAL GROUP INC 5555 GROSSMONT CENTER DR LA MESA, CA 91942-3019

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 740-5100
Fax:
After Hours Phone: (619) 740-5100
Provider Gender: Female
License number: A116596
NPI: 1386821171
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

NAUMANN, MICHAEL T
Provider ID: 113622
Board Certified Specialty: No
X RAY MEDICAL GROUP INC
8860 CENTER DR STE 100
LA MESA, CA 91942-7000
Phone: (619) 740-4045
Fax: (619) 460-2774
After Hours Phone: (619) 740-4045
Provider Gender: Female
License number: A116596
NPI: 1386821171
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc
NAUMANN, MICHAEL T , MD
Provider ID: 269664
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
8881 FLETCHER PKWY STE 102
LA MESA, CA 91942-3129
Phone: (619) 461-1830
Fax: (619) 258-8553
After Hours Phone: (619) 461-1830
Provider Gender: Female
License number: A116596
NPI: 1386821171
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

NAUMANN, MICHAEL T , MD
Provider ID: 269665
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
8860 CENTER DR STE 100
LA MESA, CA 91942-7000

NAUMANN, MICHAEL T , MD
Provider ID: 269665
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
8860 CENTER DR STE 100
LA MESA, CA 91942-7000

Phone: (619) 460-2770
Fax: (619) 460-2774
After Hours Phone: (619) 460-2770
Provider Gender: Female
License number: A116596
NPI: 1386821171
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SUN, ALEX W
Provider ID: 268633
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
5555 GROSSMONT CENTER DR
LA MESA, CA 91942-3019
Phone: (619) 740-4008
Fax:
After Hours Phone: (619) 740-4008
Provider Gender: Male
License number: A133334
NPI: 1538502331
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr, Scripps Green Hospital, Scripps Memorial Hospital, Scripps Mercy Hospital,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Scripps Memorial Hospital
Encinitas

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

TAGHAVI, MARGARET S

Provider ID: 113623

Board Certified Specialty: No

X RAY MEDICAL GROUP INC

5555 GROSSMONT CENTER

DR

LA MESA, CA 91942-3019

Phone: (619) 740-5100

Fax:

After Hours Phone: (619)

740-5100

Provider Gender: Female

License number: A115423

NPI: 1396068573

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sutter Auburn

Faith Hosp, Sutter Davis

Hospital, Sutter Roseville

Medical Center, Sutter Medical

Center Sacramento, Cedars

Sinai Medical Center, Grossmont

Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

TAGHAVI, MARGARET S

Provider ID: 113624

Board Certified Specialty: No

X RAY MEDICAL GROUP INC

8881 FLETCHER PKWY STE

102

LA MESA, CA 91942-3129

Phone: (619) 461-1830

Fax:

After Hours Phone: (619)

461-1830

Provider Gender: Female

License number: A115423

NPI: 1396068573

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sutter Auburn

Faith Hosp, Sutter Davis

Hospital, Sutter Roseville

Medical Center, Sutter Medical

Center Sacramento, Cedars

Sinai Medical Center, Grossmont

Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

TROUT, TERE E

Provider ID: 115359

Board Certified Specialty: No

X RAY MEDICAL GROUP INC

8860 CENTER DR STE 100

LA MESA, CA 91942-7000

Phone: (619) 740-4045

Fax:

After Hours Phone: (619)

740-4045

Provider Gender: Female

License number: G70276

NPI: 1649223140

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

TROUT, TERE E

Provider ID: 41265

Board Certified Specialty: No

X RAY MEDICAL GROUP INC

5555 GROSSMONT CENTER

DR

LA MESA, CA 91942-3019

Phone: (619) 740-5100

Fax:

After Hours Phone: (619)

740-5100

Provider Gender: Female

License number: G70276

NPI: 1649223140

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

URIOSTE, ALEXANDER S

Provider ID: 114930
Board Certified Specialty: No
X RAY MEDICAL GROUP INC
5555 GROSSMONT CENTER
DR
LA MESA, CA 91942-3019
Phone: (619) 740-5100
Fax:
After Hours Phone: (619)
740-5100
Provider Gender: Male
License number: A78795
NPI: 1528011020
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Ucsd La Jolla John
Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

URIOSTE, ALEXANDER S

Provider ID: 114936
Board Certified Specialty: No
X RAY MEDICAL GROUP INC
8860 CENTER DR STE 100
LA MESA, CA 91942-7000

Phone: (619) 740-4045
Fax: (619) 460-2774
After Hours Phone: (619)
740-4045
Provider Gender: Male
License number: A78795
NPI: 1528011020
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Ucsd La Jolla John
Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

VENKATESH, VIJAY B

Provider ID: 114938
Board Certified Specialty: No
X RAY MEDICAL GROUP INC
5555 GROSSMONT CENTER
DR
LA MESA, CA 91942-3019
Phone: (619) 740-5100
Fax:
After Hours Phone: (619)
740-5100
Provider Gender: Male
License number: A94476
NPI: 1689627085
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital
Medi-Cal Open Panel: No
Min/Max Age: None

American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

VENKATESH, VIJAY B

Provider ID: 114942
Board Certified Specialty: No
X RAY MEDICAL GROUP INC
8860 CENTER DR STE 100
LA MESA, CA 91942-7000
Phone: (619) 740-4045
Fax: (619) 668-0377
After Hours Phone: (619)
740-4045
Provider Gender: Male
License number: A94476
NPI: 1689627085
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

VIETS, RYAN B

Provider ID: 113627
Board Certified Specialty: No
X RAY MEDICAL GROUP INC
5555 GROSSMONT CENTER
DR
LA MESA, CA 91942-3019

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 740-5100
 Fax:
 After Hours Phone: (619) 740-5100
 Provider Gender: Male
 License number: A125809
 NPI: 1568617108
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Tri City Medical Ctr, Scripps Green Hospital, Grossmont Hospital
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

VIETS, RYAN B

Provider ID: 113632
 Board Certified Specialty: No
 X RAY MEDICAL GROUP INC
 8860 CENTER DR STE 100
 LA MESA, CA 91942-7000
 Phone: (619) 740-4045
 Fax: (508) 273-1241
 After Hours Phone: (619) 740-4045
 Provider Gender: Male
 License number: A125809
 NPI: 1568617108
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Tri City Medical Ctr, Scripps Green Hospital, Grossmont Hospital
 Medi-Cal Open Panel: No
 Min/Max Age: None

American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

VIETS, RYAN B

Provider ID: 113636
 Board Certified Specialty: No
 X RAY MEDICAL GROUP INC
 8881 FLETCHER PKWY STE 102
 LA MESA, CA 91942-3129
 Phone: (619) 461-1830
 Fax: (508) 273-1241
 After Hours Phone: (619) 461-1830
 Provider Gender: Male
 License number: A125809
 NPI: 1568617108
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Tri City Medical Ctr, Scripps Green Hospital, Grossmont Hospital
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

RADIOLOGY DIAGNOSTIC

MORTEZAIE, ALAN R

Provider ID: 268883
 Board Certified Specialty: No

COMMUNITY CARE IPA LLC
 5555 GROSSMONT CENTER DR
 LA MESA, CA 91942-3019
 Phone: (661) 326-9600
 Fax:
 After Hours Phone: (661) 326-9600
 Provider Gender: Male
 License number: A116100
 NPI: 1013112820
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Bakersfield Memorial Hosp, Mercy Hospital Bakersfield
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

TIEFENBRUN, JONATHAN, MD

Provider ID: 268966
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 8851 CENTER DR STE 505
 LA MESA, CA 91942-3059
 Phone: (619) 461-3880
 Fax: (619) 461-3895
 After Hours Phone: (619) 461-3880
 Provider Gender: Male
 License number: G85951
 NPI: 1265437727
 Provider English Spoken: Yes
 Provider Language(s) Spoken: French, Spanish
 Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,
T, W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

RADIOLOGY

BRANNIGAN, THOMAS J

Provider ID: 269041

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
5555 GROSSMONT CENTER
DR

LA MESA, CA 91942-3019

Phone: (619) 460-2770

Fax: (619) 740-5150

After Hours Phone: (619)

460-2770

Provider Gender: Male

License number: G65789

NPI: 1598710030

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Grossmont
Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

CHANG, WEILING

Provider ID: 269040

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
5555 GROSSMONT CENTER
DR

LA MESA, CA 91942-3019

Phone: (619) 460-2770

Fax:

After Hours Phone: (619)

460-2770

Provider Gender: Female

License number: A90535

NPI: 1659326460

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Grossmont
Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

ELLISON, HARRY P

Provider ID: 268985

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
5555 GROSSMONT CENTER
DR # 1

LA MESA, CA 91942-3019

Phone: (619) 740-5100

Fax: (619) 740-8100

After Hours Phone: (619)

740-5100

Provider Gender: Male

License number: G50309

NPI: 1780639039

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Grossmont
Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

ELLISON, JON G

Provider ID: 268993

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
5555 GROSSMONT CENTER
DR

LA MESA, CA 91942-3019

Phone: (619) 460-2774

Fax:

After Hours Phone: (619)

460-2774

Provider Gender: Male

License number: A117199

NPI: 1760630669

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Grossmont
Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

HA, TUAN X

Provider ID: 268900
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
5555 GROSSMONT CENTER
DR
LA MESA, CA 91942-3019
Phone: (508) 295-7271
Fax:
After Hours Phone: (508)
295-7271
Provider Gender: Male
License number: C131942
NPI: 1285673699
Provider English Spoken: Yes
Provider Language(s) Spoken:
Vietnamese
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

HONOWITZ, SCOTT C

Provider ID: 268846
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
5555 GROSSMONT CENTER
DR
LA MESA, CA 91942-3019
Phone: (508) 295-7271
Fax:
After Hours Phone: (508)
295-7271
Provider Gender: Male
License number: A134287
NPI: 1346684156

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Stanford
Health Care, Lucile Salter
Packard Childrens Hosp
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

JACOBSEN, JAMES C , MD

Provider ID: 243974
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
8881 FLETCHER PKWY STE
102
LA MESA, CA 91942-3129
Phone: (619) 460-2770
Fax: (619) 797-1484
After Hours Phone: (619)
460-2770
Provider Gender: Male
License number: A87878
NPI: 1356394811

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Community Care Ipa Llc

JACOBSEN, JAMES C , MD

Provider ID: 243975
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
8860 CENTER DR STE 100
LA MESA, CA 91942-7000
Phone: (619) 460-2770
Fax:
After Hours Phone: (619)
460-2770
Provider Gender: Male
License number: A87878
NPI: 1356394811
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

LANCE, VALENTIN A

Provider ID: 268974
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
5555 GROSSMONT CENTER
DR
LA MESA, CA 91942-3019
Phone: (800) 841-5200
Fax:
After Hours Phone: (800)
841-5200
Provider Gender: Male
License number: A118759
NPI: 1720303191

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MOORE, BRIAN S , MD
Provider ID: 243959
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
8881 FLETCHER PKWY STE 102
LA MESA, CA 91942-3129
Phone: (619) 460-2770
Fax: (619) 797-1484
After Hours Phone: (619) 460-2770
Provider Gender: Male
License number: G68336
NPI: 1831144005
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MOORE, BRIAN S , MD
Provider ID: 243960
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
8860 CENTER DR STE 100
LA MESA, CA 91942-7000
Phone: (619) 460-2770
Fax:
After Hours Phone: (619) 460-2770
Provider Gender: Male
License number: G68336
NPI: 1831144005
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

TROUT, TERE E
Provider ID: 268982
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
5555 GROSSMONT CENTER DR
LA MESA, CA 91942-3019
Phone: (619) 460-2770
Fax: (619) 740-5150
After Hours Phone: (619) 460-2770
Provider Gender: Female
License number: G70276
NPI: 1649223140
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

URIOSTE, ALEXANDER S
Provider ID: 269251
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
8860 CENTER DR STE 100
LA MESA, CA 91942-7000
Phone: (619) 460-2770
Fax: (619) 460-2774
After Hours Phone: (619) 460-2770
Provider Gender: Male
License number: A78795
NPI: 1528011020
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

VENKATESH, VIJAY B , MD

Provider ID: 269659
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 8860 CENTER DR STE 100
 LA MESA, CA 91942-7000
Phone: (619) 740-5100
Fax: (619) 740-8100
After Hours Phone: (619) 740-5100
Provider Gender: Male
License number: A94476
NPI: 1689627085
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

VENKATESH, VIJAY B , MD

Provider ID: 269660
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 8881 FLETCHER PKWY STE 102
 LA MESA, CA 91942-3129
Phone: (619) 461-1830
Fax: (619) 460-2774
After Hours Phone: (619) 461-1830
Provider Gender: Male
License number: A94476
NPI: 1689627085
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

VIETS, RYAN B

Provider ID: 268951
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 5555 GROSSMONT CENTER DR
 LA MESA, CA 91942-3019
Phone: (619) 740-5100
Fax: (619) 740-5150
After Hours Phone: (619) 740-5100
Provider Gender: Male
License number: A125809
NPI: 1568617108
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Scripps Green Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

REGISTERED PHYSICAL THERAPIST

ANDERSON, ALEXANDRA

Provider ID: 265962
Board Certified Specialty: No
HEALTH EXCEL IPA INC
 8851 CENTER DR STE 601
 LA MESA, CA 91942-3062
Phone: (619) 441-9811
Fax: (619) 401-8766
After Hours Phone: (619) 441-9811
Provider Gender: Female
License number: PT297661
NPI: 1346870706
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

GRABER, AMELIA J

Provider ID: 214013
Board Certified Specialty: No
HEALTH EXCEL IPA INC
 5648 LAKE MURRAY BLVD
 LA MESA, CA 91942-1929
Phone: (619) 464-1352
Fax: (619) 464-7255
After Hours Phone: (619) 464-1352
Provider Gender: Female
License number: PT293151
NPI: 1275057283

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D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

LESTINO, JOSEPH A

Provider ID: 214040
Board Certified Specialty: No
HEALTH EXCEL IPA INC
5648 LAKE MURRAY BLVD
LA MESA, CA 91942-1929
Phone: (619) 464-1352
Fax: (619) 464-7255
After Hours Phone: (619)
464-1352
Provider Gender: Male
License number: PT33613
NPI: 1740308360
Provider English Spoken: Yes
Provider Language(s) Spoken:
Tagalog
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

LESTINO, STEPHANIE S

Provider ID: 214039
Board Certified Specialty: No
HEALTH EXCEL IPA INC
5648 LAKE MURRAY BLVD
LA MESA, CA 91942-1929
Phone: (619) 464-1352
Fax: (619) 464-7255
After Hours Phone: (619)
464-1352
Provider Gender: Female
License number: PT36904
NPI: 1073819611
Provider English Spoken: Yes
Provider Language(s) Spoken:
Mandarin
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

SCHROEDER, NICHOLAS L

Provider ID: 246283
Board Certified Specialty: No
HEALTH EXCEL IPA INC
5648 LAKE MURRAY BLVD
LA MESA, CA 91942-1929
Phone: (619) 464-1352
Fax: (619) 464-7255
After Hours Phone: (619)
464-1352
Provider Gender: Male
License number: PT293080
NPI: 1679002372
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

RHEUMATOLOGY

KOTHA, AKTHER J

Provider ID: 29099
Board Certified Specialty: No
PURUSHOTHAM AND AKTHER
KOTHA MD INC
8860 CENTER DR STE 400
LA MESA, CA 91942-7003
Phone: (619) 229-1995
Fax: (619) 229-1109
After Hours Phone: (619)
229-1995
Provider Gender: Female
License number: A45440
NPI: 1780609503
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Hindi, Spanish, Telugu,
Urdu
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:* P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

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D. Directorio de proveedores de atención especializada

KOTHA, AKTHER J

Provider ID: 29099
Board Certified Specialty: No
PURUSHOTHAM AND AKTHER
KOTHA MD INC
8860 CENTER DR STE 400
LA MESA, CA 91942-7003
Phone: (619) 229-1995
Fax: (619) 229-1109
After Hours Phone: (619)
229-1995
Provider Gender: Female
License number: A45440
NPI: 1780609503
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Hindi, Spanish, Telugu,
Urdu
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* P, EB, IB, E, R,
T, W
Hours: M-F 9AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

KOTHA, ROSHAN

Provider ID: 63454
Board Certified Specialty: No
PURUSHOTHAM AND AKTHER
KOTHA MD INC
8860 CENTER DR STE 400
LA MESA, CA 91942-7003

Phone: (619) 229-1995
Fax: (619) 229-1109
After Hours Phone: (619)
229-1995
Provider Gender: Female
License number: A106044
NPI: 1417117839
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi, Spanish, Telugu
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* P, EB, IB, E, R,
T, W
Hours: M-F 9AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

KOTHA, ROSHAN, MD

Provider ID: 63454
Board Certified Specialty: No
PURUSHOTHAM AND AKTHER
KOTHA MD INC
8860 CENTER DR STE 400
LA MESA, CA 91942-7003
Phone: (619) 229-1995
Fax: (619) 229-1109
After Hours Phone: (619)
229-1995
Provider Gender: Female
License number: A106044
NPI: 1417117839
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi, Spanish, Telugu
Cultural Competency: No
Hospital Affiliation: Grossmont

Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:* P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SURGERY GENERAL

LIN, HONG-DER

Provider ID: 284965
Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC
5565 GROSSMONT CENTER
DR STE 1 # 221
LA MESA, CA 91942-3000
Phone: (619) 462-8100
Fax: (619) 462-7933
After Hours Phone: (619)
462-8100
Provider Gender: Male
License number: C42964
NPI: 1174539035
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Alvarado Hosp Med Ctr,
Alvarado Hospital Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

ORR, CARL E , MD

Provider ID: 26549
Board Certified Specialty: Yes
GROSSMONT SURGICAL ASSOCS A MED CORP
5565 GROSSMONT CENTER DR STE 221
LA MESA, CA 91942-3022
Phone: (619) 462-8100
Fax: (619) 462-7933
After Hours Phone: (619) 462-8100
Provider Gender: Male
License number: G58899
NPI: 1730195694
Provider English Spoken: Yes
Provider Language(s) Spoken: Hebrew, Mandarin, Russian, Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Alvarado Hospital Llc, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SOHN, HELEN J , MD

Provider ID: 268903
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
5565 GROSSMONT CENTER DR STE 221
LA MESA, CA 91942-3022

Phone: (619) 462-8100
Fax: (619) 462-7933
After Hours Phone: (619) 462-8100
Provider Gender: Female
License number: A87722
NPI: 1528096955
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado Hosp Med Ctr, Grossmont Hospital
Medi-Cal Open Panel: No
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SURGERY HAND

RICKARDS, ENASS N

Provider ID: 212749
Board Certified Specialty: No
HEALTH EXCEL IPA INC
8851 CENTER DR STE 601
LA MESA, CA 91942-3062
Phone: (858) 455-6460
Fax: (619) 401-8766
After Hours Phone: (858) 455-6460
Provider Gender: Female
License number: G79785
NPI: 1609850080
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps

Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

SURGERY ORTHOPEDIC

ALLSING, STEVEN R , MD

Provider ID: 211762
Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC
5565 GROSSMONT CENTER DR STE 1 # 112
LA MESA, CA 91942-3000
Phone: (619) 465-0083
Fax: (619) 465-2267
After Hours Phone: (619) 465-0083
Provider Gender: Male
License number: G84903
NPI: 1538274709
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Sharp Coronado Hosp And Healthcare Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Community Care Ipa Llc

BAGHERI, ALI, MD

Provider ID: 125035
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
8851 CENTER DR STE 601
LA MESA, CA 91942-3062
Phone: (619) 441-9811
Fax: (619) 401-8766
After Hours Phone: (619)
441-9811
Provider Gender: Male
License number: A123272
NPI: 1760632947
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Scripps
Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings
Medical Group-Sd

BAGHERI, ALI

Provider ID: 125035
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
8851 CENTER DR STE 601
LA MESA, CA 91942-3062

Phone: (619) 441-9811
Fax: (619) 401-8766
After Hours Phone: (619)
441-9811
Provider Gender: Male
License number: A123272
NPI: 1760632947
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Scripps
Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings
Medical Group-Sd

BALLARD, BROOKE L

Provider ID: 262205
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
8860 CENTER DR STE 350
LA MESA, CA 91942-7003
Phone: (619) 286-9480
Fax: (619) 286-4568
After Hours Phone: (619)
286-9480
Provider Gender: Female
License number: A104161
NPI: 1841447950
Provider English Spoken: Yes
Provider Language(s) Spoken:
French, Spanish
Cultural Competency: No
Hospital Affiliation: Alvarado

Hospital Llc, Sharp Coronado
Hosp And Healthcare Ctr, Sharp
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-F 9AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings
Medical Group-Sd

BATES, JAMES E

Provider ID: 262141
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
8860 CENTER DR STE 350A
LA MESA, CA 91942-7003
Phone: (619) 286-9480
Fax: (619) 286-4568
After Hours Phone: (619)
286-9480
Provider Gender: Male
License number: G73930
NPI: 1174692206
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado
Hospital Llc, Sharp Coronado
Hosp And Healthcare Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

IPA: Imperial Health Holdings
Medical Group-Sd

FINKENBERG, JOHN G

Provider ID: 262200
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
8860 CENTER DR STE 350
LA MESA, CA 91942-7003
Phone: (619) 286-9480
Fax: (619) 286-4568
After Hours Phone: (619)
286-9480
Provider Gender: Male
License number: G56283
NPI: 1285703413
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Alvarado Hospital Llc,
Scripps Mercy Hospital, Sharp
Coronado Hosp And Healthcare
Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings
Medical Group-Sd

JACOBSON, MARK D

Provider ID: 262261
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
8860 CENTER DR STE 350
LA MESA, CA 91942-7003

Phone: (619) 286-9480
Fax: (619) 286-4568
After Hours Phone: (619)
286-9480
Provider Gender: Male
License number: G71151
NPI: 1760551915
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Alvarado Hospital Llc,
Sharp Coronado Hosp And
Healthcare Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings
Medical Group-Sd

KIMBALL, MICHAEL P

Provider ID: 285392
Board Certified Specialty: No
HEALTH EXCEL IPA INC
8851 CENTER DR STE 601
LA MESA, CA 91942-3062
Phone: (619) 441-9811
Fax: (619) 401-8766
After Hours Phone: (619)
441-9811
Provider Gender: Male
License number: G76060
NPI: 1588648653
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Scripps

Mercy Hospital Chula Vista,
Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

KIMBALL, MICHAEL P , MD

Provider ID: 44005
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
8851 CENTER DR STE 601
LA MESA, CA 91942-3062
Phone: (619) 441-9811
Fax: (619) 401-8766
After Hours Phone: (619)
441-9811
Provider Gender: Male
License number: G76060
NPI: 1588648653
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Scripps
Mercy Hospital Chula Vista,
Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

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D. Directorio de proveedores de atención especializada

Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc, Imperial
 Health Holdings Medical
 Group-Sd

KIMBALL, MICHAEL P

Provider ID: 44005
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 8851 CENTER DR STE 601
 LA MESA, CA 91942-3062
Phone: (619) 441-9811
Fax: (619) 401-8766
After Hours Phone: (619)
 441-9811
Provider Gender: Male
License number: G76060
NPI: 1588648653
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital, Scripps
 Mercy Hospital Chula Vista,
 Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No

Ⓜ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc, Imperial
 Health Holdings Medical
 Group-Sd

RICKARDS, ENASS N

Provider ID: 125036
Board Certified Specialty: No

IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 8851 CENTER DR STE 601
 LA MESA, CA 91942-3062
Phone: (858) 455-6460
Fax: (619) 401-8766
After Hours Phone: (858)
 455-6460
Provider Gender: Female
License number: G79785
NPI: 1609850080
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Arabic
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital, Scripps
 Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No

Ⓜ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc, Imperial
 Health Holdings Medical
 Group-Sd

RICKARDS, ENASS N , MD

Provider ID: 268907
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 8851 CENTER DR STE 601
 LA MESA, CA 91942-3062
Phone: (858) 455-6460
Fax: (619) 401-8766
After Hours Phone: (858)
 455-6460
Provider Gender: Female
License number: G79785
NPI: 1609850080

Provider English Spoken: Yes
Provider Language(s) Spoken:
 Arabic
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital, Scripps
 Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Ⓜ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc, Imperial
 Health Holdings Medical
 Group-Sd

ROSENFELD, ALAN L

Provider ID: 262175
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 8851 CENTER DR STE 601
 LA MESA, CA 91942-3062
Phone: (858) 455-6460
Fax: (619) 401-8766
After Hours Phone: (858)
 455-6460
Provider Gender: Male
License number: G75293
NPI: 1588648968
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital Chula Vista, Scripps
 Memorial Hospital, Paradise
 Valley Hospital, Sharp Chula
 Vista Med Ctr, Scripps Mercy
 Hospital

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D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc, Imperial
 Health Holdings Medical
 Group-Sd

RYNNING, RALPH E

Provider ID: 262194
 Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 8860 CENTER DR STE 350
 LA MESA, CA 91942-7003
 Phone: (619) 286-9480
 Fax: (619) 286-4568
 After Hours Phone: (619)
 286-9480
 Provider Gender: Male
 License number: A103946
 NPI: 1952595316
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 French, German, Norwegian,
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Alvarado
 Hospital Llc, Sharp Coronado
 Hosp And Healthcare Ctr,
 Grossmont Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:

Medical Group(s):
 IPA: Imperial Health Holdings
 Medical Group-Sd
TAYYAB, NEIL A
 Provider ID: 262104
 Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 8851 CENTER DR STE 601
 LA MESA, CA 91942-3062
 Phone: (858) 455-6460
 Fax: (619) 401-8766
 After Hours Phone: (858)
 455-6460

Provider Gender: Male
 License number: A94408
 NPI: 1831149970
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps
 Memorial Hospital, Scripps
 Mercy Hospital Chula Vista,
 Sharp Memorial Hospital, Scripps
 Mercy Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc, Imperial
 Health Holdings Medical
 Group-Sd

SURGERY THORACIC

KOUMJIAN, MICHAEL P
 Provider ID: 265230
 Board Certified Specialty: Yes

HEALTH EXCEL IPA INC
 5525 GROSSMONT CENTER
 DR STE 609
 LA MESA, CA 91942-3009
 Phone: (619) 466-5700
 Fax: (619) 460-8975
 After Hours Phone: (619)
 466-5700
 Provider Gender: Male
 License number: G37886
 NPI: 1366403321
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Grossmont
 Hospital, Loma Linda University
 Med Ctr Murrieta, Alvarado
 Hospital Llc, Scripps Mercy
 Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/99
 American Sign Language (ASL):
 No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Health Excel Ipa Inc,
 Imperial Health Holdings Medical
 Group-Sd

KOUMJIAN, MICHAEL P

Provider ID: 26527
 Board Certified Specialty: Yes
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 5525 GROSSMONT CENTER
 DR STE 609
 LA MESA, CA 91942-3009
 Phone: (619) 466-5700
 Fax: (619) 460-8975
 After Hours Phone: (619)
 466-5700
 Provider Gender: Male

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D. Directorio de proveedores de atención especializada

License number: G37886
NPI: 1366403321
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Loma Linda University
Med Ctr Murrieta, Alvarado
Hospital Llc, Scripps Mercy
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc,
Imperial Health Holdings Medical
Group-Sd

UROLOGY

DATO, PAUL E , MD
Provider ID: 112527
Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC
8851 CENTER DR STE 501
LA MESA, CA 91942-3033
Phone: (619) 697-2456
Fax: (858) 429-7930
After Hours Phone: (619)
697-2456
Provider Gender: Male
License number: A43540
NPI: 1588632715
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital
Medi-Cal Open Panel: Yes

Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

DATO, PAUL E
Provider ID: 116241
Board Certified Specialty: No
GENESIS HEALTHCARE
PARTNERS PC
8851 CENTER DR STE 501
LA MESA, CA 91942-3033
Phone: (619) 697-2456
Fax: (619) 697-2494
After Hours Phone: (619)
697-2456
Provider Gender: Male
License number: A43540
NPI: 1588632715
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

DATO, PAUL E

Provider ID: 257131
Board Certified Specialty: Yes
HEALTH EXCEL IPA INC
8851 CENTER DR STE 501
LA MESA, CA 91942-3033
Phone: (619) 697-2456
Fax: (858) 429-7930
After Hours Phone: (619)
697-2456
Provider Gender: Male
License number: A43540
NPI: 1588632715
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

KEARSE, WILFRED S
Provider ID: 268850
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
8851 CENTER DR STE 501
LA MESA, CA 91942-3033
Phone: (619) 697-2456
Fax: (858) 429-7930
After Hours Phone: (619)
697-2456
Provider Gender: Male
License number: G83318
NPI: 1144232778
Provider English Spoken: Yes
Provider Language(s) Spoken:

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D. Directorio de proveedores de atención especializada

Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

SALMASI, AMIRALI, MD

Provider ID: 129643

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

8851 CENTER DR STE 501

LA MESA, CA 91942-3033

Phone: (619) 697-2456

Fax: (858) 429-7930

After Hours Phone: (619)

697-2456

Provider Gender: Male

License number: A135118

NPI: 1609187962

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi

Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally

Thornton, Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Ucsd Medical Group

SIEGEL, JORDAN A

Provider ID: 101015

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

8851 CENTER DR STE 501

LA MESA, CA 91942-3033

Phone: (619) 697-2456

Fax: (858) 429-7930

After Hours Phone: (619)

697-2456

Provider Gender: Male

License number: A110507

NPI: 1275865958

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Alvarado

Hospital Llc, Paradise Valley

Hospital, Sharp Chula Vista Med

Ctr, Scripps Green Hospital,

Scripps Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

TANAGHO, YOUSSEF, MD

Provider ID: 124747

Board Certified Specialty: Yes

COMMUNITY CARE IPA LLC

8851 CENTER DR STE 501

LA MESA, CA 91942-3033

Phone: (619) 697-2456

Fax: (858) 429-7930

After Hours Phone: (619)

697-2456

Provider Gender: Male

License number: A125924

NPI: 1003029372

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, French

Cultural Competency: No

Hospital Affiliation: Eisenhower

Medical Ctr, John F Kennedy

Memorial Hosp, Sharp Chula

Vista Med Ctr, Paradise Valley

Hospital, Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

TANAGHO, YOUSSEF

Provider ID: 125197

Board Certified Specialty: No

GENESIS HEALTHCARE

PARTNERS PC

8851 CENTER DR STE 501

LA MESA, CA 91942-3033

Phone: (619) 697-2456

Fax:

After Hours Phone: (619)

697-2456

Provider Gender: Male

License number: A125924

NPI: 1003029372

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, French

Cultural Competency: No

Hospital Affiliation: Eisenhower

Medical Ctr, John F Kennedy

Memorial Hosp, Sharp Chula

Vista Med Ctr, Paradise Valley

Hospital, Grossmont Hospital

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D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

LAKESIDE

CHIROPRACTOR

HOURIHAN, KEITH M
Provider ID: 257549
Board Certified Specialty: No
BLUE SHIELD PROMISE
HEALTH PLAN DIRECT
10039 VINE ST
LAKESIDE, CA 92040-3120
Phone: (619) 390-9975
Fax: (858) 633-4690
After Hours Phone: (619)
390-9975
Provider Gender: Male
License number: DC29314
NPI: 1306916994
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health
Plan Direct

FAMILY PRACTICE

MARSHALL, LARRY J
Provider ID: 37825
Board Certified Specialty: No
LARRY J MARSHALL MD
12517 LAKESHORE DR
LAKESIDE, CA 92040-3103
Phone: (619) 443-3843
Fax: (619) 390-1810
After Hours Phone: (619)
443-3843
Provider Gender: Male
License number: A52344
NPI: 1114018132
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

PREVENTATIVE MEDICINE GENERAL

MANNINO, ELIZABETH A
Provider ID: 24748
Board Certified Specialty: No
NEIGHBORHOOD
HEALTHCARE LAKESIDE
10039 VINE ST
LAKESIDE, CA 92040-3120

Phone: (858) 218-3000
Fax:
After Hours Phone: (858)
218-3000
Provider Gender: Female
License number: A43914
NPI: 1548290463
Provider English Spoken: Yes
Provider Language(s) Spoken:
Italian, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website: www.ihpsocal.org
Email:
Medical Group(s): Neighborhood
Healthcare Lakeside
IPA:

LEMON GROVE

CERTIFIED NURSE PRACTITIONER

TOTH, JESSICA R
Provider ID: 107200
Board Certified Specialty: No
LEMON GROVE FAMILY
HEALTH CENTER
7592 BROADWAY
LEMON GROVE, CA
91945-1604
Phone: (619) 515-2550
Fax:
After Hours Phone: (619)
515-2550
Provider Gender: Female
License number: NP95001050

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D. Directorio de proveedores de atención especializada

NPI: 1578993788
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No

♿ Accessibility: P, EB, IB, E, T
 Hours: M-F 9AM-5PM, SA
 9AM-5PM
 Website:
 Email:
 Medical Group(s): Lemon Grove
 Family Health Center
 IPA:

FAMILY PRACTICE

KIM, YUHEE

Provider ID: 63465
 Board Certified Specialty: No
 LEMON GROVE FAMILY
 HEALTH CENTER
 7592 BROADWAY
 LEMON GROVE, CA
 91945-1604
 Phone: (619) 515-2550
 Fax:
 After Hours Phone: (619)
 515-2550
 Provider Gender: Female
 License number: A107323
 NPI: 1629289400
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Korean
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: P, EB, IB, E, T

Hours: M-F 9AM-5PM, SA
 9AM-5PM
 Website:
 Email:
 Medical Group(s): Lemon Grove
 Family Health Center
 IPA:

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI A

Provider ID: 114835
 Board Certified Specialty: No
 FAMILY HLTH CTR SAN
 DIEGO-LEMON GROVE
 7592 BROADWAY
 LEMON GROVE, CA
 91945-1604
 Phone: (619) 515-2500
 Fax:
 After Hours Phone: (619)
 515-2500
 Provider Gender: Female
 License number: 20A14919
 NPI: 1619397031
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy
 Hospital, Grossmont Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: P, EB, IB, E, T

Hours: M-F 9AM-5PM, SA
 9AM-5PM
 Website:
 Email:
 Medical Group(s): Lemon Grove
 Family Health Center
 IPA:

BUECHNER, CHARLENE A

Provider ID: 127442
 Board Certified Specialty: No
 LEMON GROVE FAMILY
 HEALTH CENTER
 7592 BROADWAY
 LEMON GROVE, CA
 91945-1604
 Phone: (619) 515-2550
 Fax:

After Hours Phone: (619)
 515-2550
 Provider Gender: Female
 License number: A68463
 NPI: 1376663831
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp
 Memorial Hospital, Scripps
 Mercy Hospital, Scripps Mercy
 Hospital Chula Vista, Sharp Mary
 Birch Hosp For Women And
 Newborns
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: P, EB, IB, E, T
 Hours: M-F 9AM-5PM, SA
 9AM-5PM
 Website:
 Email:
 Medical Group(s): Lemon Grove
 Family Health Center
 IPA:

CARTER, KHALIL J

Provider ID: 127379
 Board Certified Specialty: No
 LEMON GROVE FAMILY
 HEALTH CENTER
 7592 BROADWAY
 LEMON GROVE, CA
 91945-1604

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D. Directorio de proveedores de atención especializada

<p>Phone: (619) 515-2550 Fax: After Hours Phone: (619) 515-2550 Provider Gender: Male License number: A113001 NPI: 1225231582 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: P, EB, IB, E, T Hours: M-F 9AM-5PM, SA 9AM-5PM Website: Email: Medical Group(s): Lemon Grove Family Health Center IPA:</p> <p>CERVANTES, SANDRA M Provider ID: 114878 Board Certified Specialty: No LEMON GROVE FAMILY HEALTH CENTER 7592 BROADWAY LEMON GROVE, CA 91945-1604 Phone: (619) 515-2550 Fax: After Hours Phone: (619) 515-2550 Provider Gender: Female License number: A118095 NPI: 1073701041 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No</p>	<p>Hospital Affiliation: Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: P, EB, IB, E, T Hours: M-F 9AM-5PM, SA 9AM-5PM Website: Email: Medical Group(s): Lemon Grove Family Health Center IPA:</p> <p>FOLCH TORRES-AGUIAR, BEATRIZ M Provider ID: 120516 Board Certified Specialty: No LEMON GROVE FAMILY HEALTH CENTER 7592 BROADWAY LEMON GROVE, CA 91945-1604 Phone: (619) 515-2550 Fax: After Hours Phone: (619) 515-2550 Provider Gender: Female License number: A148014 NPI: 1457794752 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish, Yue Chinese Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Grossmont Hospital Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: P, EB, IB, E, T Hours: M-F 9AM-5PM, SA</p>	<p>9AM-5PM Website: Email: Medical Group(s): Lemon Grove Family Health Center IPA:</p> <p>LIPSCHITZ, LISA S Provider ID: 115430 Board Certified Specialty: No LEMON GROVE FAMILY HEALTH CENTER 7592 BROADWAY LEMON GROVE, CA 91945-1604 Phone: (619) 515-2550 Fax: After Hours Phone: (619) 515-2550 Provider Gender: Female License number: A72005 NPI: 1649208711 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Grossmont Hospital, Sharp Coronado Hosp And Healthcare Ctr Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: P, EB, IB, E, T Hours: M-F 9AM-5PM, SA 9AM-5PM Website: Email: Medical Group(s): Lemon Grove Family Health Center IPA:</p> <p>MELLENDEZ BERRIOS, IARA DEL M</p>
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D. Directorio de proveedores de atención especializada

Provider ID: 115047
Board Certified Specialty: No
LEMON GROVE FAMILY HEALTH CENTER
7592 BROADWAY
LEMON GROVE, CA
91945-1604
Phone: (619) 515-2550
Fax:
After Hours Phone: (619) 515-2550
Provider Gender: Female
License number: A114181
NPI: 1740514249
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, T
Hours: M-F 9AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s): Lemon Grove Family Health Center
IPA:

RODRIGUEZ JEREZ, ROBERTO D

Provider ID: 130081
Board Certified Specialty: No
FAMILY HLTH CTR SAN DIEGO-LEMEN GROVE
7592 BROADWAY
LEMEN GROVE, CA
91945-1604

Phone: (619) 515-2500
Fax:
After Hours Phone: (619) 515-2500
Provider Gender: Male
License number: A154298
NPI: 1710316450
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, T
Hours: M-F 9AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s): Lemon Grove Family Health Center
IPA:

WINESBURG, JENNIFER J

Provider ID: 114810
Board Certified Specialty: No
FAMILY HLTH CTR SAN DIEGO-LEMEN GROVE
7592 BROADWAY
LEMEN GROVE, CA
91945-1604
Phone: (619) 515-2500
Fax:
After Hours Phone: (619) 515-2500
Provider Gender: Female
License number: 20A11535
NPI: 1811162456
Provider English Spoken: Yes
Provider Language(s) Spoken:

Spanish
Cultural Competency: No
Hospital Affiliation: Desert Regional Med Ctr, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, T
Hours: M-F 9AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s): Lemon Grove Family Health Center
IPA:

ZIEG, ALAN J

Provider ID: 114833
Board Certified Specialty: No
FAMILY HLTH CTR SAN DIEGO-LEMEN GROVE
7592 BROADWAY
LEMEN GROVE, CA
91945-1604
Phone: (619) 515-2500
Fax:
After Hours Phone: (619) 515-2500
Provider Gender: Male
License number: G78814
NPI: 1699790634
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: None

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D. Directorio de proveedores de atención especializada

American Sign Language (ASL):

No

♿ *Accessibility:* P, EB, IB, E, T

Hours: M-F 9AM-5PM, SA

9AM-5PM

Website:

Email:

Medical Group(s): Lemon Grove Family Health Center

IPA:

PHYSICIANS ASSISTANT

FLEMING, DAVID E

Provider ID: 115067

Board Certified Specialty: No

LEMON GROVE FAMILY

HEALTH CENTER

7592 BROADWAY

LEMON GROVE, CA

91945-1604

Phone: (619) 515-2550

Fax:

After Hours Phone: (619)

515-2550

Provider Gender: Male

License number: PA12416

NPI: 1932329505

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* P, EB, IB, E, T

Hours: M-F 9AM-5PM, SA

9AM-5PM

Website:

Email:

Medical Group(s): Lemon Grove Family Health Center

IPA:

NATIONAL CITY

ADDICTIVE MEDICINE

SALGUERO GALLAND, MARIO

L

Provider ID: 284591

Board Certified Specialty: No

HEALTH EXCEL IPA INC

217 HIGHLAND AVE

NATIONAL CITY, CA

91950-1518

Phone: (619) 434-7308

Fax: (619) 434-7310

After Hours Phone: (619)

434-7308

Provider Gender: Male

License number: A122101

NPI: 1487947826

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital, Scripps Mercy Hospital

Chula Vista

Medi-Cal Open Panel: Yes

Min/Max Age: 12/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

ANESTHESIOLOGY PAIN

MANAGEMENT

WYNN, BRENTON D , MD

Provider ID: 268987

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

502 EUCLID AVE STE 200

NATIONAL CITY, CA

91950-2984

Phone: (619) 434-4019

Fax: (877) 264-8373

After Hours Phone: (619)

434-4019

Provider Gender: Male

License number: A73257

NPI: 1528069820

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Paradise

Valley Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc

CARDIOLOGY

CAMACHO, BENJAMIN O , MD

Provider ID: 269129

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

1615 SWEETWATER RD

NATIONAL CITY, CA

91950-7655

Phone: (619) 474-2233

Fax: (619) 474-2211

After Hours Phone: (619)

474-2233

Provider Gender: Male

License number: A52660

NPI: 1699759936

Provider English Spoken: Yes

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D. Directorio de proveedores de atención especializada

<p><i>Provider Language(s) Spoken:</i> Tagalog</p> <p><i>Cultural Competency:</i> No</p> <p><i>Hospital Affiliation:</i> Grossmont Hospital, Alvarado Hospital Llc</p> <p><i>Medi-Cal Open Panel:</i> Yes</p> <p><i>Min/Max Age:</i> 0/999</p> <p><i>American Sign Language (ASL):</i> No</p> <p>♿ <i>Accessibility:</i> W</p> <p><i>Hours:</i> M-SA 9AM-5PM</p> <p><i>Website:</i></p> <p><i>Email:</i></p> <p><i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd</p>	<p><i>Website:</i></p> <p><i>Email:</i></p> <p><i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd</p> <p>DUBEY, RAJESH K</p> <p><i>Provider ID:</i> 269343</p> <p><i>Board Certified Specialty:</i> No</p> <p>COMMUNITY CARE IPA LLC 610 EUCLID AVE STE 302 NATIONAL CITY, CA 91950-2953</p> <p><i>Phone:</i> (209) 521-9661</p> <p><i>Fax:</i></p> <p><i>After Hours Phone:</i> (209) 521-9661</p> <p><i>Provider Gender:</i> Male</p> <p><i>License number:</i> A83527</p> <p><i>NPI:</i> 1225011299</p> <p><i>Provider English Spoken:</i> Yes</p> <p><i>Provider Language(s) Spoken:</i> Bengali, Hindi, Spanish</p> <p><i>Cultural Competency:</i> No</p> <p><i>Hospital Affiliation:</i> Doctors Medical Center, Oak Valley Dist Hosp</p> <p><i>Medi-Cal Open Panel:</i> Yes</p> <p><i>Min/Max Age:</i> 0/999</p> <p><i>American Sign Language (ASL):</i> No</p> <p>♿ <i>Accessibility:</i></p> <p><i>Hours:</i> M-SA 9AM-5PM</p> <p><i>Website:</i></p> <p><i>Email:</i></p> <p><i>Medical Group(s):</i> IPA: Community Care Ipa Llc</p> <p>FERNANDEZ, GENARO C , MD</p> <p><i>Provider ID:</i> 121669</p> <p><i>Board Certified Specialty:</i> No</p> <p>COMMUNITY CARE IPA LLC 610 EUCLID AVE STE 201</p>	<p>NATIONAL CITY, CA 91950-2952</p> <p><i>Phone:</i> (619) 267-8181</p> <p><i>Fax:</i> (619) 479-6750</p> <p><i>After Hours Phone:</i> (619) 267-8181</p> <p><i>Provider Gender:</i> Male</p> <p><i>License number:</i> A45754</p> <p><i>NPI:</i> 1871504498</p> <p><i>Provider English Spoken:</i> Yes</p> <p><i>Provider Language(s) Spoken:</i> Cultural Competency: No</p> <p><i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Paradise Valley Hospital</p> <p><i>Medi-Cal Open Panel:</i> Yes</p> <p><i>Min/Max Age:</i> 0/999</p> <p><i>American Sign Language (ASL):</i> No</p> <p>♿ <i>Accessibility:</i> W</p> <p><i>Hours:</i> M-SA 9AM-5PM</p> <p><i>Website:</i></p> <p><i>Email:</i></p> <p><i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd</p> <p>FERNANDEZ, GENARO, MD</p> <p><i>Provider ID:</i> 268889</p> <p><i>Board Certified Specialty:</i> No</p> <p>COMMUNITY CARE IPA LLC 610 EUCLID AVE STE 201 NATIONAL CITY, CA 91950-2952</p> <p><i>Phone:</i> (619) 267-8181</p> <p><i>Fax:</i> (619) 479-6750</p> <p><i>After Hours Phone:</i> (619) 267-8181</p> <p><i>Provider Gender:</i> Male</p> <p><i>License number:</i> A122302</p> <p><i>NPI:</i> 1073768891</p> <p><i>Provider English Spoken:</i> Yes</p>
<p>CAMACHO, BENJAMIN O</p> <p><i>Provider ID:</i> 35045</p> <p><i>Board Certified Specialty:</i> No</p> <p>IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 1615 SWEETWATER RD NATIONAL CITY, CA 91950-7655</p> <p><i>Phone:</i> (619) 474-2233</p> <p><i>Fax:</i> (619) 474-2211</p> <p><i>After Hours Phone:</i> (619) 474-2233</p> <p><i>Provider Gender:</i> Male</p> <p><i>License number:</i> A52660</p> <p><i>NPI:</i> 1699759936</p> <p><i>Provider English Spoken:</i> Yes</p> <p><i>Provider Language(s) Spoken:</i> Tagalog</p> <p><i>Cultural Competency:</i> No</p> <p><i>Hospital Affiliation:</i> Grossmont Hospital, Alvarado Hospital Llc</p> <p><i>Medi-Cal Open Panel:</i> Yes</p> <p><i>Min/Max Age:</i> None</p> <p><i>American Sign Language (ASL):</i> No</p> <p>♿ <i>Accessibility:</i> W</p> <p><i>Hours:</i> M-SA 9AM-5PM</p>		

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D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken: French, Italian, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Chula Vista, Scripps Mercy Hospital, Sharp Chula Vista Med Ctr, Scripps Memorial Hospital, Grossmont Hospital, Alvarado Hosp Med Ctr, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

FERNANDEZ, GENARO C
Provider ID: 27197
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
610 EUCLID AVE STE 201
NATIONAL CITY, CA
91950-2952
Phone: (619) 267-8181
Fax: (619) 479-6750
After Hours Phone: (619) 267-8181
Provider Gender: Male
License number: A45754
NPI: 1871504498
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital, Chula Vista, Scripps Mercy Hospital, Paradise Valley Hospital

Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

NANAVATI, VIMAL I
Provider ID: 269553
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
2345 E 8TH ST STE 111
NATIONAL CITY, CA
91950-2861
Phone: (619) 585-0476
Fax: (619) 810-2947
After Hours Phone: (619) 585-0476
Provider Gender: Male
License number: G83522
NPI: 1851408082
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado Community Hospital, Paradise Valley Hospital, Alvarado Hospital Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

OVEDO-LINARES, RAUL, MD
Provider ID: 269140
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
502 EUCLID AVE STE 104
NATIONAL CITY, CA
91950-2959
Phone: (619) 434-4288
Fax: (619) 434-4315
After Hours Phone: (619) 434-4288
Provider Gender: Male
License number: A76050
NPI: 1972533941
Provider English Spoken: Yes
Provider Language(s) Spoken: Polish, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital, Scripps Mercy Hospital, Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

PANDHI, JAY N , MD
Provider ID: 269087
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
655 EUCLID AVE STE 208
NATIONAL CITY, CA
91950-2969

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D. Directorio de proveedores de atención especializada

Phone: (619) 512-1915
Fax: (619) 512-1913
After Hours Phone: (619) 512-1915
Provider Gender: Male
License number: C56015
NPI: 1407997406
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

ROUGH, STEVEN J , MD

Provider ID: 269349
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1615 SWEETWATER RD STE D
NATIONAL CITY, CA
91950-7655
Phone: (619) 474-2233
Fax: (619) 474-2211
After Hours Phone: (619) 474-2233
Provider Gender: Male
License number: A124001
NPI: 1386821460
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula

Vista Med Ctr, Sharp Memorial Hospital, Paradise Valley Hospital, Alvarado Hosp Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

ROUGH, STEVEN J , MD

Provider ID: 269350
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
502 EUCLID AVE STE 104
NATIONAL CITY, CA
91950-2959
Phone: (619) 434-4288
Fax: (619) 434-4315
After Hours Phone: (619) 434-4288
Provider Gender: Male
License number: A124001
NPI: 1386821460
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Sharp Memorial Hospital, Paradise Valley Hospital, Alvarado Hosp Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

WYSOCZANSKI, MARIUSZ W

Provider ID: 78417
Board Certified Specialty: No
HEART HEALTH CENTER OF SAN DIEGO A MEDICAL CORPORATION
502 EUCLID AVE STE 104
NATIONAL CITY, CA
91950-2959
Phone: (619) 434-4288
Fax: (619) 434-4315
After Hours Phone: (619) 434-4288
Provider Gender: Male
License number: C55986
NPI: 1659535656
Provider English Spoken: Yes
Provider Language(s) Spoken: Polish, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

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D. Directorio de proveedores de atención especializada

CARDIOVASCULAR DISEASE	<i>Phone: (619) 434-4288</i> <i>Fax: (619) 434-4315</i> <i>After Hours Phone: (619) 434-4288</i> <i>Provider Gender: Male</i> <i>License number: A121180</i> <i>NPI: 1336378371</i> <i>Provider English Spoken: Yes</i> <i>Provider Language(s) Spoken: Korean, Spanish</i> <i>Cultural Competency: No</i> <i>Hospital Affiliation: Sharp Chula Vista Med Ctr</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0/999</i> <i>American Sign Language (ASL): No</i> <i>Accessibility:</i> <i>Hours: M-SA 9AM-5PM</i> <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA: Health Excel Ipa Inc</i>	<i>Min/Max Age: 18/999</i> <i>American Sign Language (ASL): No</i> <i>Accessibility:</i> <i>Hours: M-SA 9AM-5PM</i> <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA: Health Excel Ipa Inc</i>
ESFAHANI, FATEMEH B <i>Provider ID: 241971</i> <i>Board Certified Specialty: No</i> HEALTH EXCEL IPA INC 655 EUCLID AVE STE 304 NATIONAL CITY, CA 91950-2974 <i>Phone: (619) 470-7700</i> <i>Fax: (619) 470-0996</i> <i>After Hours Phone: (619) 470-7700</i> <i>Provider Gender: Female</i> <i>License number: A126659</i> <i>NPI: 1902197569</i> <i>Provider English Spoken: Yes</i> <i>Provider Language(s) Spoken: Farsi, Persian</i> <i>Cultural Competency: No</i> <i>Hospital Affiliation: Clovis Community Hospital, Fresno Community Hospital, Sharp Memorial Hospital, Palomar Medical Center</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 15/130</i> <i>American Sign Language (ASL): No</i> <i>Accessibility:</i> <i>Hours: M-SA 9AM-5PM</i> <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA: Health Excel Ipa Inc</i>	LY, NANCY L <i>Provider ID: 275480</i> <i>Board Certified Specialty: No</i> HEALTH EXCEL IPA INC 502 EUCLID AVE STE 104 NATIONAL CITY, CA 91950-2959 <i>Phone: (619) 434-4288</i> <i>Fax: (619) 434-4315</i> <i>After Hours Phone: (619) 434-4288</i> <i>Provider Gender: Female</i> <i>License number: A125595</i> <i>NPI: 1295007144</i> <i>Provider English Spoken: Yes</i> <i>Provider Language(s) Spoken: Spanish, Vietnamese</i> <i>Cultural Competency: No</i> <i>Hospital Affiliation: Sharp Chula Vista Med Ctr</i> <i>Medi-Cal Open Panel: Yes</i>	NANAVATI, VIMAL I <i>Provider ID: 270830</i> <i>Board Certified Specialty: No</i> HEALTH EXCEL IPA INC 2345 E 8TH ST STE 111 NATIONAL CITY, CA 91950-2861 <i>Phone: (619) 585-0476</i> <i>Fax: (619) 810-2947</i> <i>After Hours Phone: (619) 585-0476</i> <i>Provider Gender: Male</i> <i>License number: G83522</i> <i>NPI: 1851408082</i> <i>Provider English Spoken: Yes</i> <i>Provider Language(s) Spoken:</i> <i>Cultural Competency: No</i> <i>Hospital Affiliation: Alvarado Community Hospital, Paradise Valley Hospital, Alvarado Hospital Llc</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0/999</i> <i>American Sign Language (ASL): No</i> <i>Accessibility:</i> <i>Hours: M-SA 9AM-5PM</i> <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA: Community Care Ipa Llc, Health Excel Ipa Inc</i>
KIM, JAMES T <i>Provider ID: 275402</i> <i>Board Certified Specialty: No</i> HEALTH EXCEL IPA INC 502 EUCLID AVE STE 104 NATIONAL CITY, CA 91950-2959		OVIEDO-LINARES, RAUL <i>Provider ID: 125051</i>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
502 EUCLID AVE STE 104
NATIONAL CITY, CA
91950-2959
Phone: (619) 434-4288
Fax: (619) 434-4315
After Hours Phone: (619)
434-4288
Provider Gender: Male
License number: A76050
NPI: 1972533941
Provider English Spoken: Yes
Provider Language(s) Spoken:
Polish, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr, Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 18/100
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

OVIEDO-LINARES, RAUL

Provider ID: 275482
Board Certified Specialty: No
HEALTH EXCEL IPA INC
502 EUCLID AVE STE 104
NATIONAL CITY, CA
91950-2959

Phone: (619) 434-4288
Fax: (619) 434-4315
After Hours Phone: (619)
434-4288
Provider Gender: Male
License number: A76050
NPI: 1972533941
Provider English Spoken: Yes
Provider Language(s) Spoken:
Polish, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr, Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

PANDHI, JAY N

Provider ID: 269088
Board Certified Specialty: No
HEALTH EXCEL IPA INC
655 EUCLID AVE STE 208
NATIONAL CITY, CA
91950-2969
Phone: (619) 512-1915
Fax: (619) 512-1913
After Hours Phone: (619)
512-1915
Provider Gender: Male
License number: C56015
NPI: 1407997406
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Paradise
Valley Hospital, Scripps Mercy
Hospital Chula Vista, Sharp
Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

ROUGH, STEVEN J

Provider ID: 262117
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
502 EUCLID AVE STE 104
NATIONAL CITY, CA
91950-2959
Phone: (619) 434-4288
Fax: (619) 434-4315
After Hours Phone: (619)
434-4288
Provider Gender: Male
License number: A124001
NPI: 1386821460
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr, Sharp Memorial
Hospital, Paradise Valley
Hospital, Alvarado Hosp Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
Accessibility:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

ROUGH, STEVEN J

Provider ID: 275469

Board Certified Specialty: No

HEALTH EXCEL IPA INC

502 EUCLID AVE STE 104

NATIONAL CITY, CA

91950-2959

Phone: (619) 434-4288

Fax: (619) 434-4315

After Hours Phone: (619)

434-4288

Provider Gender: Male

License number: A124001

NPI: 1386821460

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Chula

Vista Med Ctr, Sharp Memorial

Hospital, Paradise Valley

Hospital, Alvarado Hosp Med Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 18/120

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc, Imperial

Health Holdings Medical

Group-Sd

ROUGH, STEVEN J

Provider ID: 80909

Board Certified Specialty: No

IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD

1615 SWEETWATER RD STE D

NATIONAL CITY, CA

91950-7655

Phone: (619) 474-2233

Fax: (619) 474-2211

After Hours Phone: (619)

474-2233

Provider Gender: Male

License number: A124001

NPI: 1386821460

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Chula

Vista Med Ctr, Sharp Memorial

Hospital, Paradise Valley

Hospital, Alvarado Hosp Med Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: P, EB, IB, E, R,

W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc, Imperial

Health Holdings Medical

Group-Sd

WYSOCZANSKI, MARIUSZ W

Provider ID: 275513

Board Certified Specialty: No

HEALTH EXCEL IPA INC

502 EUCLID AVE STE 104

NATIONAL CITY, CA

91950-2959

Phone: (619) 434-4288

Fax: (619) 434-4315

After Hours Phone: (619)

434-4288

Provider Gender: Male

License number: C55986

NPI: 1659535656

Provider English Spoken: Yes

Provider Language(s) Spoken:

Polish, Spanish, Tagalog

Cultural Competency: No

Hospital Affiliation: Sharp Chula

Vista Med Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 18/100

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc, Imperial

Health Holdings Medical

Group-Sd

WYSOCZANSKI, MARIUSZ W

Provider ID: 78417

Board Certified Specialty: No

HEART HEALTH CENTER OF

SAN DIEGO A MEDICAL

CORPORATION

502 EUCLID AVE STE 104

NATIONAL CITY, CA

91950-2959

Phone: (619) 434-4288

Fax:

After Hours Phone: (619)

434-4288

Provider Gender: Male

License number: C55986

NPI: 1659535656

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
 Polish, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

**CERTIFIED NURSE
PRACTITIONER**

ALCANTAR, JOSE A
Provider ID: 278776
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 655 EUCLID AVE STE 304
 NATIONAL CITY, CA
 91950-2974
Phone: (619) 470-7700
Fax: (619) 470-0996
After Hours Phone: (619) 470-7700
Provider Gender: Male
License number: NP95003735
NPI: 1871886382
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):

No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Health Excel Ipa Inc

AQUINO, FELINO V
Provider ID: 244332
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 2101 GRANGER AVE # 101A
 NATIONAL CITY, CA
 91950-6208
Phone: (844) 200-2426
Fax: (619) 434-9853
After Hours Phone: (844) 200-2426
Provider Gender: Male
License number: NP22974
NPI: 1356684781

Provider English Spoken: Yes
Provider Language(s) Spoken:
 Tagalog
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc

AQUINO, FELINO V
Provider ID: 244335
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 2743 HIGHLAND AVE
 NATIONAL CITY, CA
 91950-7410

Phone: (844) 200-2426
Fax: (619) 474-3919
After Hours Phone: (844) 200-2426
Provider Gender: Male
License number: NP22974
NPI: 1356684781
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Tagalog
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc

AQUINO, FELINO V
Provider ID: 98698
Board Certified Specialty: No
 OPERATION SAMAHAN INC
 2743 HIGHLAND AVE
 NATIONAL CITY, CA
 91950-7410
Phone: (619) 474-2284
Fax:
After Hours Phone: (619) 474-2284
Provider Gender: Male
License number: NP22974
NPI: 1356684781
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Tagalog
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc</p>	<p>2743 HIGHLAND AVE NATIONAL CITY, CA 91950-7410 <i>Phone:</i> (844) 200-2426 <i>Fax:</i> <i>After Hours Phone:</i> (844) 200-2426 <i>Provider Gender:</i> Female <i>License number:</i> NP22378 <i>NPI:</i> 1144689175 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Tagalog <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> W <i>Hours:</i> M-TH 8AM-6PM, F 8AM-5PM, SA 9AM-5PM <i>Website:</i> www.operationsamahan.org <i>Email:</i> <i>Medical Group(s):</i> Operation Samahan - National C <i>IPA:</i></p>	<p><i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc</p>
<p>BERNARDO-GREGORY, ELSIE S , NPA <i>Provider ID:</i> 244833 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 2835 HIGHLAND AVE STE B NATIONAL CITY, CA 91950-7406 <i>Phone:</i> (844) 200-2426 <i>Fax:</i> (619) 477-2628 <i>After Hours Phone:</i> (844) 200-2426 <i>Provider Gender:</i> Female <i>License number:</i> NP15257 <i>NPI:</i> 1588808349 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Tagalog <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc</p>	<p>KHAN, MATTHEW P <i>Provider ID:</i> 238376 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 1428 HIGHLAND AVE NATIONAL CITY, CA 91950-4624 <i>Phone:</i> (619) 474-2284 <i>Fax:</i> <i>After Hours Phone:</i> (619) 474-2284 <i>Provider Gender:</i> Male <i>License number:</i> NP17838 <i>NPI:</i> 1942456124 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i></p>	<p>LIM, IMELDA B <i>Provider ID:</i> 116924 <i>Board Certified Specialty:</i> No OPERATION SAMAHAN INC 2743 HIGHLAND AVE NATIONAL CITY, CA 91950-7410 <i>Phone:</i> (844) 200-2426 <i>Fax:</i> <i>After Hours Phone:</i> (844) 200-2426 <i>Provider Gender:</i> Female <i>License number:</i> NP95000203 <i>NPI:</i> 1093130395 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Tagalog <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>
<p>DACANAY-HERMAN, ROWENA S <i>Provider ID:</i> 127238 <i>Board Certified Specialty:</i> No OPERATION SAMAHAN - NATIONAL C</p>	<p>MACARIOLA, AMPARO E <i>Provider ID:</i> 99315</p>	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
OPERATION SAMAHAN INC
2743 HIGHLAND AVE
NATIONAL CITY, CA
91950-7410

Phone: (619) 474-2284

Fax:

After Hours Phone: (619)
474-2284

Provider Gender: Female

License number: NP95001709

NPI: 1932505401

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

REAL, MARIA F

Provider ID: 105583

Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC
INC

217 HIGHLAND AVE
NATIONAL CITY, CA

91950-1518

Phone: (619) 434-7308

Fax:

After Hours Phone: (619)
434-7308

Provider Gender: Female

License number: NP17328

NPI: 1548450471

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: P, EB, IB, E, R,
W

Hours: M-W,F,SA 9AM-5PM, TH
8AM-2PM

Website: www.lamaestra.org

Email:

Medical Group(s): La Maestra
Family Clinic Inc

IPA:

REID, EMILY

Provider ID: 107174

Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC
INC

217 HIGHLAND AVE
NATIONAL CITY, CA

91950-1518

Phone: (619) 434-7308

Fax:

After Hours Phone: (619)
434-7308

Provider Gender: Female

License number: NP95002766

NPI: 1083081467

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: P, EB, IB, E, R,
W

Hours: M-W,F,SA 9AM-5PM, TH
8AM-2PM

Website: www.lamaestra.org

Email:

Medical Group(s): La Maestra
Family Clinic Inc
IPA:

RENZAS, JENNIFER

Provider ID: 282095

Board Certified Specialty: No
HEALTH EXCEL IPA INC

217 HIGHLAND AVE
NATIONAL CITY, CA

91950-1518

Phone: (619) 434-7308

Fax: (619) 434-7310

After Hours Phone: (619)
434-7308

Provider Gender: Female

License number: NP95016776

NPI: 1225512759

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

SWEENEY, ZSA ZSA A

Provider ID: 282122

Board Certified Specialty: No
HEALTH EXCEL IPA INC

217 HIGHLAND AVE
NATIONAL CITY, CA

91950-1518

Phone: (619) 434-7308

Fax: (619) 434-7310

After Hours Phone: (619)
434-7308

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: NP95007730
NPI: 1003159344
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

VILLANUEVA DE GUTIE, BERENICE

Provider ID: 279151
Board Certified Specialty: No
HEALTH EXCEL IPA INC
217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518
Phone: (619) 434-7308
Fax: (619) 434-7310
After Hours Phone: (619)
434-7308
Provider Gender: Female
License number: NP95002188
NPI: 1952795536
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Health Excel Ipa Inc
WILLIAMS, BREAHA A
Provider ID: 115127
Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC
INC
217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518
Phone: (619) 434-7308
Fax:
After Hours Phone: (619)
434-7308
Provider Gender: Female
License number: NP95001840
NPI: 1063884864
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
W
Hours: M-W,F,SA 9AM-5PM, TH
8AM-2PM
Website: www.lamaestra.org
Email:
Medical Group(s): La Maestra
Family Clinic Inc
IPA:

DERMATOLOGY

BROGAN, JACQUELINE L , MD
Provider ID: 265250
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
655 EUCLID AVE STE 401
NATIONAL CITY, CA
91950-2978

Phone: (619) 267-8303
Fax: (619) 267-4835
After Hours Phone: (619)
267-8303
Provider Gender: Female
License number: A160890
NPI: 1801273479
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

CELANO, NICHOLAS J

Provider ID: 102706
Board Certified Specialty: Yes
WILLIAM F RESH MD SKIN
AND SKIN CANCER MED GRP
655 EUCLID AVE STE 401
NATIONAL CITY, CA
91950-2978
Phone: (619) 267-8303
Fax: (619) 267-4835
After Hours Phone: (619)
267-8303
Provider Gender: Male
License number: A120411
NPI: 1457662264
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p><i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>	<p>Health Holdings Medical Group-Sd</p> <p>CELANO, NICHOLAS J <i>Provider ID:</i> 102706 <i>Board Certified Specialty:</i> No WILLIAM F RESH MD SKIN AND SKIN CANCER MED GRP 655 EUCLID AVE STE 401 NATIONAL CITY, CA 91950-2978 <i>Phone:</i> (619) 267-8303 <i>Fax:</i> <i>After Hours Phone:</i> (619) 267-8303 <i>Provider Gender:</i> Male <i>License number:</i> A120411 <i>NPI:</i> 1457662264 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>	<p>NATIONAL CITY, CA 91950-2978 <i>Phone:</i> (619) 267-8303 <i>Fax:</i> (619) 267-4835 <i>After Hours Phone:</i> (619) 267-8303 <i>Provider Gender:</i> Male <i>License number:</i> A120411 <i>NPI:</i> 1457662264 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>
<p>CELANO, NICHOLAS J <i>Provider ID:</i> 102706 <i>Board Certified Specialty:</i> Yes WILLIAM F RESH MD SKIN AND SKIN CANCER MED GRP 655 EUCLID AVE STE 401 NATIONAL CITY, CA 91950-2978 <i>Phone:</i> (619) 267-8303 <i>Fax:</i> (619) 267-4835 <i>After Hours Phone:</i> (619) 267-8303 <i>Provider Gender:</i> Male <i>License number:</i> A120411 <i>NPI:</i> 1457662264 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>	<p>Health Holdings Medical Group-Sd</p> <p>CELANO, NICHOLAS J , MD <i>Provider ID:</i> 269115 <i>Board Certified Specialty:</i> Yes COMMUNITY CARE IPA LLC 655 EUCLID AVE STE 401</p>	<p>CHIANG, JENNIFER Y <i>Provider ID:</i> 107662 <i>Board Certified Specialty:</i> No WILLIAM F RESH MD SKIN AND SKIN CANCER MED GRP 655 EUCLID AVE STE 401 NATIONAL CITY, CA 91950-2978 <i>Phone:</i> (619) 267-8303 <i>Fax:</i> (619) 267-4835 <i>After Hours Phone:</i> (619) 267-8303 <i>Provider Gender:</i> Female <i>License number:</i> A120528 <i>NPI:</i> 1457656738 <i>Provider English Spoken:</i> Yes</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p><i>Provider Language(s) Spoken:</i> Chinese, Mandarin, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>	<p><i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>	<p>COMMUNITY CARE IPA LLC 655 EUCLID AVE STE 401 NATIONAL CITY, CA 91950-2978 <i>Phone:</i> (619) 267-8303 <i>Fax:</i> (619) 267-4835 <i>After Hours Phone:</i> (619) 267-8303 <i>Provider Gender:</i> Female <i>License number:</i> A120528 <i>NPI:</i> 1457656738 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Chinese, Mandarin, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>
<p>CHIANG, JENNIFER Y <i>Provider ID:</i> 107662 <i>Board Certified Specialty:</i> No WILLIAM F RESH MD SKIN AND SKIN CANCER MED GRP 655 EUCLID AVE STE 401 NATIONAL CITY, CA 91950-2978 <i>Phone:</i> (619) 267-8303 <i>Fax:</i> <i>After Hours Phone:</i> (619) 267-8303 <i>Provider Gender:</i> Female <i>License number:</i> A120528 <i>NPI:</i> 1457656738 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Chinese, Mandarin, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> W <i>Hours:</i> M-F 8:30AM-4:30PM, SA 9AM-5PM</p>	<p>CHIANG, JENNIFER Y <i>Provider ID:</i> 262273 <i>Board Certified Specialty:</i> No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 655 EUCLID AVE STE 401 NATIONAL CITY, CA 91950-2978 <i>Phone:</i> (619) 267-8303 <i>Fax:</i> (619) 267-4835 <i>After Hours Phone:</i> (619) 267-8303 <i>Provider Gender:</i> Female <i>License number:</i> A120528 <i>NPI:</i> 1457656738 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Chinese, Mandarin, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>	<p>COHEN, PHILIP R <i>Provider ID:</i> 202209 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 655 EUCLID AVE STE 401 NATIONAL CITY, CA 91950-2978 <i>Phone:</i> (619) 267-8303 <i>Fax:</i> (619) 267-4835 <i>After Hours Phone:</i> (619) 267-8303 <i>Provider Gender:</i> Male <i>License number:</i> G89274 <i>NPI:</i> 1366565467 <i>Provider English Spoken:</i> Yes</p>
<p>CHIANG, JENNIFER Y , MD <i>Provider ID:</i> 269157 <i>Board Certified Specialty:</i> No</p>	<p>CHIANG, JENNIFER Y , MD <i>Provider ID:</i> 269157 <i>Board Certified Specialty:</i> No</p>	<p></p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

CROWLEY, CHRISTOPHER S

Provider ID: 241929

Board Certified Specialty: No

HEALTH EXCEL IPA INC

655 EUCLID AVE STE 401

NATIONAL CITY, CA

91950-2978

Phone: (619) 267-8303

Fax: (619) 267-4835

After Hours Phone: (619)

267-8303

Provider Gender: Male

License number: A134188

NPI: 1962836783

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc

CROWLEY, CHRISTOPHER S , MD

Provider ID: 269667

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

655 EUCLID AVE STE 401

NATIONAL CITY, CA

91950-2978

Phone: (619) 267-8303

Fax: (619) 267-4835

After Hours Phone: (619)

267-8303

Provider Gender: Male

License number: A134188

NPI: 1962836783

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc

NELSON, AISLYN M , MD

Provider ID: 246490

Board Certified Specialty: Yes

COMMUNITY CARE IPA LLC

655 EUCLID AVE STE 401

NATIONAL CITY, CA

91950-2978

Phone: (619) 267-8303

Fax: (619) 267-4835

After Hours Phone: (619)

267-8303

Provider Gender: Female

License number: A147913

NPI: 1154717288

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Paradise

Valley Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

RESH, WILLIAM F

Provider ID: 124997

Board Certified Specialty: No

IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD

655 EUCLID AVE STE 401

NATIONAL CITY, CA

91950-2978

Phone: (619) 267-8303

Fax: (619) 267-4835

After Hours Phone: (619)

267-8303

Provider Gender: Male

License number: C34661

NPI: 1154309862

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Email:
Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc, Imperial
 Health Holdings Medical
 Group-Sd

RESH, WILLIAM F

Provider ID: 204467
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 655 EUCLID AVE STE 401
 NATIONAL CITY, CA
 91950-2978
Phone: (619) 267-8303
Fax: (619) 267-4835
After Hours Phone: (619)
 267-8303
Provider Gender: Male
License number: C34661
NPI: 1154309862
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No

⚭ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc, Imperial
 Health Holdings Medical
 Group-Sd

RESH, WILLIAM F , MD

Provider ID: 269100
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 655 EUCLID AVE STE 401

NATIONAL CITY, CA
 91950-2978
Phone: (619) 267-8303
Fax: (619) 267-4835
After Hours Phone: (619)
 267-8303
Provider Gender: Male
License number: C34661
NPI: 1154309862
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ⚭ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc, Imperial
 Health Holdings Medical
 Group-Sd

RESH, WILLIAM F

Provider ID: 66264
Board Certified Specialty: No
 WILLIAM F RESH MD SKIN
 AND SKIN CANCER MED GRP
 655 EUCLID AVE STE 401
 NATIONAL CITY, CA
 91950-2978
Phone: (619) 267-8303
Fax: (619) 267-4835
After Hours Phone: (619)
 267-8303
Provider Gender: Male
License number: C34661
NPI: 1154309862
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation:
 Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ⚭ *Accessibility:* W
Hours: M-F 8:30AM-4:30PM, SA
 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc, Imperial
 Health Holdings Medical
 Group-Sd

SATEESH, BROOKE R

Provider ID: 124998
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 655 EUCLID AVE STE 401
 NATIONAL CITY, CA
 91950-2978
Phone: (619) 267-8303
Fax: (619) 267-4835
After Hours Phone: (619)
 267-8303
Provider Gender: Female
License number: A109670
NPI: 1164565339
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital, Scripps Mercy Hospital
 Chula Vista, Paradise Valley
 Hospital, Sharp Coronado Hosp
 And Healthcare Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ⚭ *Accessibility:*
Hours: M-SA 9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

SATEESH, BROOKE R

Provider ID: 127497
Board Certified Specialty: No
HEALTH EXCEL IPA INC
655 EUCLID AVE STE 401
NATIONAL CITY, CA
91950-2978
Phone: (619) 267-8303
Fax: (619) 267-4835
After Hours Phone: (619)
267-8303
Provider Gender: Female
License number: A109670
NPI: 1164565339
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista, Paradise Valley
Hospital, Sharp Coronado Hosp
And Healthcare Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

SATEESH, BROOKE R , MD

Provider ID: 269155
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
655 EUCLID AVE STE 401
NATIONAL CITY, CA
91950-2978
Phone: (619) 267-8303
Fax: (619) 267-4835
After Hours Phone: (619)
267-8303
Provider Gender: Female
License number: A109670
NPI: 1164565339
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista, Paradise Valley
Hospital, Sharp Coronado Hosp
And Healthcare Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

SATEESH, BROOKE R

Provider ID: 46267
Board Certified Specialty: No
WILLIAM F RESH MD SKIN
AND SKIN CANCER MED GRP
655 EUCLID AVE STE 401
NATIONAL CITY, CA
91950-2978

Phone: (619) 267-8303
Fax:
After Hours Phone: (619)
267-8303
Provider Gender: Female
License number: A109670
NPI: 1164565339
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital Chula Vista, Paradise
Valley Hospital, Sharp Coronado
Hosp And Healthcare Ctr,
Scripps Mercy Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

Accessibility: W
Hours: M-F 8:30AM-4:30PM, SA
9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

UEBELHOER, NATHAN S

Provider ID: 125008
Board Certified Specialty: No
WILLIAM F RESH MD SKIN
AND SKIN CANCER MED GRP
655 EUCLID AVE STE 401
NATIONAL CITY, CA
91950-2978
Phone: (619) 267-8303
Fax: (619) 267-4835
After Hours Phone: (619)
267-8303
Provider Gender: Male
License number: 20A9328
NPI: 1659344513

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p><i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Naval Medical Ctr Sd Rbe <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>	<p>9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>	<p><i>Provider ID:</i> 47984 <i>Board Certified Specialty:</i> No OPERATION SAMAHAN - NATIONAL C 2743 HIGHLAND AVE NATIONAL CITY, CA 91950-7410 <i>Phone:</i> (844) 200-2426 <i>Fax:</i> <i>After Hours Phone:</i> (844) 200-2426 <i>Provider Gender:</i> Female <i>License number:</i> A74777 <i>NPI:</i> 1245372507 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-TH 8AM-6PM, F 8AM-5PM, SA 9AM-5PM <i>Website:</i> www.operationsamahan.org <i>Email:</i> <i>Medical Group(s):</i> Operation Samahan - National C <i>IPA:</i></p>
<p>UEBELHOER, NATHAN S <i>Provider ID:</i> 125008 <i>Board Certified Specialty:</i> No WILLIAM F RESH MD SKIN AND SKIN CANCER MED GRP 655 EUCLID AVE STE 401 NATIONAL CITY, CA 91950-2978 <i>Phone:</i> (619) 267-8303 <i>Fax:</i> <i>After Hours Phone:</i> (619) 267-8303 <i>Provider Gender:</i> Male <i>License number:</i> 20A9328 <i>NPI:</i> 1659344513 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Naval Medical Ctr Sd Rbe <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-F 8:30AM-4:30PM, SA</p>	<p>UEBELHOER, NATHAN S , MD <i>Provider ID:</i> 269137 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 655 EUCLID AVE STE 401 NATIONAL CITY, CA 91950-2978 <i>Phone:</i> (619) 267-8303 <i>Fax:</i> (619) 267-4835 <i>After Hours Phone:</i> (619) 267-8303 <i>Provider Gender:</i> Male <i>License number:</i> 20A9328 <i>NPI:</i> 1659344513 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Naval Medical Ctr Sd Rbe <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>	<p>MOYA, MARY R <i>Provider ID:</i> 118066 <i>Board Certified Specialty:</i> No OPERATION SAMAHAN INC 2835 HIGHLAND AVE STE A NATIONAL CITY, CA 91950-7406 <i>Phone:</i> (844) 200-2426 <i>Fax:</i> (619) 434-8999 <i>After Hours Phone:</i> (844) 200-2426 <i>Provider Gender:</i> Female</p>
<hr/> <p>FAMILY PRACTICE</p> <hr/>		
<p>BAEZ, BEATRICE E</p>		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: A80185
NPI: 1093844417
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

Stanford Health Care, California
 Pacific Med Ctr, Selma
 Community Hospital, Adventist Medical Center, Adventist Med Ctr Reedley, Loma Linda
 University Comm Med Ctr, Regional Medical Ctr Of San Jose
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

INTERNAL MEDICINE

CALDERON MOLINA, JUAN S

Provider ID: 213112
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 655 EUCLID AVE STE 303
 NATIONAL CITY, CA
 91950-2975

Phone: (619) 585-4370

Fax: (619) 585-4033

After Hours Phone: (619) 585-4370

Provider Gender: Male

License number: C143845

NPI: 1366626467

Provider English Spoken: Yes

Provider Language(s) Spoken:

German, Spanish, Tagalog

Cultural Competency: No

Hospital Affiliation: Sharp Chula Vista Med Ctr, Paradise Valley Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 18/120

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical

INFECTIOUS DISEASE

CABINIAN, ANTONIO E , MD

Provider ID: 127991

Board Certified Specialty: No
 COMMUNITY CARE IPA LLC

655 EUCLID AVE STE 209

NATIONAL CITY, CA

91950-2970

Phone: (619) 470-7000

Fax: (619) 470-7009

After Hours Phone: (619)

470-7000

Provider Gender: Male

License number: A45959

NPI: 1275720294

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Tagalog

Cultural Competency: No

Hospital Affiliation: Paradise Valley Hospital, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital

Medi-Cal Open Panel: Yes

GASTROENTEROLOGY

GISH, ROBERT G

Provider ID: 279969

Board Certified Specialty: No

HEALTH EXCEL IPA INC

217 HIGHLAND AVE

NATIONAL CITY, CA

91950-1518

Phone: (619) 434-7308

Fax: (619) 434-7310

After Hours Phone: (888)

216-8982

Provider Gender: Male

License number: G45632

NPI: 1548281322

Provider English Spoken: Yes

Provider Language(s) Spoken:

Dutch, French, Spanish,

Vietnamese

Cultural Competency: No

Hospital Affiliation: Providence Santa Rosa Memorial Hospital, California Pacific Med Ctr Ca

Campus Hosp, Ucsd Medical Ctr,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Group-Sd

MAA CHIP, FHARAK

Provider ID: 212900
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 655 EUCLID AVE STE 303
 NATIONAL CITY, CA
 91950-2975
 Phone: (619) 475-4900
 Fax: (619) 475-8373
 After Hours Phone: (619)
 475-4900
 Provider Gender: Male
 License number: A117604
 NPI: 1245518414
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp Chula
 Vista Med Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/120
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:

Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc, Imperial
 Health Holdings Medical
 Group-Sd

WYSOCZANSKI, MARIUSZ W , MD

Provider ID: 269007
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 502 EUCLID AVE STE 104
 NATIONAL CITY, CA
 91950-2959

Phone: (619) 434-4288
 Fax: (619) 434-4315
 After Hours Phone: (619)
 434-4288
 Provider Gender: Male
 License number: C55986
 NPI: 1659535656
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Polish, Spanish, Tagalog
 Cultural Competency: No
 Hospital Affiliation: Sharp Chula
 Vista Med Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc, Imperial
 Health Holdings Medical
 Group-Sd

MATERNAL AND FETAL MEDICINE

FAKSH, ARIJ

Provider ID: 278443
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 217 HIGHLAND AVE
 NATIONAL CITY, CA
 91950-1518
 Phone: (619) 434-7308
 Fax: (619) 434-7310
 After Hours Phone: (619)
 434-7308
 Provider Gender: Female
 License number: 20A14222
 NPI: 1912166737
 Provider English Spoken: Yes

Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Sharp
 Memorial Hospital, Tri City
 Medical Ctr, Scripps Mercy
 Hospital, Scripps Green Hospital,
 Scripps Memorial Hospital
 Encinitas, Scripps Memorial
 Hospital, Scripps Mercy Hospital
 Chula Vista
 Medi-Cal Open Panel: Yes
 Min/Max Age: 12/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Health Excel Ipa Inc

NEPHROLOGY

CALDERON MOLINA, JUAN S

Provider ID: 109336
 Board Certified Specialty: No
 BALBOA NEPHROLOGY MED
 GRP INC
 655 EUCLID AVE STE 303
 NATIONAL CITY, CA
 91950-2975
 Phone: (619) 475-4900
 Fax:
 After Hours Phone: (619)
 475-4900
 Provider Gender: Male
 License number: C143845
 NPI: 1366626467
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 German, Spanish, Tagalog
 Cultural Competency: No
 Hospital Affiliation: Sharp Chula
 Vista Med Ctr, Paradise Valley
 Hospital

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website: www.bnmg.org
Email:

Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

CALDERON MOLINA, JUAN S , MD

Provider ID: 109336
Board Certified Specialty: No
BALBOA NEPHROLOGY MED
GRP INC
655 EUCLID AVE STE 303
NATIONAL CITY, CA
91950-2975
Phone: (619) 585-4370
Fax: (619) 585-4033
After Hours Phone: (619)
585-4370
Provider Gender: Male
License number: C143845
NPI: 1366626467
Provider English Spoken: Yes
Provider Language(s) Spoken:
German, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr, Paradise Valley
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

CALDERON MOLINA, JUAN S

Provider ID: 262118
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
655 EUCLID AVE STE 303
NATIONAL CITY, CA
91950-2975
Phone: (619) 585-4370
Fax: (619) 585-4033
After Hours Phone: (619)
585-4370
Provider Gender: Male
License number: C143845
NPI: 1366626467
Provider English Spoken: Yes
Provider Language(s) Spoken:
German, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr, Paradise Valley
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

COMUNALE, RODERICK A

Provider ID: 270591
Board Certified Specialty: No

HEALTH EXCEL IPA INC
502 EUCLID AVE STE 205
NATIONAL CITY, CA
91950-2993
Phone: (858) 551-0276
Fax: (858) 454-8796
After Hours Phone: (858)
551-0276
Provider Gender: Male
License number: A43885
NPI: 1568462109
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr, Scripps Mercy
Hospital Chula Vista, Paradise
Valley Hospital, Alvarado
Hospital Llc, Scripps Mercy
Hospital, Alvarado Hosp Med Ctr,
Kindred Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility: P, EB, IB, E, R,
W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

MAA CHIP, FHARAK

Provider ID: 262271
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
655 EUCLID AVE STE 303
NATIONAL CITY, CA
91950-2975

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 475-4900
Fax: (619) 475-8373
After Hours Phone: (619) 475-4900
Provider Gender: Male
License number: A117604
NPI: 1245518414
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

MAA CHIP, FHARAK
Provider ID: 84000
Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC
 655 EUCLID AVE STE 303
 NATIONAL CITY, CA
 91950-2975
Phone: (619) 475-4900
Fax:
After Hours Phone: (619) 475-4900
Provider Gender: Male
License number: A117604
NPI: 1245518414
Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website: www.bnmg.org
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

MAA CHIP, FHARAK, MD
Provider ID: 84000
Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC
 655 EUCLID AVE STE 303
 NATIONAL CITY, CA
 91950-2975
Phone: (619) 475-4900
Fax: (619) 475-8373
After Hours Phone: (619) 475-4900
Provider Gender: Male
License number: A117604
NPI: 1245518414
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes

Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

SACAMAY, TAGUMPAY E
Provider ID: 212753
Board Certified Specialty: No
HEALTH EXCEL IPA INC
 655 EUCLID AVE STE 303
 NATIONAL CITY, CA
 91950-2975
Phone: (619) 475-4900
Fax: (619) 475-8373
After Hours Phone: (619) 475-4900
Provider Gender: Male
License number: A62631
NPI: 1407851041
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Paradise Valley Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/120
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

SACAMAY, TAGUMPAY E

Provider ID: 262201
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
655 EUCLID AVE STE 303
NATIONAL CITY, CA
91950-2975
Phone: (619) 475-4900
Fax: (619) 475-8373
After Hours Phone: (619)
475-4900
Provider Gender: Male
License number: A62631
NPI: 1407851041
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr, Scripps Mercy
Hospital Chula Vista, Paradise
Valley Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

SACAMAY, TAGUMPAY E

Provider ID: 26710
Board Certified Specialty: No
BALBOA NEPHROLOGY MED

GRP INC
655 EUCLID AVE STE 303
NATIONAL CITY, CA
91950-2975
Phone: (619) 475-4900
Fax: (619) 267-6644
After Hours Phone: (619)
475-4900
Provider Gender: Male
License number: A62631
NPI: 1407851041
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr, Scripps Mercy
Hospital Chula Vista, Paradise
Valley Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website: www.bnmg.org
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

SACAMAY, TAGUMPAY E , MD

Provider ID: 26710
Board Certified Specialty: No
BALBOA NEPHROLOGY MED
GRP INC
655 EUCLID AVE STE 303
NATIONAL CITY, CA
91950-2975
Phone: (619) 475-4900
Fax: (619) 475-8373
After Hours Phone: (619)
475-4900

Provider Gender: Male
License number: A62631
NPI: 1407851041
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr, Scripps Mercy
Hospital Chula Vista, Paradise
Valley Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

NEUROLOGY

KUGEL, SAMUEL

Provider ID: 244863
Board Certified Specialty: No
HEALTH EXCEL IPA INC
502 EUCLID AVE STE 305
NATIONAL CITY, CA
91950-8901
Phone: (619) 472-2600
Fax: (619) 472-5700
After Hours Phone: (619)
472-2600
Provider Gender: Male
License number: A54412
NPI: 1497813968
Provider English Spoken: Yes
Provider Language(s) Spoken:
Portuguese, Spanish
Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Alvarado Hospital Llc, Paradise Valley Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/100
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Rady Childrens Health Network

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
502 EUCLID AVE STE 300
NATIONAL CITY, CA
91950-2950
Phone: (619) 475-1261
Fax: (619) 475-1267
After Hours Phone: (619) 475-1261
Provider Gender: Female
License number: A113471
NPI: 1255643474
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Rady Childrens Health Network

OBSTETRICS / GYNECOLOGY

DEL ROSARIO, GELEN R
Provider ID: 206092
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
502 EUCLID AVE STE 300
NATIONAL CITY, CA
91950-2950
Phone: (619) 475-1261
Fax: (619) 475-1267
After Hours Phone: (619) 475-1261
Provider Gender: Female
License number: A113471
NPI: 1255643474
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM

DEL ROSARIO, GELEN R
Provider ID: 257478
Board Certified Specialty: No
BLUE SHIELD PROMISE HEALTH PLAN DIRECT
502 EUCLID AVE STE 300
NATIONAL CITY, CA
91950-2950
Phone: (619) 475-1261
Fax: (619) 475-1267
After Hours Phone: (619) 475-1261
Provider Gender: Female
License number: A113471
NPI: 1255643474
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Rady Childrens Health Network

DEL ROSARIO, GELEN R , MD
Provider ID: 269247

HARDER, ELMER W
Provider ID: 26687
Board Certified Specialty: No
SOUTH BAY OB GYN MED GRP INC
655 EUCLID AVE STE 409
NATIONAL CITY, CA
91950-2981
Phone: (619) 267-8313
Fax:
After Hours Phone: (619) 267-8313
Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: A38000
NPI: 1215014428
Provider English Spoken: Yes
Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Paradise Valley Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-TH 8:30AM-5:30PM, F 8:30AM-4:30PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

WANG, AI WEI

Provider ID: 26930
Board Certified Specialty: No
SOUTH BAY OB GYN MED GRP INC
655 EUCLID AVE STE 409
NATIONAL CITY, CA
91950-2981
Phone: (619) 267-8313
Fax: (619) 472-2008
After Hours Phone: (619) 267-8313
Provider Gender: Male
License number: A91882
NPI: 1548339534
Provider English Spoken: Yes
Provider Language(s) Spoken: Chinese, Mandarin, Spanish
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: No
Min/Max Age: None

American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-TH 8:30AM-5:30PM, F 8:30AM-4:30PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

OPHTHALMOLOGY

ABDALLAH, WALID F , MD

Provider ID: 266063
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1520 E PLAZA BLVD
NATIONAL CITY, CA
91950-3616
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619) 425-7755
Provider Gender: Male
License number: A146829
NPI: 1871912717
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Korean, Mandarin, Spanish
Cultural Competency: No
Hospital Affiliation: Good Samaritan Hospital Los Angeles, Childrens Hosp Of Los Angeles
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

CARRABY, ARNETT, MD

Provider ID: 268383
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1520 E PLAZA BLVD
NATIONAL CITY, CA
91950-3616
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619) 425-7755
Provider Gender: Male
License number: G47836
NPI: 1366530792
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation: El Centro Regional Medical Center, Pioneers Memorial Hospital, Alvarado Hospital Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

CARRABY, ARNETT

Provider ID: 268960
Board Certified Specialty: No
HEALTH EXCEL IPA INC
1520 E PLAZA BLVD
NATIONAL CITY, CA
91950-3616

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619) 425-7755
Provider Gender: Male
License number: G47836
NPI: 1366530792
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation: El Centro Regional Medical Center, Pioneers Memorial Hospital, Alvarado Hospital Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: No
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

CHANG, TOM S , MD

Provider ID: 270365
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
2240 E PLAZA BLVD STE F G
NATIONAL CITY, CA
91950-5165
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800) 898-2020
Provider Gender: Male
License number: A69909
NPI: 1609848969
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Armenian, Cantonese, Chinese, Croatian, Korean,

Mandarin, Spanish
Cultural Competency: No
Hospital Affiliation: San Gabriel Valley Med Ctr, Providence Little Co Of Mary Med Ctr Torrance, Methodist Hosp Of Southern California, Hollywood Presbyterian Med Ctr, Desert Regional Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: No
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

CHAVEZ, CESAR T

Provider ID: 265120
Board Certified Specialty: No
HEALTH EXCEL IPA INC
1520 E PLAZA BLVD
NATIONAL CITY, CA
91950-3616
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619) 425-7755
Provider Gender: Male
License number: G51615
NPI: 1720082563
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: El Centro Regional Medical Center, Paradise Valley Hospital, Scripps Mercy Hospital, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: No
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

DELENGOCKY, TAYSON

Provider ID: 265164
Board Certified Specialty: No
HEALTH EXCEL IPA INC
1520 E PLAZA BLVD
NATIONAL CITY, CA
91950-3616
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619) 425-7755
Provider Gender: Male
License number: 20A12784
NPI: 1164637153
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, French, Spanish, Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation: El Centro Regional Medical Center, Alvarado Hospital Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: No
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

ECHEGOYEN, JULIO C , MD

Provider ID: 268352
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1520 E PLAZA BLVD
NATIONAL CITY, CA
91950-3616
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619) 425-7755
Provider Gender: Male
License number: A121431
NPI: 1770801540
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Paradise Valley Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

FISH, STEVEN M

Provider ID: 269168
Board Certified Specialty: No
HEALTH EXCEL IPA INC
655 EUCLID AVE STE 302
NATIONAL CITY, CA
91950-2973

Phone: (619) 472-1010
Fax: (844) 897-3788
After Hours Phone: (619) 472-1010
Provider Gender: Male
License number: A164497
NPI: 1760877120
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

GOLLOGLY, HEIDRUN E

Provider ID: 125022
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
655 EUCLID AVE STE 302
NATIONAL CITY, CA
91950-2973
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619) 472-1010
Provider Gender: Female
License number: A134761
NPI: 1477879823
Provider English Spoken: Yes
Provider Language(s) Spoken: French, German, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Adventist Health And Rideout, Grossmont Hospital, Desert Regional Med Hospital, Paradise Valley Hospital, Scripps Mercy Hospital, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):

Ctr, Paradise Valley Hospital, Scripps Mercy Hospital, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

GOLLOGLY, HEIDRUN E

Provider ID: 125022
Board Certified Specialty: No
HEALTH EXCEL IPA INC
655 EUCLID AVE STE 302
NATIONAL CITY, CA
91950-2973
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619) 472-1010
Provider Gender: Female
License number: A134761
NPI: 1477879823
Provider English Spoken: Yes
Provider Language(s) Spoken: French, German, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Adventist Health And Rideout, Grossmont Hospital, Desert Regional Med Ctr, Paradise Valley Hospital, Scripps Mercy Hospital, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd	IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd HAIGHT, BRUCE T , MD <i>Provider ID:</i> 269113 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 655 EUCLID AVE STE 302 NATIONAL CITY, CA 91950-2973 <i>Phone:</i> (619) 472-1010 <i>Fax:</i> (619) 479-5233 <i>After Hours Phone:</i> (619) 472-1010 <i>Provider Gender:</i> Male <i>License number:</i> G41117 <i>NPI:</i> 1427029628 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc	<i>Phone:</i> (619) 425-7755 <i>Fax:</i> (619) 425-2138 <i>After Hours Phone:</i> (619) 425-7755 <i>Provider Gender:</i> Female <i>License number:</i> A155828 <i>NPI:</i> 1063850808 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Hemet Valley Med Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc
GOLLOGLY, HEIDRUN E , MD <i>Provider ID:</i> 269126 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 655 EUCLID AVE STE 302 NATIONAL CITY, CA 91950-2973 <i>Phone:</i> (619) 472-1010 <i>Fax:</i> (619) 479-5233 <i>After Hours Phone:</i> (619) 472-1010 <i>Provider Gender:</i> Female <i>License number:</i> A134761 <i>NPI:</i> 1477879823 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> French, German, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital Chula Vista, Adventist Health And Rideout, Grossmont Hospital, Desert Regional Med Ctr, Paradise Valley Hospital, Scripps Mercy Hospital, Sharp Memorial Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i>	KHANDAN, SARA, MD <i>Provider ID:</i> 268351 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 1520 E PLAZA BLVD NATIONAL CITY, CA 91950-3616	KOWNACKI, JOHN <i>Provider ID:</i> 262427 <i>Board Certified Specialty:</i> No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 655 EUCLID AVE STE 302 NATIONAL CITY, CA 91950-2973 <i>Phone:</i> (619) 472-1010 <i>Fax:</i> (619) 479-5233 <i>After Hours Phone:</i> (619) 472-1010 <i>Provider Gender:</i> Male <i>License number:</i> G84672 <i>NPI:</i> 1225189418 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

KOWNACKI, JOHN, MD

Provider ID: 269086

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
655 EUCLID AVE STE 302
NATIONAL CITY, CA
91950-2973

Phone: (619) 472-1010

Fax: (619) 479-5233

After Hours Phone: (619)
472-1010

Provider Gender: Male

License number: G84672

NPI: 1225189418

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

MANI, MAJID

Provider ID: 265200

Board Certified Specialty: No
HEALTH EXCEL IPA INC
1520 E PLAZA BLVD
NATIONAL CITY, CA
91950-3616

Phone: (619) 425-7755

Fax: (619) 425-2138

After Hours Phone: (619)
425-7755

Provider Gender: Male

License number: A60640

NPI: 1043261373

Provider English Spoken: Yes

Provider Language(s) Spoken:
Farsi, Spanish

Cultural Competency: No

Hospital Affiliation: El Centro
Regional Medical Center, Sharp
Memorial Hospital, Pioneers
Memorial Hospital, Scripps
Memorial Hospital, Ucsd Medical
Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

MANI, MAJID, MD

Provider ID: 268295

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1520 E PLAZA BLVD
NATIONAL CITY, CA
91950-3616

Phone: (619) 425-7755

Fax: (619) 425-2138

After Hours Phone: (619)
425-7755

Provider Gender: Male

License number: A60640

NPI: 1043261373

Provider English Spoken: Yes

Provider Language(s) Spoken:
Farsi, Spanish

Cultural Competency: No

Hospital Affiliation: El Centro
Regional Medical Center, Sharp
Memorial Hospital, Pioneers
Memorial Hospital, Scripps
Memorial Hospital, Ucsd Medical
Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

MANI, NASRIN

Provider ID: 265202

Board Certified Specialty: No
HEALTH EXCEL IPA INC
1520 E PLAZA BLVD
NATIONAL CITY, CA
91950-3616

Phone: (619) 425-7755

Fax: (619) 425-2138

After Hours Phone: (619)
425-7755

Provider Gender: Female

License number: A40473

NPI: 1023061314

Provider English Spoken: Yes

Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Arabic, Faroese, Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Alvarado
Hospital Llc, Scripps Memorial
Hospital, Sharp Memorial
Hospital, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

MANI, NASRIN, MD

Provider ID: 269201
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1520 E PLAZA BLVD
NATIONAL CITY, CA
91950-3616
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619)
425-7755
Provider Gender: Female
License number: A40473
NPI: 1023061314
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Faroese, Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Sharp
Memorial Hospital, Ucsd Medical
Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

MCDONNELL, EMMA C

Provider ID: 280858
Board Certified Specialty: No
HEALTH EXCEL IPA INC
1520 E PLAZA BLVD
NATIONAL CITY, CA
91950-3616
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619)
425-7755
Provider Gender: Female
License number: A172521
NPI: 1023357670
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

MCGRAW, JOSEPH P , MD

Provider ID: 269700
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
2240 E PLAZA BLVD STE F
NATIONAL CITY, CA
91950-5165

Phone: (619) 470-2700
Fax: (619) 236-7822
After Hours Phone: (619)
470-2700
Provider Gender: Male
License number: A155228
NPI: 1588624852
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

MCGRAW, JOSEPH P , MD

Provider ID: 269701
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
2240 E PLAZA BLVD STE G
NATIONAL CITY, CA
91950-5165
Phone: (619) 470-2700
Fax: (619) 236-7822
After Hours Phone: (619)
470-2700
Provider Gender: Male
License number: A155228
NPI: 1588624852
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc</p>	<p>NATIONAL CITY, CA 91950-5165 <i>Phone:</i> (619) 470-2700 <i>Fax:</i> (619) 236-7822 <i>After Hours Phone:</i> (619) 470-2700 <i>Provider Gender:</i> Male <i>License number:</i> G52627 <i>NPI:</i> 1982636031 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Tagalog, Vietnamese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>	<p>Spanish, Tagalog, Vietnamese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>
<p>MCGRAW, JOSEPH P <i>Provider ID:</i> 285865 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 655 EUCLID AVE STE 302 NATIONAL CITY, CA 91950-2973 <i>Phone:</i> (619) 472-1010 <i>Fax:</i> (619) 479-5233 <i>After Hours Phone:</i> (619) 472-1010 <i>Provider Gender:</i> Male <i>License number:</i> A155228 <i>NPI:</i> 1588624852 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc</p>	<p>MILLER, DOUGLAS G <i>Provider ID:</i> 262445 <i>Board Certified Specialty:</i> No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 2240 E PLAZA BLVD STE F NATIONAL CITY, CA 91950-5165 <i>Phone:</i> (619) 470-2700 <i>Fax:</i> (619) 236-7822 <i>After Hours Phone:</i> (619) 470-2700 <i>Provider Gender:</i> Male <i>License number:</i> G52627 <i>NPI:</i> 1982636031 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i></p>	<p>MILLER, DOUGLAS G , MD <i>Provider ID:</i> 268954 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 2240 E PLAZA BLVD STE G NATIONAL CITY, CA 91950-5165 <i>Phone:</i> (619) 470-2700 <i>Fax:</i> (619) 236-7822 <i>After Hours Phone:</i> (619) 470-2700 <i>Provider Gender:</i> Male <i>License number:</i> G52627 <i>NPI:</i> 1982636031 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Tagalog, Vietnamese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i></p>
<p>MILLER, DOUGLAS G <i>Provider ID:</i> 262444 <i>Board Certified Specialty:</i> No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 2240 E PLAZA BLVD STE G</p>	<p><i>Provider Gender:</i> Male <i>License number:</i> G52627 <i>NPI:</i> 1982636031 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i></p>	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

MILLER, DOUGLAS G , MD

Provider ID: 268955
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
2240 E PLAZA BLVD STE F
NATIONAL CITY, CA
91950-5165
Phone: (619) 470-2700
Fax: (619) 236-7822
After Hours Phone: (619)
470-2700
Provider Gender: Male
License number: G52627
NPI: 1982636031
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

MONTGOMERY, GORDON J

Provider ID: 39865
Board Certified Specialty: No
PRECISION EYE CAREA MED
CORP
655 EUCLID AVE STE 302

NATIONAL CITY, CA
91950-2973
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619)
472-1010
Provider Gender: Male
License number: G31591
NPI: 1144226234
Provider English Spoken: Yes
Provider Language(s) Spoken:
Korean, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Paradise
Valley Hospital, Scripps Mercy
Hospital Chula Vista, Scripps
Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc,
Imperial Health Holdings Medical
Group-Sd

MORRISON-REYES, JOSHUA

A
Provider ID: 108014
Board Certified Specialty: No
WEST COAST EYE CARE
ASSOCS
2240 E PLAZA BLVD STE F
AND G
NATIONAL CITY, CA
91950-5165
Phone: (619) 470-2700
Fax: (844) 897-3788
After Hours Phone: (619)
470-2700
Provider Gender: Male

License number: A125435
NPI: 1235366782
Provider English Spoken: Yes
Provider Language(s) Spoken:
Armenian, Cantonese, Chinese,
Indonesian, Mandarin, Spanish,
Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Scripps Memorial
Hospital, Sharp Memorial
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

MORRISON-REYES, JOSHUA

A
Provider ID: 121358
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
655 EUCLID AVE STE 302
NATIONAL CITY, CA
91950-2973
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619)
472-1010
Provider Gender: Male
License number: A125435
NPI: 1235366782
Provider English Spoken: Yes
Provider Language(s) Spoken:
Armenian, Cantonese, Chinese,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Indonesian, Mandarin, Spanish, Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Memorial Hospital, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 5/100
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

MORRISON-REYES, JOSHUA A

Provider ID: 125059
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 655 EUCLID AVE STE 302
 NATIONAL CITY, CA
 91950-2973
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619) 472-1010
Provider Gender: Male
License number: A125435
NPI: 1235366782
Provider English Spoken: Yes
Provider Language(s) Spoken: Armenian, Cantonese, Chinese, Indonesian, Mandarin, Spanish, Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Memorial Hospital, Sharp Memorial Hospital

Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

MORRISON-REYES, JOSHUA A

Provider ID: 262324
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 2220 E PLAZA BLVD STE H
 NATIONAL CITY, CA
 91950-5162
Phone: (619) 470-2700
Fax:
After Hours Phone: (619) 470-2700
Provider Gender: Male
License number: A125435
NPI: 1235366782
Provider English Spoken: Yes
Provider Language(s) Spoken: Armenian, Cantonese, Chinese, Indonesian, Mandarin, Spanish, Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Memorial Hospital, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

MORRISON-REYES, JOSHUA A , MD

Provider ID: 269180
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 655 EUCLID AVE STE 302
 NATIONAL CITY, CA
 91950-2973
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619) 472-1010
Provider Gender: Male
License number: A125435
NPI: 1235366782
Provider English Spoken: Yes
Provider Language(s) Spoken: Armenian, Cantonese, Chinese, Indonesian, Mandarin, Spanish, Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Memorial Hospital, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

MORRISON-REYES, JOSHUA A , MD

Provider ID: 269181
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
2240 E PLAZA BLVD STE F
AND G
NATIONAL CITY, CA
91950-5165
Phone: (619) 470-2700
Fax: (844) 897-3788
After Hours Phone: (619)
470-2700
Provider Gender: Male
License number: A125435
NPI: 1235366782
Provider English Spoken: Yes
Provider Language(s) Spoken:
Armenian, Cantonese, Chinese,
Indonesian, Mandarin, Spanish,
Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Scripps Memorial
Hospital, Sharp Memorial
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

MORRISON-REYES, JOSHUA

A
Provider ID: 275516
Board Certified Specialty: No
HEALTH EXCEL IPA INC
2240 E PLAZA BLVD STE F
AND G
NATIONAL CITY, CA
91950-5165
Phone: (619) 470-2700
Fax: (844) 897-3788
After Hours Phone: (619)
470-2700
Provider Gender: Male
License number: A125435
NPI: 1235366782
Provider English Spoken: Yes
Provider Language(s) Spoken:
Armenian, Cantonese, Chinese,
Indonesian, Mandarin, Spanish,
Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Scripps Memorial
Hospital, Sharp Memorial
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

MOSS, JASON M
Provider ID: 265206
Board Certified Specialty: No
HEALTH EXCEL IPA INC
1520 E PLAZA BLVD

NATIONAL CITY, CA
91950-3616
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619)
425-7755
Provider Gender: Male
License number: A130529
NPI: 1386961423
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: El Centro
Regional Medical Center, Scripps
Memorial Hospital, Sharp Chula
Vista Med Ctr, Sharp Memorial
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

MOSS, JASON M , MD
Provider ID: 268290
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1520 E PLAZA BLVD
NATIONAL CITY, CA
91950-3616
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619)
425-7755
Provider Gender: Male
License number: A130529
NPI: 1386961423
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p><i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> El Centro Regional Medical Center, Scripps Memorial Hospital, Sharp Chula Vista Med Ctr, Sharp Memorial Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc</p> <p>PAPASTERGIOU, GEORGIOS <i>Provider ID:</i> 265204 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 1520 E PLAZA BLVD NATIONAL CITY, CA 91950-3616 <i>Phone:</i> (619) 425-7755 <i>Fax:</i> (619) 425-2138 <i>After Hours Phone:</i> (619) 425-7755 <i>Provider Gender:</i> Male <i>License number:</i> A127706 <i>NPI:</i> 1790054393 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic, Farsi, French, Greek, Italian, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> El Centro Regional Medical Center, Scripps Memorial Hospital, Sharp Memorial Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999</p>	<p><i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p> <p>PAPASTERGIOU, GEORGIOS, MD <i>Provider ID:</i> 268327 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 1520 E PLAZA BLVD NATIONAL CITY, CA 91950-3616 <i>Phone:</i> (619) 425-7755 <i>Fax:</i> (619) 425-2138 <i>After Hours Phone:</i> (619) 425-7755 <i>Provider Gender:</i> Male <i>License number:</i> A127706 <i>NPI:</i> 1790054393 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic, Farsi, French, Greek, Italian, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> El Centro Regional Medical Center, Scripps Memorial Hospital, Sharp Memorial Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i></p>	<p><i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p> <p>PATEL, GITANE <i>Provider ID:</i> 262320 <i>Board Certified Specialty:</i> No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 2240 E PLAZA BLVD STE F AND G NATIONAL CITY, CA 91950-5165 <i>Phone:</i> (619) 470-2700 <i>Fax:</i> (619) 697-2410 <i>After Hours Phone:</i> (619) 470-2700 <i>Provider Gender:</i> Male <i>License number:</i> A108603 <i>NPI:</i> 1710171434 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic, Gujarati, Spanish, Tagalog, Vietnamese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Paradise Valley Hospital, Scripps Memorial Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p> <p>PATEL, GITANE, MD</p>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider ID: 268742
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
2240 E PLAZA BLVD STE F
AND G
NATIONAL CITY, CA
91950-5165
Phone: (619) 470-2700
Fax: (619) 697-2410
After Hours Phone: (619)
470-2700
Provider Gender: Male
License number: A108603
NPI: 1710171434
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Arabic, Gujarati, Spanish,
 Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation: Grossmont
 Hospital, Paradise Valley
 Hospital, Scripps Memorial
 Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc, Imperial
 Health Holdings Medical
 Group-Sd

PATEL, SARJAN H
Provider ID: 244917
Board Certified Specialty: No
HEALTH EXCEL IPA INC
2240 E PLAZA BLVD STE F
AND G
NATIONAL CITY, CA
91950-5165

Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800)
898-2020
Provider Gender: Male
License number: A114976
NPI: 1316199326
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Gujarati, Hindi, Spanish,
 Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation: Alvarado
 Hospital Llc, Grossmont Hospital,
 Scripps Memorial Hospital,
 Paradise Valley Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc, Imperial
 Health Holdings Medical
 Group-Sd

PATEL, SARJAN H
Provider ID: 262404
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
2240 E PLAZA BLVD STE F
AND G
NATIONAL CITY, CA
91950-5165
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800)
898-2020
Provider Gender: Male
License number: A114976

NPI: 1316199326
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Gujarati, Hindi, Spanish,
 Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation: Alvarado
 Hospital Llc, Grossmont Hospital,
 Scripps Memorial Hospital,
 Paradise Valley Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc, Imperial
 Health Holdings Medical
 Group-Sd

PATEL, SARJAN H , MD
Provider ID: 268800
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
2240 E PLAZA BLVD STE F
AND G
NATIONAL CITY, CA
91950-5165
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800)
898-2020
Provider Gender: Male
License number: A114976
NPI: 1316199326
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Gujarati, Hindi, Spanish,
 Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation: Alvarado

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Llc, Grossmont Hospital, Scripps Memorial Hospital, Paradise Valley Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

PEAIRS, JAMES J

Provider ID: 265261

Board Certified Specialty: No

HEALTH EXCEL IPA INC

1520 E PLAZA BLVD

NATIONAL CITY, CA

91950-3616

Phone: (619) 425-7755

Fax: (619) 425-2138

After Hours Phone: (619)

425-7755

Provider Gender: Male

License number: A155296

NPI: 1609135623

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, Spanish

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Sharp Chula

Vista Med Ctr, El Centro

Regional Medical Center, Sharp

Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc

PEAIRS, JAMES J , MD

Provider ID: 268366

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

1520 E PLAZA BLVD

NATIONAL CITY, CA

91950-3616

Phone: (619) 425-7755

Fax: (619) 425-2138

After Hours Phone: (619)

425-7755

Provider Gender: Male

License number: A155296

NPI: 1609135623

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Chula

Vista Med Ctr, Scripps Memorial

Hospital, El Centro Regional

Medical Center, Sharp Memorial

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc

PONS, MAURICIO E

Provider ID: 265258

Board Certified Specialty: No

HEALTH EXCEL IPA INC

1520 E PLAZA BLVD

NATIONAL CITY, CA

91950-3616

Phone: (619) 425-7755

Fax: (619) 425-2138

After Hours Phone: (619)

425-7755

Provider Gender: Male

License number: A87650

NPI: 1376723759

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, El Centro

Regional Medical Center, Sharp

Memorial Hospital, Scripps

Mercy Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc

PONS, MAURICIO E , MD

Provider ID: 268353

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

1520 E PLAZA BLVD

NATIONAL CITY, CA

91950-3616

Phone: (619) 425-7755

Fax: (619) 425-2138

After Hours Phone: (619)

425-7755

Provider Gender: Male

License number: A87650

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>NPI: 1376723759 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital, El Centro Regional Medical Center, Sharp Memorial Hospital, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc</p> <p>PRABHU, SUJATA P <i>Provider ID:</i> 262394 <i>Board Certified Specialty:</i> No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 2240 E PLAZA BLVD STE F AND G NATIONAL CITY, CA 91950-5165 <i>Phone:</i> (619) 470-2700 <i>Fax:</i> (619) 697-2410 <i>After Hours Phone:</i> (619) 470-2700 <i>Provider Gender:</i> Female <i>License number:</i> A115965 <i>NPI:</i> 1982872552 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Tagalog, Telugu, Vietnamese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Paradise Valley Hospital, Alvarado</p>	<p>Community Hospital, Scripps Memorial Hospital, Grossmont Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p> <p>PRABHU, SUJATA P <i>Provider ID:</i> 262397 <i>Board Certified Specialty:</i> No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 655 EUCLID AVE STE 302 NATIONAL CITY, CA 91950-2973 <i>Phone:</i> (619) 472-1010 <i>Fax:</i> (619) 479-5233 <i>After Hours Phone:</i> (619) 472-1010 <i>Provider Gender:</i> Female <i>License number:</i> A115965 <i>NPI:</i> 1982872552 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Tagalog, Telugu, Vietnamese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Paradise Valley Hospital, Alvarado Community Hospital, Scripps Memorial Hospital, Grossmont Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i></p>	<p>No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p> <p>PRABHU, SUJATA P , MD <i>Provider ID:</i> 268921 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 2240 E PLAZA BLVD STE F AND G NATIONAL CITY, CA 91950-5165 <i>Phone:</i> (619) 470-2700 <i>Fax:</i> (619) 697-2410 <i>After Hours Phone:</i> (619) 470-2700 <i>Provider Gender:</i> Female <i>License number:</i> A115965 <i>NPI:</i> 1982872552 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Tagalog, Telugu, Vietnamese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Paradise Valley Hospital, Alvarado Community Hospital, Scripps Memorial Hospital, Grossmont Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i></p>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

RAJSBAUM, MARTIN

Provider ID: 265198
Board Certified Specialty: No
HEALTH EXCEL IPA INC
1520 E PLAZA BLVD
NATIONAL CITY, CA
91950-3616
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619)
425-7755
Provider Gender: Male
License number: A42670
NPI: 1912999400
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Russian, Spanish,
Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr, Scripps Memorial
Hospital Encinitas, Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

RAJSBAUM, MARTIN, MD

Provider ID: 268294
Board Certified Specialty: No
COMMUNITY CARE IPA LLC

1520 E PLAZA BLVD
NATIONAL CITY, CA
91950-3616
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619)
425-7755
Provider Gender: Male
License number: A42670
NPI: 1912999400
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Russian, Spanish,
Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr, Scripps Memorial
Hospital Encinitas, Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

RICE, LAWRENCE S

Provider ID: 262226
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
655 EUCLID AVE STE 302
NATIONAL CITY, CA
91950-2973
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619)
472-1010
Provider Gender: Male

License number: C31021
NPI: 1922060805
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Alvarado Hospital Llc,
Rady Childrens Hospital San
Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

RICE, LAWRENCE S , MD

Provider ID: 269039
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
655 EUCLID AVE STE 302
NATIONAL CITY, CA
91950-2973
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619)
472-1010
Provider Gender: Male
License number: C31021
NPI: 1922060805
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Alvarado Hospital Llc,
Rady Childrens Hospital San

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

SASSANI, PATRICK P
Provider ID: 265193
Board Certified Specialty: No
HEALTH EXCEL IPA INC
1520 E PLAZA BLVD
NATIONAL CITY, CA
91950-3616
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619)
425-7755
Provider Gender: Male
License number: A150205
NPI: 1033411061
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Sharp Chula
Vista Med Ctr, El Centro
Regional Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc
SASSANI, PATRICK P , MD
Provider ID: 268285
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1520 E PLAZA BLVD
NATIONAL CITY, CA
91950-3616
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619)
425-7755
Provider Gender: Male
License number: A150205
NPI: 1033411061
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Sharp Chula
Vista Med Ctr, El Centro
Regional Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc
SKAF, AYHAM R
Provider ID: 265185
Board Certified Specialty: No
HEALTH EXCEL IPA INC
1520 E PLAZA BLVD
NATIONAL CITY, CA
91950-3616

Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619)
425-7755
Provider Gender: Male
License number: A120584
NPI: 1285888628
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Spanish
Cultural Competency: No
Hospital Affiliation: El Centro
Regional Medical Center, Sharp
Memorial Hospital, Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc
SKAF, AYHAM R , MD
Provider ID: 268279
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1520 E PLAZA BLVD
NATIONAL CITY, CA
91950-3616
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619)
425-7755
Provider Gender: Male
License number: A120584
NPI: 1285888628
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Spanish
Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: El Centro Regional Medical Center, Sharp Memorial Hospital, Scripps Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Health Excel Ipa Inc

TREGER, PAUL L

Provider ID: 262420

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
655 EUCLID AVE STE 302
NATIONAL CITY, CA
91950-2973

Phone: (619) 472-1010

Fax: (619) 479-5233

After Hours Phone: (619) 472-1010

Provider Gender: Male

License number: G26803

NPI: 1447311899

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Grossmont Hospital, Ucsd Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

TREGER, PAUL L , MD

Provider ID: 268812

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
655 EUCLID AVE STE 302
NATIONAL CITY, CA
91950-2973

Phone: (619) 472-1010

Fax: (619) 479-5233

After Hours Phone: (619) 472-1010

Provider Gender: Male

License number: G26803

NPI: 1447311899

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Grossmont Hospital, Ucsd Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

WAINESS, REID M , MD

Provider ID: 254760

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
2240 E PLAZA BLVD STE F
NATIONAL CITY, CA
91950-5165

Phone: (800) 898-2020

Fax:

After Hours Phone: (800) 898-2020

Provider Gender: Male

License number: A108766

NPI: 1396935979

Provider English Spoken: Yes

Provider Language(s) Spoken: Armenian, Cantonese, Chinese, Hebrew, Mandarin, Spanish, Vietnamese

Cultural Competency: No

Hospital Affiliation: San Gabriel Valley Med Ctr, Desert Regional Med Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 5/99

American Sign Language (ASL): No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

WASSERSTROM, JEFFREY P , MD

Provider ID: 129187

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
655 EUCLID AVE STE 302
NATIONAL CITY, CA
91950-2973

Phone: (619) 472-1010

Fax: (619) 479-5233

After Hours Phone: (619) 472-1010

Provider Gender: Male

License number: G54813

NPI: 1710922687

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

<p><i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Memorial Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd</p>	<p><i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd</p> <p>ZABANEH, ALEXANDER I <i>Provider ID:</i> 214403 <i>Board Certified Specialty:</i> Yes HEALTH EXCEL IPA INC 655 EUCLID AVE STE 302 NATIONAL CITY, CA 91950-2973 <i>Phone:</i> (619) 472-1010 <i>Fax:</i> (619) 479-5233 <i>After Hours Phone:</i> (619) 472-1010 <i>Provider Gender:</i> Male <i>License number:</i> A154697 <i>NPI:</i> 1346687233 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Paradise Valley Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>	<p>MEDICAL GROUP-SD 655 EUCLID AVE STE 302 NATIONAL CITY, CA 91950-2973 <i>Phone:</i> (619) 472-1010 <i>Fax:</i> (619) 479-5233 <i>After Hours Phone:</i> (619) 472-1010 <i>Provider Gender:</i> Male <i>License number:</i> A154697 <i>NPI:</i> 1346687233 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Paradise Valley Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>
<p>WASSERSTROM, JEFFREY P <i>Provider ID:</i> 262174 <i>Board Certified Specialty:</i> No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 655 EUCLID AVE STE 302 NATIONAL CITY, CA 91950-2973 <i>Phone:</i> (619) 472-1010 <i>Fax:</i> (619) 479-5233 <i>After Hours Phone:</i> (619) 472-1010 <i>Provider Gender:</i> Male <i>License number:</i> G54813 <i>NPI:</i> 1710922687 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Memorial Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i></p>	<p><i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd</p> <p>ZABANEH, ALEXANDER I <i>Provider ID:</i> 262169 <i>Board Certified Specialty:</i> Yes IMPERIAL HEALTH HOLDINGS</p>	<p>ZABANEH, ALEXANDER I , MD <i>Provider ID:</i> 269121 <i>Board Certified Specialty:</i> Yes COMMUNITY CARE IPA LLC 655 EUCLID AVE STE 302 NATIONAL CITY, CA 91950-2973 <i>Phone:</i> (619) 472-1010 <i>Fax:</i> (619) 479-5233 <i>After Hours Phone:</i> (619) 472-1010 <i>Provider Gender:</i> Male</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: A154697
NPI: 1346687233
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility: Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

PEDIATRICS

BAILONY, MOHAMMED T
Provider ID: 274980
Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC
655 EUCLID AVE STE 205
NATIONAL CITY, CA
91950-2967
Phone: (619) 470-1945
Fax: (619) 475-5048
After Hours Phone: (619) 470-1945
Provider Gender: Male
License number: A34406
NPI: 1376625913
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Mary Birch Hosp For Women And

Newborns, Paradise Valley Hospital, Sharp Chula Vista Med Ctr, Rady Childrens Hospital San Diego, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

LERIAS, NICHOLAS P
Provider ID: 130009
Board Certified Specialty: No
OPERATION SAMAHAN INC
2835 HIGHLAND AVE STE A
NATIONAL CITY, CA
91950-7406
Phone: (844) 200-2426
Fax:
After Hours Phone: (844) 200-2426
Provider Gender: Male
License number: 20A14561
NPI: 1952749301
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

PHYSICAL MEDICINE / REHABILITATION

WYNN, BRENTON D
Provider ID: 238821
Board Certified Specialty: No
HEALTH EXCEL IPA INC
502 EUCLID AVE STE 200
NATIONAL CITY, CA
91950-2984
Phone: (619) 434-4019
Fax: (877) 264-8373
After Hours Phone: (619) 434-4019
Provider Gender: Male
License number: A73257
NPI: 1528069820
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/100
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

PHYSICIANS ASSISTANT

MACASADIA, MARITES N
Provider ID: 268787
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
610 EUCLID AVE STE 302
NATIONAL CITY, CA
91950-2953

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 527-7700
Fax: (619) 527-3226
After Hours Phone: (619) 527-7700
Provider Gender: Female
License number: PA15254
NPI: 1093743015
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MARTINEZ MURGUIA, IRENE

Provider ID: 283531
Board Certified Specialty: No
HEALTH EXCEL IPA INC
217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518
Phone: (619) 434-7308
Fax: (619) 434-7310
After Hours Phone: (619) 434-7308
Provider Gender: Female
License number: PA20296
NPI: 1447492889
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

MERCER, KELLY C

Provider ID: 278476
Board Certified Specialty: No
HEALTH EXCEL IPA INC
217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518
Phone: (619) 434-7308
Fax: (619) 434-7310
After Hours Phone: (888) 216-8982
Provider Gender: Female
License number: PA21625
NPI: 1154609790
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic

Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Blue Shield Promise Health Plan Direct, Health Excel Ipa Inc

PODIATRIST

AHMED, AISHA

Provider ID: 243131
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1428 HIGHLAND AVE

NATIONAL CITY, CA
91950-4624
Phone: (844) 200-2426
Fax:
After Hours Phone: (844) 200-2426
Provider Gender: Female
License number: DPM5369
NPI: 1316326382
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi, Spanish, Urdu
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

ATMAR, AKMAL

Provider ID: 269784
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
2345 E 8TH ST STE 105
NATIONAL CITY, CA
91950-2866
Phone: (929) 287-4511
Fax: (877) 671-6835
After Hours Phone: (929) 287-4511
Provider Gender: Male
License number: DPM5295
NPI: 1558656637
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Persian, Urdu
Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Paradise Valley Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

CHISHOLM, JOHN A

Provider ID: 121607
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
610 EUCLID AVE STE 301
NATIONAL CITY, CA
91950-2953
Phone: (619) 292-2493
Fax: (619) 618-0222
After Hours Phone: (619) 292-2493
Provider Gender: Male
License number: DPM3431
NPI: 1396740072
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

CHISHOLM, JOHN A

Provider ID: 214380
Board Certified Specialty: No
HEALTH EXCEL IPA INC
610 EUCLID AVE STE 301
NATIONAL CITY, CA
91950-2953
Phone: (619) 292-2493
Fax: (619) 618-0222
After Hours Phone: (619) 292-2493
Provider Gender: Male
License number: DPM3431
NPI: 1396740072
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

CHISHOLM, JOHN A

Provider ID: 268441
Board Certified Specialty: No
COMMUNITY CARE IPA LLC

610 EUCLID AVE STE 301
NATIONAL CITY, CA
91950-2953
Phone: (619) 292-2493
Fax: (619) 618-0222
After Hours Phone: (619) 292-2493
Provider Gender: Male
License number: DPM3431
NPI: 1396740072
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

DAVIDSON, JOHN A

Provider ID: 129542
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
610 EUCLID AVE STE 301
NATIONAL CITY, CA
91950-2953
Phone: (619) 292-2493
Fax: (619) 618-0222
After Hours Phone: (619) 292-2493
Provider Gender: Male
License number: DPM5418

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D. Directorio de proveedores de atención especializada

NPI: 1689069874

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

DAVIDSON, JOHN A

Provider ID: 214445

Board Certified Specialty: No
HEALTH EXCEL IPA INC
610 EUCLID AVE STE 301
NATIONAL CITY, CA
91950-2953

Phone: (619) 292-2493

Fax: (619) 618-0222

After Hours Phone: (619)
292-2493

Provider Gender: Male

License number: DPM5418

NPI: 1689069874

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

PUCCINELLI, ALAYNA M

Provider ID: 125046

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
610 EUCLID AVE STE 301
NATIONAL CITY, CA
91950-2953

Phone: (619) 292-2493

Fax: (619) 618-0222

After Hours Phone: (619)
292-2493

Provider Gender: Female

License number: DPM5349

NPI: 1487072278

Provider English Spoken: Yes
Provider Language(s) Spoken:
Russian, Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital Chula Vista, Scripps
Memorial Hospital, Paradise
Valley Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

SANICOLAS, MARIA THERESA P

Provider ID: 204840

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
610 EUCLID AVE STE 304
NATIONAL CITY, CA
91950-2953

Phone: (619) 470-6800

Fax: (866) 232-7229

After Hours Phone: (619)
470-6800

Provider Gender: Female

License number: DPM4303

NPI: 1891893962

Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

Hospital Affiliation: Paradise
Valley Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Imperial Health Holdings
Medical Group-Sd

PULMONARY DISEASES

LIM, ROSEMARIE S

Provider ID: 262224

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
610 EUCLID AVE STE 202
NATIONAL CITY, CA
91950-2952

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 472-2665
Fax: (619) 479-9468
After Hours Phone: (619) 472-2665
Provider Gender: Female
License number: A51827
NPI: 1841303419
Provider English Spoken: Yes
Provider Language(s) Spoken: Chinese, Mandarin, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Sharp Memorial Hospital, Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings Medical Group-Sd

SAZON, DOTTIE A

Provider ID: 212711
Board Certified Specialty: No
HEALTH EXCEL IPA INC
655 EUCLID AVE STE 206
NATIONAL CITY, CA
91950-2967
Phone: (619) 267-3188
Fax: (619) 267-3388
After Hours Phone: (619) 267-3188
Provider Gender: Female
License number: A48932
NPI: 1033222708
Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

SAZON, DOTTIE A

Provider ID: 66295
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
655 EUCLID AVE STE 206
NATIONAL CITY, CA
91950-2967
Phone: (619) 267-3188
Fax: (619) 267-3388
After Hours Phone: (619) 267-3188
Provider Gender: Female
License number: A48932
NPI: 1033222708
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No

♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

REGISTERED PHYSICAL THERAPIST

DIEP, HUY M

Provider ID: 269130
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1626 SWEETWATER RD STE A
NATIONAL CITY, CA
91950-7645
Phone: (619) 474-5916
Fax: (619) 474-8662
After Hours Phone: (619) 474-5916
Provider Gender: Male
License number: PT294143
NPI: 1447765508
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

RHEUMATOLOGY

CHITKARA, PUJA, MD

Provider ID: 204159

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D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 502 EUCLID AVE STE 300
 NATIONAL CITY, CA
 91950-2950
Phone: (619) 623-3000
Fax:
After Hours Phone: (619)
 623-3000
Provider Gender: Female
License number: A97619
NPI: 1871718189
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Hindi, Russian, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital Chula Vista, Sharp
 Chula Vista Med Ctr, Scripps
 Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc, Imperial
 Health Holdings Medical
 Group-Sd

SURGERY NEUROLOGICAL

YOO, FRANK K , MD
Provider ID: 257372
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 2345 E 8TH ST STE 110
 NATIONAL CITY, CA
 91950-2861

Phone: (858) 909-9033
Fax:
After Hours Phone: (858)
 909-9033
Provider Gender: Male
License number: G86513
NPI: 1295774545
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Korean, Spanish, Telugu,
 Vietnamese
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital, Scripps
 Memorial Hospital Encinitas, Tri
 City Medical Ctr, Palomar Health
 Downtown Campus, Pomerado
 Hospital, Alvarado Hospital Llc,
 Paradise Valley Hospital,
 Southwest Healthcare System
 Wildomar, Southwest Healthcare
 System Murrieta, Scripps Mercy
 Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc,
 Imperial Health Holdings Medical
 Group-Sd

OCEANSIDE

ANESTHESIOLOGY PAIN MANAGEMENT

FISHER, CASEY J
Provider ID: 269184
Board Certified Specialty: No
COMMUNITY CARE IPA LLC

3142 VISTA WAY STE 207
 OCEANSIDE, CA 92056-3628
Phone: (760) 610-0522
Fax: (760) 610-0523
After Hours Phone: (760)
 610-0522
Provider Gender: Male
License number: A118592
NPI: 1275780686
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital Chula Vista, Scripps
 Memorial Hospital Encinitas,
 Sharp Memorial Hospital, Scripps
 Mercy Hospital, Pomerado
 Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc

CARDIAC ELECTROPHYSIOLOGY

**PASHMFOROUSH,
MOHAMMAD**
Provider ID: 280094
Board Certified Specialty: No
HEALTH EXCEL IPA INC
 2424 VISTA WAY STE 300
 OCEANSIDE, CA 92054-6178
Phone: (760) 630-1606
Fax: (760) 630-1654
After Hours Phone: (760)
 630-1606
Provider Gender: Male

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D. Directorio de proveedores de atención especializada

License number: A60730
 NPI: 1699722397
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Farsi
 Cultural Competency: No
 Hospital Affiliation: Tri City
 Medical Ctr, Scripps Memorial
 Hospital Encinitas, Palomar
 Health Downtown Campus,
 Palomar Medical Center
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Health Excel Ipa Inc

CARDIOVASCULAR DISEASE

YUNG, AARON S
 Provider ID: 280007
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 2424 VISTA WAY STE 300
 OCEANSIDE, CA 92054-6178
 Phone: (760) 630-1606
 Fax: (760) 630-1654
 After Hours Phone: (760)
 630-1606
 Provider Gender: Male
 License number: A127292
 NPI: 1407113558
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Tri City
 Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):

No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Health Excel Ipa Inc

CERTIFIED NURSE PRACTITIONER

ANDOLINA, SARA I
 Provider ID: 259767
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 3923 WARING RD STE A
 OCEANSIDE, CA 92056-4499
 Phone: (760) 724-8782
 Fax: (760) 842-7801
 After Hours Phone: (760)
 724-8782
 Provider Gender: Female
 License number: NP95000358
 NPI: 1194142570
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/120
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Health Excel Ipa Inc

BROMAN, GRETCHEN L
 Provider ID: 280192
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 818 PIER VIEW WAY
 OCEANSIDE, CA 92054-2803

Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760)
 631-5000
 Provider Gender: Female
 License number: NP95007885
 NPI: 1922421288
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/0
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

CHAMBERLIN, KALIANA, NPA
 Provider ID: 273018
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 517 N HORNE ST
 OCEANSIDE, CA 92054-2518
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760)
 631-5000
 Provider Gender: Female
 License number: NP95013030
 NPI: 1457995706
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

EKLUND, BONNIE L , NPA
Provider ID: 243625
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4700 N RIVER RD
OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000
Fax: (760) 414-3763
After Hours Phone: (760)
631-5000
Provider Gender: Female
License number: NP15285
NPI: 1811978992

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

GORDON, CAITLIN R
Provider ID: 246043
Board Certified Specialty: No
UCSD MEDICAL GROUP
3998 VISTA WAY STE A
OCEANSIDE, CA 92056-4514
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: NP23078

NPI: 1063842078
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr, Ucsd Medical Ctr,
Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HEAD, KRISTIN N
Provider ID: 268660
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760)
547-1020
Provider Gender: Female
License number: NP20264
NPI: 1699078923

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

KASTNER, NICOLE D
Provider ID: 262127
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3605 VISTA WAY BLDG B
OCEANSIDE, CA 92056-4565
Phone: (760) 547-1010
Fax: (760) 547-1011
After Hours Phone: (760)
547-1010
Provider Gender: Female
License number: NP14131
NPI: 1023051869

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

LIPMAN, RACHEL E
Provider ID: 265113
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3605 VISTA WAY BLDG B
OCEANSIDE, CA 92056-4565

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (760) 547-1010
Fax: (760) 547-1011
After Hours Phone: (760) 547-1010
Provider Gender: Female
License number: NP95000707
NPI: 1871933879
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MIRANDA, BRIDGET A

Provider ID: 262340
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565
Phone: (760) 547-1020
Fax:
After Hours Phone: (760) 547-1020
Provider Gender: Female
License number: NP95006082
NPI: 1225548159
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PRICE, MADELINE R

Provider ID: 278002
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
818 PIER VIEW WAY
OCEANSIDE, CA 92054-2803
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
License number: NP95016147
NPI: 1740804095
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

PRICE, MADELINE R

Provider ID: 283806
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
517 N HORNE ST
OCEANSIDE, CA 92054-2518

Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
License number: NP95016147
NPI: 1740804095
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

PRICE, MADELINE R

Provider ID: 283807
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4700 N RIVER RD
OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
License number: NP95016147
NPI: 1740804095
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

PRITZKER, JOELY R

Provider ID: 121198
Board Certified Specialty: No
VISTA COMMUNITY CLNC
4700 N RIVER RD
OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000

Fax:
After Hours Phone: (760)
631-5000
Provider Gender: Female
License number: NP95000955
NPI: 1619384351
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish

Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

PRITZKER, JOELY R

Provider ID: 121198
Board Certified Specialty: No
IHP VISTA COMMUNITY CLINIC
RIVER
4700 N RIVER RD
OCEANSIDE, CA 92057-6043

Phone: (760) 631-5000
Fax:
After Hours Phone: (760)
631-5000
Provider Gender: Female
License number: NP95000955
NPI: 1619384351

Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

PRITZKER, JOELY R , NPA

Provider ID: 239772
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4700 N RIVER RD
OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000

Fax:
After Hours Phone: (760)
631-5000
Provider Gender: Female
License number: NP95000955
NPI: 1619384351

Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 12/999
American Sign Language (ASL):
No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

QUINN, ERIN

Provider ID: 279103
Board Certified Specialty: No
HEALTH EXCEL IPA INC
3998 VISTA WAY STE C
OCEANSIDE, CA 92056-4514
Phone: (760) 941-1440

Fax: (760) 630-5477
After Hours Phone: (760)
941-1440
Provider Gender: Female
License number: NP6812
NPI: 1295801470
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish

Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 14/100
American Sign Language (ASL):
No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

RAMIREZ, ERIN K

Provider ID: 262344
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3605 VISTA WAY BLDG B
OCEANSIDE, CA 92056-4565

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (760) 547-1010
Fax: (760) 547-1011
After Hours Phone: (760) 547-1010
Provider Gender: Female
License number: NP95000183
NPI: 1912310020
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility: Hours: M-SA 9AM-5PM
Website: Email: Medical Group(s):
IPA: Rady Childrens Health Network

SANTIAGO, AMANDA C , NPA
Provider ID: 242607
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4700 N RIVER RD
OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000
Fax: After Hours Phone: (760) 631-5000
Provider Gender: Female
License number: NP95007724
NPI: 1619488731
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

♿ Accessibility: Hours: M-SA 9AM-5PM
Website: Email: Medical Group(s):
IPA: Community Care Ipa Llc

CERTIFIED REGISTERED NURSE MIDWIFE

ALSTON, VICKIE S
Provider ID: 257566
Board Certified Specialty: No
BLUE SHIELD PROMISE
HEALTH PLAN DIRECT
2210 MESA DR STE 5
OCEANSIDE, CA 92054-3701
Phone: (760) 757-5841
Fax: (760) 967-4863
After Hours Phone: (760) 757-5841
Provider Gender: Female
License number: NM993
NPI: 1932209905
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility: Hours: M-SA 9AM-5PM
Website: Email: Medical Group(s):
IPA: Blue Shield Promise Health Plan Direct

CHIROPRACTOR

ANDREWS, BRAD R
Provider ID: 119787
Board Certified Specialty: No

NORTH COUNTY HEALTH
PROJECT INC
619 CROUCH ST
OCEANSIDE, CA 92054-4460
Phone: (760) 736-6767
Fax: After Hours Phone: (760) 736-6767
Provider Gender: Male
License number: DC32479
NPI: 1750791745
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website: Email: Medical Group(s):
IPA:

BROOKS, KYLE P
Provider ID: 117927
Board Certified Specialty: No
NEIGHBORHOOD
HEALTHCARE POWAY
619 CROUCH ST
OCEANSIDE, CA 92054-4460
Phone: (760) 566-1620
Fax: After Hours Phone: (760) 566-1620
Provider Gender: Male
License number: DC32526
NPI: 1417399601
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Medi-Cal Open Panel: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

BROOKS, KYLE P

Provider ID: 117927

Board Certified Specialty: No

NORTH COUNTY HEALTH

PROJECT INC

619 CROUCH ST

OCEANSIDE, CA 92054-4460

Phone: (760) 566-1620

Fax:

After Hours Phone: (760)

566-1620

Provider Gender: Male

License number: DC32526

NPI: 1417399601

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

3629 VISTA WAY

OCEANSIDE, CA 92056-4522

Phone: (760) 757-7546

Fax: (760) 828-9140

After Hours Phone: (760)

757-7546

Provider Gender: Female

License number: A135075

NPI: 1205255288

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

ANGRA, KUNAL, MD

Provider ID: 276058

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

3629 VISTA WAY

OCEANSIDE, CA 92056-4522

Phone: (760) 757-7546

Fax: (760) 828-9138

After Hours Phone: (760)

757-7546

Provider Gender: Male

License number: A161745

NPI: 1871988147

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

GILBOA, RUTH, MD

Provider ID: 269414

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

3629 VISTA WAY

OCEANSIDE, CA 92056-4522

Phone: (760) 757-7546

Fax: (760) 828-9140

After Hours Phone: (760)

757-7546

Provider Gender: Female

License number: A46557

NPI: 1205873197

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Tri City

Medical Ctr, Tri City Hospital

West, Scripps Memorial Hospital

Encinitas

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

KIM, JESSICA Y

Provider ID: 247630

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

3629 VISTA WAY

OCEANSIDE, CA 92056-4522

DERMATOLOGY

AGUIRRE, KRISTEN R , MD

Provider ID: 243076

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (760) 757-7546
Fax: (760) 828-9140
After Hours Phone: (760) 757-7546
Provider Gender: Female
License number: 20A17031
NPI: 1245663228
Provider English Spoken: Yes
Provider Language(s) Spoken: Korean
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

ROSS, ANDREW L
Provider ID: 108447
Board Certified Specialty: No
DERMATOLOGY SPECIALISTS
INC A SURGICAL MED GRP
3629 VISTA WAY
OCEANSIDE, CA 92056-4522
Phone: (760) 757-7546
Fax:
After Hours Phone: (760) 757-7546
Provider Gender: Male
License number: A140430
NPI: 1700140738
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 8AM-12PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

ROSS, ANDREW L , MD
Provider ID: 269333
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
3629 VISTA WAY
OCEANSIDE, CA 92056-4522
Phone: (760) 757-7546
Fax: (760) 828-9138
After Hours Phone: (760) 757-7546
Provider Gender: Male
License number: A140430
NPI: 1700140738
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SAMADY, JOSEPH A , MD
Provider ID: 269327
Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC
3629 VISTA WAY
OCEANSIDE, CA 92056-4522

Phone: (760) 757-7546
Fax: (760) 828-9140
After Hours Phone: (760) 757-7546
Provider Gender: Male
License number: A71411
NPI: 1013954908
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City Hospital West, Tri City Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SAMADY, JOSEPH A
Provider ID: 61777
Board Certified Specialty: No
DERMATOLOGY SPECIALISTS
INC A SURGICAL MED GRP
3629 VISTA WAY
OCEANSIDE, CA 92056-4522
Phone: (760) 757-7546
Fax:
After Hours Phone: (760) 757-7546
Provider Gender: Male
License number: A71411
NPI: 1013954908
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City Hospital West, Tri City Medical Ctr
Medi-Cal Open Panel: No

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D. Directorio de proveedores de atención especializada

Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
8AM-12PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SCHAIRER, DAVID O

Provider ID: 264682
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760)
547-1020
Provider Gender: Male
License number: A148597
NPI: 1619311164
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Childrens Hospital Of Orange
County
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

SPRAGUE, JESSICA M

Provider ID: 242314
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760)
547-1020
Provider Gender: Female
License number: A134345
NPI: 1437594884
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

THIELE, JENS, MD

Provider ID: 269412
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
3629 VISTA WAY
OCEANSIDE, CA 92056-4522
Phone: (760) 757-7546
Fax: (760) 828-9138
After Hours Phone: (760)
757-7546
Provider Gender: Male
License number: A103862
NPI: 1659562650
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

THIELE, JENS

Provider ID: 41713
Board Certified Specialty: No
DERMATOLOGY SPECIALISTS
INC A SURGICAL MED GRP
3629 VISTA WAY
OCEANSIDE, CA 92056-4522
Phone: (760) 757-7546
Fax:
After Hours Phone: (760)
757-7546
Provider Gender: Male
License number: A103862
NPI: 1659562650
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
8AM-12PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

VENKAT, ARUN P , MD

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider ID: 269345
Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC
3629 VISTA WAY
OCEANSIDE, CA 92056-4522
Phone: (760) 757-7546
Fax: (760) 828-9140
After Hours Phone: (760)
757-7546

Provider Gender: Male
License number: A125103
NPI: 1952436354
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Ⓜ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

VENKAT, ARUN P

Provider ID: 71978
Board Certified Specialty: No
DERMATOLOGY SPECIALISTS
INC A SURGICAL MED GRP
3629 VISTA WAY
OCEANSIDE, CA 92056-4522
Phone: (760) 757-7546
Fax:
After Hours Phone: (760)
757-7546
Provider Gender: Male
License number: A125103
NPI: 1952436354
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Ⓜ Accessibility: W
Hours: M-F 8AM-5PM, SA
8AM-12PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

WONG, DARRYL S , MD

Provider ID: 269368
Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC
3629 VISTA WAY
OCEANSIDE, CA 92056-4522
Phone: (760) 757-7546
Fax: (760) 828-9140
After Hours Phone: (760)
757-7546
Provider Gender: Male
License number: G70557
NPI: 1952342693
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City
Hospital West, Tri City Medical
Ctr

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Ⓜ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

WONG, DARRYL S

Provider ID: 47164
Board Certified Specialty: No

DERMATOLOGY SPECIALISTS
INC A SURGICAL MED GRP
3629 VISTA WAY
OCEANSIDE, CA 92056-4522
Phone: (760) 757-7546
Fax:
After Hours Phone: (760)
757-7546
Provider Gender: Male
License number: G70557
NPI: 1952342693
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City
Hospital West, Tri City Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Ⓜ Accessibility: W
Hours: M-F 8AM-5PM, SA
8AM-12PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

EMERGENCY MEDICINE

BELLOMO, THOMAS N

Provider ID: 205603
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760)
547-1020
Provider Gender: Male
License number: G69193
NPI: 1700926698

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/25
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CHOW, BYRON C

Provider ID: 206097
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760) 547-1020
Provider Gender: Male
License number: A78116
NPI: 1619907607
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

KEARNEY, LAUREN K

Provider ID: 206223
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760) 547-1020
Provider Gender: Female
License number: G83666
NPI: 1740296268

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Palomar Health Downtown Campus, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

LOVEJOY, AMY E

Provider ID: 206109
Board Certified Specialty: No
RADY CHILDRENS HEALTH

NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760) 547-1020
Provider Gender: Female
License number: A75176
NPI: 1790856557
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Childrens Hospital Of Orange County, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MINKA, GENEVIEVE M

Provider ID: 205338
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760) 547-1020
Provider Gender: Female
License number: A77841
NPI: 1689646689
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

French
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

PARIKH, PAYAL
Provider ID: 205869
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760)
547-1020
Provider Gender: Female
License number: 20A10898
NPI: 1871757989
Provider English Spoken: Yes
Provider Language(s) Spoken:
Gujarati, Spanish
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Kaiser Foundation Hospital San
Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Rady Childrens Health
Network
PARKER, SHERINE B
Provider ID: 205787
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760)
547-1020

Provider Gender: Female
License number: G81658
NPI: 1477626513
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Glendale
Adventist Med Ctr, Glendale
Memorial Hosp And Health Ctr,
Tri City Medical Ctr, Rady
Childrens Hospital San Diego,
Valley Childrens Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

PIERCE, MATTHEW A
Provider ID: 205932
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760)
547-1020
Provider Gender: Male
License number: A148761
NPI: 1992125520
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

RILEY-HAGAN, MARGARET
Provider ID: 205987
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760)
547-1020
Provider Gender: Female
License number: A49609
NPI: 1548352388
Provider English Spoken: Yes
Provider Language(s) Spoken:
French, Spanish
Cultural Competency: No
Hospital Affiliation: Palomar

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D. Directorio de proveedores de atención especializada

Medical Center, Palomar Health
Downtown Campus, Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

ROSE, OLGA D

Provider ID: 205956

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565

Phone: (760) 547-1020

Fax: (760) 547-1021

After Hours Phone: (760)
547-1020

Provider Gender: Female

License number: A143536

NPI: 1740560044

Provider English Spoken: Yes

Provider Language(s) Spoken:

Russian

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Scripps

Memorial Hospital Encinitas,

Ucsd Medical Ctr, Rady

Childrens Hospital San Diego,

Sharp Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

FAMILY PRACTICE SPORTS MEDICINE

KAUFMAN, ELIZABETH A

Provider ID: 285904

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565

Phone: (760) 547-1020

Fax:

After Hours Phone: (760)
547-1020

Provider Gender: Female

License number: A135037

NPI: 1942644679

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Scripps Green Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

STARK, ERIK S

Provider ID: 284400

Board Certified Specialty: No
HEALTH EXCEL IPA INC

3905 WARING RD

OCEANSIDE, CA 92056-4405

Phone: (760) 724-9000

Fax: (760) 724-3686

After Hours Phone: (760)
724-9000

Provider Gender: Male

License number: A95886

NPI: 1376669572

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital Encinitas, Tri

City Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

GASTROENTEROLOGY

CHIAO, HELLEN, MD

Provider ID: 128127

Board Certified Specialty: Yes

COMMUNITY CARE IPA LLC

3923 WARING RD STE A

OCEANSIDE, CA 92056-4499

Phone: (760) 724-8782

Fax: (760) 842-7801

After Hours Phone: (760)

724-8782

Provider Gender: Female

License number: A127722

NPI: 1154681435

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cantonese, Mandarin, Spanish

Cultural Competency: No

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D. Directorio de proveedores de atención especializada

Hospital Affiliation: Tri City
Medical Ctr, Scripps Memorial
Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

CHIAO, HELLEN

Provider ID: 259685
Board Certified Specialty: Yes
HEALTH EXCEL IPA INC
3923 WARING RD STE A
OCEANSIDE, CA 92056-4499
Phone: (760) 724-8782
Fax: (760) 842-7801
After Hours Phone: (760)
724-8782
Provider Gender: Female
License number: A127722
NPI: 1154681435
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cantonese, Mandarin, Spanish
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr, Scripps Memorial
Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 18/110
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,

Health Excel Ipa Inc
**DEVEREAUX, CHRISTOPHER
E**
Provider ID: 259620
Board Certified Specialty: No
HEALTH EXCEL IPA INC
3923 WARING RD STE A
OCEANSIDE, CA 92056-4499
Phone: (760) 724-8782
Fax: (760) 842-7801
After Hours Phone: (760)
213-8088
Provider Gender: Male
License number: G75223
NPI: 1376512848
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr, Scripps Memorial
Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 18/120
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

DEVEREAUX, CHRISTOPHER E, MD

Provider ID: 41551
Board Certified Specialty: No
NORTH CNTY
GASTROENTEROLOGY MED
GRP INC
3923 WARING RD STE A
OCEANSIDE, CA 92056-4499

Phone: (760) 724-8782
Fax: (760) 842-7801
After Hours Phone: (760)
213-8088
Provider Gender: Male
License number: G75223
NPI: 1376512848
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr, Scripps Memorial
Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

DEVEREAUX, CHRISTOPHER E

Provider ID: 41551
Board Certified Specialty: No
NORTH CNTY
GASTROENTEROLOGY MED
GRP INC
3923 WARING RD STE A
OCEANSIDE, CA 92056-4499
Phone: (760) 724-8782
Fax:
After Hours Phone: (760)
724-8782
Provider Gender: Male
License number: G75223
NPI: 1376512848
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Ctr, Scripps Memorial
Hospital Encinitas
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-TH 8AM-4:30PM, F,SA
9AM-5PM
Website: www.ncgastro.com
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

KROL, THOMAS C

Provider ID: 259634
Board Certified Specialty: Yes
HEALTH EXCEL IPA INC
3923 WARING RD STE A
OCEANSIDE, CA 92056-4499
Phone: (760) 724-8782
Fax: (760) 842-7801
After Hours Phone: (760)
213-8088
Provider Gender: Male
License number: G43649
NPI: 1568431146
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr, Scripps Memorial
Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 18/120
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

KROL, THOMAS C

Provider ID: 41549
Board Certified Specialty: No
NORTH CNTY
GASTROENTEROLOGY MED
GRP INC
3923 WARING RD STE A
OCEANSIDE, CA 92056-4499
Phone: (760) 724-8782
Fax:
After Hours Phone: (760)
724-8782
Provider Gender: Male
License number: G43649
NPI: 1568431146
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr, Scripps Memorial
Hospital Encinitas
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-TH 8AM-4:30PM, F,SA
9AM-5PM
Website: www.ncgastro.com
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

KROL, THOMAS C , MD

Provider ID: 41549
Board Certified Specialty: Yes
NORTH CNTY
GASTROENTEROLOGY MED
GRP INC
3923 WARING RD STE A
OCEANSIDE, CA 92056-4499

Phone: (760) 724-8782
Fax: (760) 842-7801
After Hours Phone: (760)
213-8088
Provider Gender: Male
License number: G43649
NPI: 1568431146
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr, Scripps Memorial
Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

SHAD, JAVAID A

Provider ID: 259610
Board Certified Specialty: No
HEALTH EXCEL IPA INC
3923 WARING RD STE A
OCEANSIDE, CA 92056-4499
Phone: (760) 724-8782
Fax: (760) 842-7801
After Hours Phone: (760)
724-8782
Provider Gender: Male
License number: G86962
NPI: 1003885922
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi, Urdu
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas, Tri
City Medical Ctr

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

<p>Medi-Cal Open Panel: Yes Min/Max Age: 18/120 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Health Excel Ipa Inc</p>	<p>Health Excel Ipa Inc SHAD, JAVAID A , MD Provider ID: 41554 Board Certified Specialty: No NORTH CNTY GASTROENTEROLOGY MED GRP INC 3923 WARING RD STE A OCEANSIDE, CA 92056-4499 Phone: (760) 724-8782 Fax: (760) 842-7801 After Hours Phone: (760) 724-8782 Provider Gender: Male License number: G86962 NPI: 1003885922 Provider English Spoken: Yes Provider Language(s) Spoken: Hindi, Urdu Cultural Competency: No Hospital Affiliation: Scripps Memorial Hospital Encinitas, Tri City Medical Ctr Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Health Excel Ipa Inc</p>	<p>Phone: (760) 724-8782 Fax: (760) 842-7801 After Hours Phone: (760) 724-8782 Provider Gender: Male License number: A88942 NPI: 1851503353 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital Encinitas Medi-Cal Open Panel: Yes Min/Max Age: 18/120 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Health Excel Ipa Inc</p>
<p>SHAD, JAVAID A Provider ID: 41554 Board Certified Specialty: No NORTH CNTY GASTROENTEROLOGY MED GRP INC 3923 WARING RD STE A OCEANSIDE, CA 92056-4499 Phone: (760) 724-8782 Fax: After Hours Phone: (760) 724-8782 Provider Gender: Male License number: G86962 NPI: 1003885922 Provider English Spoken: Yes Provider Language(s) Spoken: Hindi, Urdu Cultural Competency: No Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital Encinitas Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: Hours: M-TH 8AM-4:30PM, F,SA 9AM-5PM Website: www.ncgastro.com Email: Medical Group(s): IPA: Community Care Ipa Llc,</p>	<p>SHIM, MICHAEL Provider ID: 259633 Board Certified Specialty: No HEALTH EXCEL IPA INC 3923 WARING RD STE A OCEANSIDE, CA 92056-4499</p>	<p>SHIM, MICHAEL, MD Provider ID: 41553 Board Certified Specialty: No COMMUNITY CARE IPA LLC 3923 WARING RD STE A OCEANSIDE, CA 92056-4499 Phone: (760) 724-8782 Fax: (760) 842-7801 After Hours Phone: (760) 724-8782 Provider Gender: Male License number: A88942 NPI: 1851503353 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>Hospital Encinitas <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc</p>	<p><i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc</p> <p>VIERNES, MATTHEW E <i>Provider ID:</i> 259638 <i>Board Certified Specialty:</i> Yes HEALTH EXCEL IPA INC 3923 WARING RD STE A OCEANSIDE, CA 92056-4499 <i>Phone:</i> (760) 724-8782 <i>Fax:</i> (760) 842-7801 <i>After Hours Phone:</i> (760) 213-8088 <i>Provider Gender:</i> Male <i>License number:</i> A61516 <i>NPI:</i> 1730158650 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Tri City Medical Ctr, Scripps Memorial Hospital Encinitas <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc</p>	<p><i>Phone:</i> (760) 724-8782 <i>Fax:</i> (760) 842-7801 <i>After Hours Phone:</i> (760) 213-8088 <i>Provider Gender:</i> Male <i>License number:</i> A61516 <i>NPI:</i> 1730158650 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Tri City Medical Ctr, Scripps Memorial Hospital Encinitas <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc</p>
<p>SHIM, MICHAEL <i>Provider ID:</i> 66003 <i>Board Certified Specialty:</i> No NORTH CNTY GASTROENTEROLOGY MED GRP INC 3923 WARING RD STE A OCEANSIDE, CA 92056-4499 <i>Phone:</i> (760) 724-8782 <i>Fax:</i> <i>After Hours Phone:</i> (760) 724-8782 <i>Provider Gender:</i> Male <i>License number:</i> A88942 <i>NPI:</i> 1851503353 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Tri City Medical Ctr, Scripps Memorial Hospital Encinitas <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-TH 8AM-4:30PM, F,SA 9AM-5PM <i>Website:</i> www.ncgastro.com <i>Email:</i> <i>Medical Group(s):</i></p>	<p>VIERNES, MATTHEW E , MD <i>Provider ID:</i> 41552 <i>Board Certified Specialty:</i> Yes NORTH CNTY GASTROENTEROLOGY MED GRP INC 3923 WARING RD STE A OCEANSIDE, CA 92056-4499</p>	<p>VIERNES, MATTHEW E <i>Provider ID:</i> 41552 <i>Board Certified Specialty:</i> No NORTH CNTY GASTROENTEROLOGY MED GRP INC 3923 WARING RD STE A OCEANSIDE, CA 92056-4499 <i>Phone:</i> (760) 724-8782 <i>Fax:</i> <i>After Hours Phone:</i> (760) 724-8782 <i>Provider Gender:</i> Male <i>License number:</i> A61516 <i>NPI:</i> 1730158650 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Tri City Medical Ctr, Scripps Memorial</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Encinitas
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-TH 8AM-4:30PM, F,SA
9AM-5PM
Website: www.ncgastro.com
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

Board Certified Specialty: No
HEALTH EXCEL IPA INC
3617 VISTA WAY
OCEANSIDE, CA 92056-4522
Phone: (760) 758-5770
Fax: (760) 721-8597
After Hours Phone: (760)
758-5770
Provider Gender: Female
License number: A143620
NPI: 1558546192

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr, Scripps Memorial
Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

GYNECOLOGIC ONCOLOGY

ESKANDER, RAMEZ N

Provider ID: 282166
Board Certified Specialty: No
UCSD MEDICAL GROUP
4002 VISTA WAY
OCEANSIDE, CA 92056-4506
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A102482
NPI: 1144486929
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: University Of
California Irvine Med Ctr, Earl
And Lorraine Miller Childrens
Hsp, Long Beach Memorial Med
Ctr, Providence St Joseph
Hospital, Providence St Jude
Medical Center, Orange Coast
Mem Med Ctr, Fountain Valley
Regional Hosp And Med Ctr,
Corona Regional Med Ctr, Ucsd
La Jolla John Sally Thornton,
Ucsd Medical Ctr
Medi-Cal Open Panel: Yes

SIDDIQUE, NAYYAR

Provider ID: 274776
Board Certified Specialty: No
HEALTH EXCEL IPA INC
3617 VISTA WAY
OCEANSIDE, CA 92056-4522
Phone: (760) 758-5770
Fax: (760) 721-8597
After Hours Phone: (760)
758-5770
Provider Gender: Male
License number: A62744
NPI: 1497890610
Provider English Spoken: Yes
Provider Language(s) Spoken:
Urdu
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr, Scripps Memorial
Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

SINGH, HIMANI

Provider ID: 272698

HEMATOLOGY / ONCOLOGY

INTERNAL MEDICINE CRITICAL CARE MEDICINE

CHRISTMAN, JAMESINA C

Provider ID: 259979
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760)
547-1020
Provider Gender: Female
License number: A93574
NPI: 1538372032

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Childrens
 Hosp Of Los Angeles, Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/99
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

INTERNAL MEDICINE

CHONG, ILSONG J

Provider ID: 122089
Board Certified Specialty: No
 NORTH COUNTY HEALTH
 SERVICES VALLEY CENTER
 605 CROUCH ST BLDG C
 OCEANSIDE, CA 92054-4415
Phone: (760) 757-4566
Fax:
After Hours Phone: (760)
 757-4566
Provider Gender: Male
License number: C152937
NPI: 1831240159
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Korean
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-SA 8AM-5PM
Website: www.ihpsocal.org
Email:
Medical Group(s):
 Oceanside-Carlsbad Community
 Clinic
IPA:

Website: www.ihpsocal.org
Email:
Medical Group(s):
 Oceanside-Carlsbad Community
 Clinic
IPA:

CHONG, ILSONG J

Provider ID: 122089
Board Certified Specialty: No
 IHP N COUNTY HEALTH SERV
 LA MISSION
 605 CROUCH ST BLDG C
 OCEANSIDE, CA 92054-4415
Phone: (760) 757-4566
Fax:
After Hours Phone: (760)
 757-4566
Provider Gender: Male
License number: C152937
NPI: 1831240159
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Korean
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-SA 8AM-5PM
Website: www.ihpsocal.org
Email:
Medical Group(s):
 Oceanside-Carlsbad Community
 Clinic
IPA:

GOMEZ, DENISE Y

Provider ID: 42413
Board Certified Specialty: No
 NORTH COUNTY HEALTH
 SERVICES VALLEY CENTER
 605 CROUCH ST BLDG C

OCEANSIDE, CA 92054-4415
Phone: (760) 757-4566
Fax: (760) 757-3004
After Hours Phone: (760)
 757-4566
Provider Gender: Female
License number: A66289
NPI: 1407871817
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Tri City
 Medical Ctr, Palomar Medical
 Center
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-SA 8AM-5PM
Website: www.ihpsocal.org
Email:
Medical Group(s):
 Oceanside-Carlsbad Community
 Clinic
IPA:

KYAW, NAING T , MD

Provider ID: 269374
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 3300 VISTA WAY
 OCEANSIDE, CA 92056-3632
Phone: (760) 967-9900
Fax: (760) 967-6769
After Hours Phone: (760)
 967-9900
Provider Gender: Male
License number: A97469
NPI: 1689784308
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Burmese, Chinese, Mandarin,
 Spanish

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Palomar Health Downtown Campus
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

PAROLY, WARREN S

Provider ID: 272516
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 3617 VISTA WAY
 OCEANSIDE, CA 92056-4522
Phone: (760) 758-5770
Fax: (760) 721-8597
After Hours Phone: (760) 758-5770
Provider Gender: Male
License number: G29867
NPI: 1306981527
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

MATERNAL AND FETAL MEDICINE

ADAMCZAK, JOANNA E

Provider ID: 205631
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3605 VISTA WAY STE 172
 OCEANSIDE, CA 92056-4565
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710

Provider Gender: Female
License number: A116982
NPI: 1447428420
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Tri City Medical Ctr, Sharp Mary Birch Hosp For Women And Newborns
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No

☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

ADAMI, REBECCA R

Provider ID: 272673
Board Certified Specialty: No
 RADY CHILDRENS HEALTH

NETWORK
 3605 VISTA WAY STE 172
 OCEANSIDE, CA 92056-4565
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: A149389
NPI: 1992149447
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No

☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CASELE, HOLLY L

Provider ID: 205836
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3605 VISTA WAY STE 172
 OCEANSIDE, CA 92056-4565
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: G87630
NPI: 1255348744
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Grossmont Hospital, Tri City Medical Ctr, Sharp Mary Birch Hosp For Women And Newborns, Scripps Memorial Hospital Encinitas, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CATANZARITE, VALERIAN A

Provider ID: 205743
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565
Phone: (760) 547-1020
Fax: (858) 966-6711
After Hours Phone: (760) 547-1020
Provider Gender: Male
License number: G46026
NPI: 1174694939
Provider English Spoken: Yes
Provider Language(s) Spoken: Russian, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Scripps Memorial Hospital, Tri City Medical Ctr, Southwest Healthcare System Wildomar, Southwest Healthcare System

Murrieta, Grossmont Hospital, Scripps Memorial Hospital Encinitas, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MCCULLOUGH, DEIRDRE M

Provider ID: 210035
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: C159758
NPI: 1639153018
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Mary Birch Hosp For Women And Newborns
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Rady Childrens Health Network

RICHARDSON, ALVIE C

Provider ID: 264686
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Male
License number: C160063
NPI: 1154305977
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SCHWENDEMANN, WADE D

Provider ID: 205437
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Male
License number: A109228
NPI: 1477563302
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Scripps Memorial Hospital,
 Grossmont Hospital, Sharp
 Memorial Hospital, Sharp Mary
 Birch Hosp For Women And
 Newborns, Tri City Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

TITH, TEVY

Provider ID: 205390
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3605 VISTA WAY STE 172
 OCEANSIDE, CA 92056-4565
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858)
 966-6710
Provider Gender: Female
License number: A103521
NPI: 1588816086
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,

Sharp Memorial Hospital, Tri City
 Medical Ctr, Sharp Mary Birch
 Hosp For Women And
 Newborns, University Of
 California Irvine Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

WESTERMANN, MELISSA L

Provider ID: 255793
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3605 VISTA WAY STE 172
 OCEANSIDE, CA 92056-4565
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858)
 966-6710
Provider Gender: Female
License number: A130149
NPI: 1760730758
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Mary
 Birch Hosp For Women And
 Newborns, Earl And Lorraine
 Miller Childrens Hsp, Long Beach
 Memorial Med Ctr, University Of
 California Irvine Med Ctr, Sharp
 Memorial Hospital, Grossmont
 Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):

No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

WILLIAMS, KRISTIN M

Provider ID: 206230
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3605 VISTA WAY STE 172
 OCEANSIDE, CA 92056-4565
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858)
 966-6710
Provider Gender: Female
License number: A72985
NPI: 1992847131
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp
 Memorial Hospital, Sharp Mary
 Birch Hosp For Women And
 Newborns, Tri City Medical Ctr,
 California Pacific Med Ctr,
 Stanford Health Care, Lucile
 Salter Packard Childrens Hosp,
 San Mateo Medical Ctr, Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Network	OCEANSIDE, CA 92056-3633 <i>Phone: (760) 967-9900</i> <i>Fax: (760) 967-6769</i> <i>After Hours Phone: (760) 967-9900</i> <i>Provider Gender: Male</i> <i>License number: G52074</i> <i>NPI: 1508864448</i> <i>Provider English Spoken: Yes</i> <i>Provider Language(s) Spoken: Spanish</i> <i>Cultural Competency: No</i> <i>Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital Encinitas</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0/999</i> <i>American Sign Language (ASL): No</i> <i>♿ Accessibility: W</i> <i>Hours: M-SA 9AM-5PM</i> <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</i>	<i>Cultural Competency: No</i> <i>Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital Encinitas</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: None</i> <i>American Sign Language (ASL): No</i> <i>♿ Accessibility: W</i> <i>Hours: M-SA 9AM-5PM</i> <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</i>
NEPHROLOGY		
BARAGER, RICHARD R <i>Provider ID: 262227</i> <i>Board Certified Specialty: Yes</i> IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 3300 VISTA WAY STE B OCEANSIDE, CA 92056-3633 <i>Phone: (760) 967-9900</i> <i>Fax: (760) 967-6769</i> <i>After Hours Phone: (760) 967-9900</i> <i>Provider Gender: Male</i> <i>License number: G52074</i> <i>NPI: 1508864448</i> <i>Provider English Spoken: Yes</i> <i>Provider Language(s) Spoken: Spanish</i> <i>Cultural Competency: No</i> <i>Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital Encinitas</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0/999</i> <i>American Sign Language (ASL): No</i> <i>♿ Accessibility: W</i> <i>Hours: M-SA 9AM-5PM</i> <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</i>	BARAGER, RICHARD R , MD <i>Provider ID: 65959</i> <i>Board Certified Specialty: Yes</i> COMMUNITY CARE IPA LLC 3300 VISTA WAY STE B OCEANSIDE, CA 92056-3633 <i>Phone: (760) 967-9900</i> <i>Fax: (760) 967-6769</i> <i>After Hours Phone: (760) 967-9900</i> <i>Provider Gender: Male</i> <i>License number: G52074</i> <i>NPI: 1508864448</i> <i>Provider English Spoken: Yes</i> <i>Provider Language(s) Spoken: Spanish</i>	KHARADJIAN, TALAR B <i>Provider ID: 279811</i> <i>Board Certified Specialty: Yes</i> COMMUNITY CARE IPA LLC 3300 VISTA WAY STE B OCEANSIDE, CA 92056-3633 <i>Phone: (760) 967-9900</i> <i>Fax: (760) 967-6769</i> <i>After Hours Phone: (760) 967-9900</i> <i>Provider Gender: Female</i> <i>License number: A161276</i> <i>NPI: 1770938201</i> <i>Provider English Spoken: Yes</i> <i>Provider Language(s) Spoken: Armenian, Spanish</i> <i>Cultural Competency: No</i> <i>Hospital Affiliation: Tri City Medical Ctr</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0/999</i> <i>American Sign Language (ASL): No</i> <i>♿ Accessibility:</i> <i>Hours: M-SA 9AM-5PM</i> <i>Website:</i> <i>Email:</i>
BARAGER, RICHARD R <i>Provider ID: 39437</i> <i>Board Certified Specialty: Yes</i> BALBOA NEPHROLOGY MED GRP INC 3300 VISTA WAY STE B		

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D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Community Care Ipa Llc

KYAW, NAING T

Provider ID: 262376
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
3300 VISTA WAY
OCEANSIDE, CA 92056-3632
Phone: (760) 967-9900
Fax: (760) 967-6769
After Hours Phone: (760)
967-9900
Provider Gender: Male
License number: A97469
NPI: 1689784308
Provider English Spoken: Yes
Provider Language(s) Spoken:
Burmese, Chinese, Mandarin,
Spanish
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr, Palomar Health
Downtown Campus
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

Ⓜ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

KYAW, NAING T

Provider ID: 68200
Board Certified Specialty: No
BALBOA NEPHROLOGY MED
GRP INC
3300 VISTA WAY STE B

OCEANSIDE, CA 92056-3633
Phone: (760) 967-9900
Fax: (760) 967-6769

After Hours Phone: (760)
967-9900
Provider Gender: Male
License number: A97469
NPI: 1689784308
Provider English Spoken: Yes
Provider Language(s) Spoken:
Burmese, Chinese, Mandarin,
Spanish
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

Ⓜ Accessibility: W
Hours: M-SA 9AM-5PM
Website: bnmg.org
Email:

Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

KYAW, NAING T

Provider ID: 68200
Board Certified Specialty: No
BALBOA NEPHROLOGY MED
GRP INC
3300 VISTA WAY
OCEANSIDE, CA 92056-3632
Phone: (760) 967-9900
Fax: (760) 967-6769
After Hours Phone: (760)
967-9900
Provider Gender: Male
License number: A97469
NPI: 1689784308
Provider English Spoken: Yes
Provider Language(s) Spoken:

Burmese, Chinese, Mandarin,
Spanish
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr, Palomar Health
Downtown Campus
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Ⓜ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

MATAYOSHI, AMY H

Provider ID: 262154
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
3300 VISTA WAY STE B
OCEANSIDE, CA 92056-3633
Phone: (760) 967-9900
Fax: (760) 967-6769
After Hours Phone: (760)
967-9900
Provider Gender: Female
License number: A60790
NPI: 1417921982
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Ⓜ Accessibility:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

MATAYOSHI, AMY H

Provider ID: 54126

Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC

3300 VISTA WAY STE B
OCEANSIDE, CA 92056-3633

Phone: (760) 967-9900

Fax: (760) 967-6769

After Hours Phone: (760) 967-9900

Provider Gender: Female

License number: A60790

NPI: 1417921982

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency: No

Hospital Affiliation: Tri City Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL): No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website: bnmg.org

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

MATAYOSHI, AMY H , MD

Provider ID: 54126

Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC

3300 VISTA WAY STE B
OCEANSIDE, CA 92056-3633

Phone: (760) 967-9900

Fax: (760) 967-6769

After Hours Phone: (760) 967-9900

Provider Gender: Female

License number: A60790

NPI: 1417921982

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency: No

Hospital Affiliation: Tri City Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

MATAYOSHI, AMY H

Provider ID: 54126

Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC

3300 VISTA WAY STE B
OCEANSIDE, CA 92056-3633

Phone: (760) 967-9900

Fax: (760) 967-6769

After Hours Phone: (760) 967-9900

Provider Gender: Female

License number: A60790

NPI: 1417921982

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency: No

Hospital Affiliation: Tri City Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

NEUROLOGY CHILD

SAHAGIAN, MICHELLE L

Provider ID: 206075

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565

Phone: (760) 547-1020

Fax: (760) 547-1021

After Hours Phone: (760) 547-1020

Provider Gender: Female

License number: A80990

NPI: 1275604035

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

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D. Directorio de proveedores de atención especializada

<p>No ☯ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network</p>	<p><i>Provider ID:</i> 273226 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 4002 VISTA WAY OCEANSIDE, CA 92056-4506 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273</p>	<p><i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Tri City Medical Ctr, Palomar Medical Center <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 16/999 <i>American Sign Language (ASL):</i> No</p>
NEUROLOGY		
<p>JINDAL, ANUJA V <i>Provider ID:</i> 206266 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3605 VISTA WAY STE 172 OCEANSIDE, CA 92056-4565 <i>Phone:</i> (760) 547-1020 <i>Fax:</i> (760) 547-1021 <i>After Hours Phone:</i> (760) 547-1020 <i>Provider Gender:</i> Female <i>License number:</i> A149444 <i>NPI:</i> 1194046581 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network</p>	<p><i>Provider Gender:</i> Female <i>License number:</i> A149945 <i>NPI:</i> 1174758031 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 16/999 <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group</p>	<p><i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Health Excel Ipa Inc</p>
<p>OBSTETRICS / GYNECOLOGY</p> <p>BINDER, PRATIBHA S</p>	<p>EBRAHIMI ADIB, TANNAZ <i>Provider ID:</i> 268667 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 3927 WARING RD STE D OCEANSIDE, CA 92056-4458 <i>Phone:</i> (760) 990-7585 <i>Fax:</i> (951) 750-5089 <i>After Hours Phone:</i> (760) 990-7585 <i>Provider Gender:</i> Female <i>License number:</i> A121761 <i>NPI:</i> 1164663860 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Persian</p>	<p>MAZAREI, RAHELE <i>Provider ID:</i> 279184 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 3998 VISTA WAY STE C OCEANSIDE, CA 92056-4514 <i>Phone:</i> (760) 941-1440 <i>Fax:</i> (760) 630-5477 <i>After Hours Phone:</i> (760) 941-1440 <i>Provider Gender:</i> Female <i>License number:</i> 20A7358 <i>NPI:</i> 1639170459 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Tri City Medical Ctr, Sharp Memorial Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 14/100 <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Health Excel Ipa Inc</p>

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D. Directorio de proveedores de atención especializada

SUNTAY, BERK T

Provider ID: 279098
Board Certified Specialty: No
HEALTH EXCEL IPA INC
3998 VISTA WAY STE C
OCEANSIDE, CA 92056-4514
Phone: (760) 941-1440
Fax: (760) 630-5477
After Hours Phone: (760)
941-1440
Provider Gender: Male
License number: A124008
NPI: 1841429974
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, French, Spanish
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 14/100
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

OPHTHALMOLOGY

ABBOUD, JEAN-PAUL J

Provider ID: 214192
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760)
547-1020
Provider Gender: Male
License number: A124825

NPI: 1760776728
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, French, Spanish
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego, Tri
City Medical Ctr, Scripps
Memorial Hospital, Scripps
Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

BANSAL, PREETI

Provider ID: 205619
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565
Phone: (960) 547-1020
Fax: (760) 547-1021
After Hours Phone: (960)
547-1020
Provider Gender: Female
License number: A90890
NPI: 1871664631
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, French, Spanish
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Grossmont Hospital, Sharp Mary
Birch Hosp For Women And
Newborns, Scripps Mercy
Hospital Chula Vista, Scripps

Memorial Hospital, Tri City
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

BHATIA, SHAGUN K

Provider ID: 267318
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760)
547-1020
Provider Gender: Female
License number: A154902
NPI: 1104237353
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, French, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr, Rady Childrens
Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health

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D. Directorio de proveedores de atención especializada

Network	3605 VISTA WAY STE 172 OCEANSIDE, CA 92056-4565 Phone: (760) 547-1020 Fax: (760) 547-1021 After Hours Phone: (760) 547-1020 Provider Gender: Female License number: A105472 NPI: 1861648602 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Rady Childrens Hospital San Diego, Grossmont Hospital, Sharp Memorial Hospital, Childrens Hosp And Resrch Ctr At Oakland, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network	NPI: 1497792220 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Rady Childrens Hospital San Diego Medi-Cal Open Panel: Yes Min/Max Age: 0/18 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network, Ucsd Medical Group
MOLL, ANGELA M Provider ID: 114919 Board Certified Specialty: No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNFTN 3605 VISTA WAY STE 172 OCEANSIDE, CA 92056-4565 Phone: (760) 547-1020 Fax: After Hours Phone: (760) 547-1020 Provider Gender: Female License number: A105472 NPI: 1861648602 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Rady Childrens Hospital San Diego, Grossmont Hospital, Sharp Memorial Hospital, Childrens Hosp And Resrch Ctr At Oakland, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network	3605 VISTA WAY STE 172 OCEANSIDE, CA 92056-4565 Phone: (760) 547-1020 Fax: (760) 547-1021 After Hours Phone: (760) 547-1020 Provider Gender: Female License number: A105472 NPI: 1861648602 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Rady Childrens Hospital San Diego, Grossmont Hospital, Sharp Memorial Hospital, Childrens Hosp And Resrch Ctr At Oakland, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista Medi-Cal Open Panel: Yes Min/Max Age: 0/18 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network	OHALLORAN, HENRY S Provider ID: 114922 Board Certified Specialty: No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNFTN 3605 VISTA WAY STE 172 OCEANSIDE, CA 92056-4565 Phone: (760) 547-1020 Fax: After Hours Phone: (760) 547-1020 Provider Gender: Male License number: A73282 NPI: 1235287947 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W
MOLL, ANGELA M Provider ID: 205509 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK	MOVAGHAR, MANSOOR Provider ID: 216416 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 3605 VISTA WAY STE 172 OCEANSIDE, CA 92056-4565 Phone: (760) 547-1020 Fax: After Hours Phone: (760) 547-1020 Provider Gender: Male License number: A100897	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

OHALLORAN, HENRY S

Provider ID: 205887

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565

Phone: (760) 547-1020

Fax: (760) 547-1021

After Hours Phone: (760) 547-1020

Provider Gender: Male

License number: A73282

NPI: 1235287947

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

ROBINSON, FANE L

Provider ID: 48365

Board Certified Specialty: No
SAN DIEGO RETINA ASSOCIATES A MED CORP

3231 WARING CT STE S

OCEANSIDE, CA 92056-4510

Phone: (760) 631-6144

Fax:

After Hours Phone: (760)

631-6144

Provider Gender: Male

License number: A45990

NPI: 1295894368

Provider English Spoken: Yes

Provider Language(s) Spoken:

Afrikaans, Spanish

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-F 8AM-5PM, SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

SCHER, COLIN A

Provider ID: 125406

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED

FNDTN

3605 VISTA WAY STE 172

OCEANSIDE, CA 92056-4565

Phone: (760) 547-1020

Fax:

After Hours Phone: (760)

547-1020

Provider Gender: Male

License number: A42700

NPI: 1396816153

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp Memorial Hospital, Rady Childrens Hospital San Diego, Palomar Medical Center, Grossmont Hospital, Tri City Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

SCHER, COLIN A

Provider ID: 206328

Board Certified Specialty: Yes

RADY CHILDRENS HEALTH

NETWORK

3605 VISTA WAY STE 172

OCEANSIDE, CA 92056-4565

Phone: (760) 547-1020

Fax: (760) 547-1021

After Hours Phone: (760)

547-1020

Provider Gender: Male

License number: A42700

NPI: 1396816153

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Rady Childrens Hospital San Diego, Palomar Medical Center,

Grossmont Hospital, Tri City

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Rady Childrens Health Network</p>	<hr/> OTOLOGY / LARYNGOLOGY / RHINOLOGY <hr/>	<p><i>Phone:</i> (760) 547-1020 <i>Fax:</i> <i>After Hours Phone:</i> (760) 547-1020 <i>Provider Gender:</i> Female <i>License number:</i> A134647 <i>NPI:</i> 1760707657 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Rady Childrens Health Network</p>
<p>SMITH, MARK D <i>Provider ID:</i> 27195 <i>Board Certified Specialty:</i> No SAN DIEGO RETINA ASSOCIATES A MED CORP 3231 WARING CT STE S OCEANSIDE, CA 92056-4510 <i>Phone:</i> (760) 631-6144 <i>Fax:</i> <i>After Hours Phone:</i> (760) 631-6144 <i>Provider Gender:</i> Male <i>License number:</i> G55641 <i>NPI:</i> 1255490330 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Memorial Hospital, Tri City Medical Ctr, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Rady Childrens Health Network</p>	<p>BLISS, MORGAN R <i>Provider ID:</i> 206086 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3605 VISTA WAY STE 172 OCEANSIDE, CA 92056-4565 <i>Phone:</i> (760) 547-1020 <i>Fax:</i> (858) 966-6711 <i>After Hours Phone:</i> (760) 547-1020 <i>Provider Gender:</i> Female <i>License number:</i> A134647 <i>NPI:</i> 1760707657 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Rady Childrens Health Network</p>	<p>FRIESEN, TZYYNONG L <i>Provider ID:</i> 244899 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3605 VISTA WAY STE 172 OCEANSIDE, CA 92056-4565 <i>Phone:</i> (760) 547-1020 <i>Fax:</i> <i>After Hours Phone:</i> (760) 547-1020 <i>Provider Gender:</i> Female <i>License number:</i> A152327 <i>NPI:</i> 1952740177 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i></p>
<hr/> OTOLARYNGOLOGY / <hr/>	<hr/> OTOLARYNGOLOGY <hr/>	<p>BLISS, MORGAN R <i>Provider ID:</i> 112861 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDDT 3605 VISTA WAY STE 172 OCEANSIDE, CA 92056-4565</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>No ☯ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network</p>	<p>3605 VISTA WAY STE 172 OCEANSIDE, CA 92056-4565 <i>Phone:</i> (760) 547-1020 <i>Fax:</i> (760) 547-1021 <i>After Hours Phone:</i> (760) 547-1020 <i>Provider Gender:</i> Female <i>License number:</i> A112930 <i>NPI:</i> 1124230909 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network</p>	<p>Medical Ctr, Palomar Medical Center, Pomerado Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> W <i>Hours:</i> M-F 8:30AM-5PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>
<p>JACOBS, ROBERT D <i>Provider ID:</i> 39335 <i>Board Certified Specialty:</i> No E N T ASSOCIATES MED GRP 3907 WARING RD STE 1 OCEANSIDE, CA 92056-4454 <i>Phone:</i> (760) 724-8749 <i>Fax:</i> <i>After Hours Phone:</i> (760) 724-8749 <i>Provider Gender:</i> Male <i>License number:</i> G52767 <i>NPI:</i> 1023028446 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Tri City Medical Ctr, Pomerado Hospital, Palomar Medical Center <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> W <i>Hours:</i> M-F 8:30AM-5PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>	<p>REISMAN, BRUCE K <i>Provider ID:</i> 35206 <i>Board Certified Specialty:</i> No E N T ASSOCIATES MED GRP 3907 WARING RD STE 1 OCEANSIDE, CA 92056-4454 <i>Phone:</i> (760) 724-8749 <i>Fax:</i> <i>After Hours Phone:</i> (760) 724-8749 <i>Provider Gender:</i> Male <i>License number:</i> G59056 <i>NPI:</i> 1699785014 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Tri City</p>	<p>GROSSFELD, PAUL D <i>Provider ID:</i> 205614 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3605 VISTA WAY STE 172 OCEANSIDE, CA 92056-4565 <i>Phone:</i> (760) 547-1020 <i>Fax:</i> (760) 547-1021 <i>After Hours Phone:</i> (760) 547-1020 <i>Provider Gender:</i> Male <i>License number:</i> A52799 <i>NPI:</i> 1225109085 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i></p>
<hr/> <p>PEDIATRIC CARDIOLOGY</p> <hr/>		

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D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Rady Childrens Health Network

GROSSFELD, PAUL D

Provider ID: 51918
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760) 547-1020
Provider Gender: Male
License number: A52799
NPI: 1225109085
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Rady Childrens Health Network

PEDIATRIC DERMATOLOGY

EICHENFIELD, LAWRENCE F

Provider ID: 205332
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760) 547-1020
Provider Gender: Male
License number: G69132
NPI: 1477624138
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Ucsd Medical Ctr, Childrens Hospital Of Orange County, Childrens Hosp And Resrch Ctr At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

JOSHI, WEENA E

Provider ID: 262236
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760) 547-1020

Provider Gender: Female
License number: A91208
NPI: 1376862177
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Pomerado Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

KANTHARIA, TINA H

Provider ID: 206293
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760) 547-1020

Provider Gender: Female
License number: A126911
NPI: 1659632362
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

PEDIATRIC ENDOCRINOLOGY

MARINKOVIC, MAJA

Provider ID: 206138

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565

Phone: (858) 966-4032

Fax: (858) 966-6227

After Hours Phone: (858)
966-4032

Provider Gender: Female

License number: A95251

NPI: 1053469767

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Childrens

Hosp And Resrch Ctr At

Oakland, Rady Childrens

Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

PEDIATRIC GASTROENTEROLOGY

CASTANO, DANIELA

Provider ID: 205831

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565

Phone: (760) 547-1020

Fax: (760) 547-1021

After Hours Phone: (760)

547-1020

Provider Gender: Female

License number: A132006

NPI: 1851616478

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

PEDIATRIC ORTHOPEDICS

UPASANI, VIDYADHAR V

Provider ID: 260954

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565

Phone: (760) 547-1020

Fax: (760) 547-1021

After Hours Phone: (760)

547-1020

Provider Gender: Male

License number: A97603

NPI: 1548417652

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

PEDIATRIC RHEUMATOLOGY

CHIRASEVEENUPRAPUND, PETER

Provider ID: 205937

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565

Phone: (760) 547-1020

Fax: (858) 547-1021

After Hours Phone: (760)

547-1020

Provider Gender: Male

License number: A68277

NPI: 1467518209

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,
Childrens Hosp And Resrch Ctr

At Oakland

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p><i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Rady Childrens Health Network</p>	<p><i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3605 VISTA WAY STE 172 OCEANSIDE, CA 92056-4565 <i>Phone:</i> (760) 547-1020 <i>Fax:</i> <i>After Hours Phone:</i> (760) 547-1020 <i>Provider Gender:</i> Female <i>License number:</i> A89393 <i>NPI:</i> 1427142363 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Memorial Hospital, Scripps Memorial Hospital Encinitas, Rady Childrens Hospital San Diego, Scripps Memorial Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Rady Childrens Health Network</p>	<p><i>Phone:</i> (760) 610-0522 <i>Fax:</i> (760) 610-0523 <i>After Hours Phone:</i> (760) 610-0522 <i>Provider Gender:</i> Male <i>License number:</i> A118592 <i>NPI:</i> 1275780686 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Sharp Memorial Hospital, Scripps Mercy Hospital, Pomerado Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 18/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc</p>
<hr/> PEDIATRICS <hr/>		
<p>LANGLEY, GREGORY H <i>Provider ID:</i> 205700 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3605 VISTA WAY STE 172 OCEANSIDE, CA 92056-4565 <i>Phone:</i> (760) 547-1020 <i>Fax:</i> (760) 547-1021 <i>After Hours Phone:</i> (760) 547-1020 <i>Provider Gender:</i> Male <i>License number:</i> G88047 <i>NPI:</i> 1427049675 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Rady Childrens Health Network</p>	<p>RYAN, KYLE <i>Provider ID:</i> 275661 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3605 VISTA WAY OCEANSIDE, CA 92056-4565 <i>Phone:</i> (760) 547-1020 <i>Fax:</i> (760) 547-1021 <i>After Hours Phone:</i> (760) 547-1020 <i>Provider Gender:</i> Male <i>License number:</i> A170177 <i>NPI:</i> 1447645742 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No</p>	
<hr/> PHYSICAL MEDICINE / REHABILITATION <hr/>		
<p>WANG, EMILY J <i>Provider ID:</i> 126806</p>	<p>FISHER, CASEY J <i>Provider ID:</i> 244865 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 3142 VISTA WAY STE 207 OCEANSIDE, CA 92056-3628</p>	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/25

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

PHYSICIANS ASSISTANT

CLARK, YVONNE L

Provider ID: 260064

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565

Phone: (760) 547-1020

Fax:

After Hours Phone: (760)
547-1020

Provider Gender: Female

License number: PA20447

NPI: 1629302476

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

FLOCO, VIRGINIA A

Provider ID: 260684

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565

Phone: (760) 547-1020

Fax:

After Hours Phone: (760)
547-1020

Provider Gender: Female

License number: PA20788

NPI: 1982798112

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

LAZAR, ANITA A

Provider ID: 262303

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565

Phone: (760) 547-1020

Fax: (760) 547-1021

After Hours Phone: (760)
547-1020

Provider Gender: Female

License number: PA55984

NPI: 1609208198

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: 0/99

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

MCCAULEY, KRISTINA R

Provider ID: 262242

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565

Phone: (760) 547-1020

Fax: (760) 547-1021

After Hours Phone: (760)
547-1020

Provider Gender: Female

License number: PA52100

NPI: 1063819944

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: 0/99

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Rady Childrens Health Network

SKULSKY, EVA J

Provider ID: 265298
Board Certified Specialty: No
HEALTH EXCEL IPA INC
3923 WARING RD STE A
OCEANSIDE, CA 92056-4499
Phone: (760) 724-8782
Fax: (760) 842-7801
After Hours Phone: (760) 724-8782
Provider Gender: Female
License number: PA17593
NPI: 1841536208
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/120
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

PODIATRIST

SPRINGER, DEWAIN N

Provider ID: 26711
Board Certified Specialty: No
NORTH COUNTY PODIATRY CLINIC
2191 S EL CAMINO REAL STE 101
OCEANSIDE, CA 92054-6225

Phone: (760) 757-7171
Fax:
After Hours Phone: (760) 757-7171
Provider Gender: Male
License number: DPM3097
NPI: 1881709459
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-TH 8:15AM-5PM, F 8:15AM-12PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

RADIOLOGY DIAGNOSTIC X-RAY

ALLEN, DERRICK R , MD

Provider ID: 268360
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
3601 VISTA WAY
OCEANSIDE, CA 92056-4559
Phone: (760) 631-7505
Fax: (866) 558-4329
After Hours Phone: (760) 631-7505
Provider Gender: Male
License number: A69840
NPI: 1215982970
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital

Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

ANDERSON, GREGORY S

Provider ID: 125988
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
3601 VISTA WAY STE 101
OCEANSIDE, CA 92056-4559
Phone: (760) 631-7505
Fax:
After Hours Phone: (760) 631-7505
Provider Gender: Male
License number: A90018
NPI: 1841467099
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BAKER, LORI L

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D. Directorio de proveedores de atención especializada

Provider ID: 125997
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC
3601 VISTA WAY STE 101
OCEANSIDE, CA 92056-4559
Phone: (760) 631-7505
Fax: (760) 631-7506
After Hours Phone: (760)
631-7505
Provider Gender: Female
License number: G62517
NPI: 1063465219
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Medical Ctr At Ucsf,
Scripps Mercy Hospital Chula
Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BORSO, MAYA G

Provider ID: 126014
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC
3601 VISTA WAY STE 101
OCEANSIDE, CA 92056-4559
Phone: (760) 631-7505
Fax: (760) 631-7506
After Hours Phone: (760)
631-7505
Provider Gender: Female
License number: A97134
NPI: 1548473507

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Green Hospital, Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CHOU, ERIC T

Provider ID: 126012
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC
3601 VISTA WAY STE 101
OCEANSIDE, CA 92056-4559
Phone: (760) 631-7505
Fax: (760) 631-7506
After Hours Phone: (760)
631-7505
Provider Gender: Male
License number: A96095
NPI: 1689627838
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc

DOEMENY, JOHN M

Provider ID: 126052
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC
3601 VISTA WAY STE 101
OCEANSIDE, CA 92056-4559
Phone: (760) 631-7505
Fax: (760) 631-7506
After Hours Phone: (760)
631-7505
Provider Gender: Male
License number: G50925
NPI: 1841243912
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

FIROOZANIA, NILOFAR

Provider ID: 126176
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC
3601 VISTA WAY STE 101
OCEANSIDE, CA 92056-4559

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D. Directorio de proveedores de atención especializada

Phone: (866) 558-4320
Fax:
After Hours Phone: (866) 558-4320
Provider Gender: Female
License number: A109806
NPI: 1962521419
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc, Redlands Community Hosp, Barstow Community Hospital, Kindred Hospital Riverside, Victor Valley Global Med Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ZINK BRODY, GORDON C

Provider ID: 126197
Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 3601 VISTA WAY STE 101
 OCEANSIDE, CA 92056-4559
Phone: (760) 631-7505
Fax: (760) 631-7506
After Hours Phone: (760) 631-7505
Provider Gender: Male
License number: G68636
NPI: 1689610362
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado

Hospital Llc, Oak Valley Dist Hosp, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Scripps Green Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

RADIOLOGY

DOEMENY, JOHN M

Provider ID: 269751
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 3601 VISTA WAY STE 101
 OCEANSIDE, CA 92056-4559
Phone: (760) 631-7505
Fax: (866) 558-4329
After Hours Phone: (760) 631-7505
Provider Gender: Male
License number: G50925
NPI: 1841243912
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

FRANKE, MARK A

Provider ID: 269636
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 3601 VISTA WAY STE 101
 OCEANSIDE, CA 92056-4559
Phone: (760) 631-7505
Fax: (866) 558-4329
After Hours Phone: (760) 631-7505
Provider Gender: Male
License number: A118792
NPI: 1114246329

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Santa Monica Ucla Med Ctr, Ronald Reagan Ucla Med Ctr, Alvarado Hospital Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MOFFIT, BRIAN J

Provider ID: 269529
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 3601 VISTA WAY STE 101A
 OCEANSIDE, CA 92056-4559

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D. Directorio de proveedores de atención especializada

Phone: (760) 631-7505
 Fax: (866) 558-4329
 After Hours Phone: (760) 631-7505
 Provider Gender: Male
 License number: G51551
 NPI: 1508817305
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

TENA, ROWENA G , MD

Provider ID: 269823
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 3601 VISTA WAY STE 101
 OCEANSIDE, CA 92056-4559
 Phone: (760) 631-7505
 Fax: (866) 558-4329
 After Hours Phone: (760) 631-7505
 Provider Gender: Female
 License number: A69607
 NPI: 1629029335
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Vibra Hospital Of

San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

REGISTERED PHYSICAL THERAPIST

ANDREW, MEAGAN S

Provider ID: 269373
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 3142 VISTA WAY STE 101
 OCEANSIDE, CA 92056-3627
 Phone: (951) 696-9353
 Fax: (760) 630-5367
 After Hours Phone: (951) 696-9353
 Provider Gender: Female
 License number: PT291748
 NPI: 1366997702
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

LEE, MICHAEL E

Provider ID: 269372

Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 2335 VISTA WAY
 OCEANSIDE, CA 92054-5663
 Phone: (855) 344-5870
 Fax: (877) 298-4204
 After Hours Phone: (855) 344-5870
 Provider Gender: Male
 License number: PT43323
 NPI: 1841656170
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

OSORIO, SANTIAGO

Provider ID: 273649
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 2424 VISTA WAY STE 120
 OCEANSIDE, CA 92054-6178
 Phone: (760) 696-3358
 Fax: (760) 696-3368
 After Hours Phone: (760) 696-3358
 Provider Gender: Male
 License number: PT42536
 NPI: 1508145277
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes

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D. Directorio de proveedores de atención especializada

Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

RHEAUME, ALEXANDER E

Provider ID: 269461
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
2335 VISTA WAY
OCEANSIDE, CA 92054-5663
Phone: (760) 547-2666
Fax:
After Hours Phone: (760)
547-2666
Provider Gender: Male
License number: PT39516
NPI: 1053659854
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SURGERY CARDIOVASCULAR

GRAMINS, DANIEL L

Provider ID: 210048
Board Certified Specialty: No
UCSD MEDICAL GROUP
3998 VISTA WAY STE A

OCEANSIDE, CA 92056-4514
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: G79711
NPI: 1164495750
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

ONAITIS, MARK

Provider ID: 210298
Board Certified Specialty: No
UCSD MEDICAL GROUP
4002 VISTA WAY
OCEANSIDE, CA 92056-4506
Phone: (760) 726-2500
Fax:
After Hours Phone: (760)
726-2500
Provider Gender: Male
License number: C144886
NPI: 1841310638
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr, Tri City Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SURGERY COLON SURGERY

BLAKER, KRISTEN M

Provider ID: 269214
Board Certified Specialty: No
HEALTH EXCEL IPA INC
3601 VISTA WAY STE 203
OCEANSIDE, CA 92056-4559
Phone: (760) 724-5352
Fax: (760) 724-5447
After Hours Phone: (760)
724-5352
Provider Gender: Female
License number: A141260
NPI: 1396059440
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

SURGERY GENERAL

DEEMER, ANDREW R

Provider ID: 88849
Board Certified Specialty: No
HEALTH EXCEL IPA INC

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D. Directorio de proveedores de atención especializada

3601 VISTA WAY STE 203
OCEANSIDE, CA 92056-4559
Phone: (760) 724-5352

Fax: (760) 724-5447
After Hours Phone: (760)
724-5352

Provider Gender: Male
License number: G66191
NPI: 1578568432

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

Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr, Scripps Memorial
Hospital Encinitas

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

Ⓜ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

JAMSHIDI-NEZHAD, MOHAMMAD

Provider ID: 88864
Board Certified Specialty: No
EXPERT SURGEONS OF CALIF
INC

3601 VISTA WAY STE 203
OCEANSIDE, CA 92056-4559
Phone: (760) 724-5352
Fax: (760) 724-5447

After Hours Phone: (760)
724-5352

Provider Gender: Male
License number: 20A10547
NPI: 1891797023

Provider English Spoken: Yes
Provider Language(s) Spoken:
Faroese, Farsi, Spanish

Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr, Scripps Memorial
Hospital Encinitas, Providence
Holy Cross Med Ctr, Palomar
Health Downtown Campus,
Pomerado Hospital, Palomar
Medical Center

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

Ⓜ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

TOOSIE, KATAYOUN

Provider ID: 88862
Board Certified Specialty: No
TOOSIE MD INC
3601 VISTA WAY STE 203
OCEANSIDE, CA 92056-4559
Phone: (760) 724-5352
Fax: (760) 724-5447

After Hours Phone: (760)
724-5352

Provider Gender: Female
License number: A60211
NPI: 1568471092

Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, French, Spanish

Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas, Tri
City Medical Ctr

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

Ⓜ Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

WAKILY, HUSSNA

Provider ID: 252975
Board Certified Specialty: Yes
HEALTH EXCEL IPA INC
3601 VISTA WAY STE 203
OCEANSIDE, CA 92056-4559
Phone: (760) 724-5352

Fax: (760) 724-5447
After Hours Phone: (760)
724-5352

Provider Gender: Female
License number: 274783
NPI: 1811155765

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Scripps
Memorial Hospital Encinitas, Tri
City Medical Ctr

Medi-Cal Open Panel: Yes
Min/Max Age: 18/200
American Sign Language (ASL):
No

Ⓜ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

WAKILY, HUSSNA

Provider ID: 252975
Board Certified Specialty: Yes
HEALTH EXCEL IPA INC
3601 VISTA WAY STE 203
OCEANSIDE, CA 92056-4559
Phone: (760) 724-5352

Fax: (760) 724-5447
After Hours Phone: (760)
724-5352

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Female
License number: C156789
NPI: 1811155765
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Tri City Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/200
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

SURGERY HAND

SEIDEN, GRANT G
Provider ID: 284412
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 3905 WARING RD
 OCEANSIDE, CA 92056-4405
Phone: (760) 724-9000
Fax: (760) 724-3686
After Hours Phone: (760) 724-9000
Provider Gender: Male
License number: A142455
NPI: 1992025407
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Tri City Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: 0/999
American Sign Language (ASL):

No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

SURGERY NEUROLOGICAL

NGUYEN, ANDREW D
Provider ID: 244138
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4002 VISTA WAY
 OCEANSIDE, CA 92056-4506
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A91563
NPI: 1720216542
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish, Vietnamese
Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus, Ucsd Medical Ctr, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

TUNG, HOWARD
Provider ID: 244084
Board Certified Specialty: No

UCSD MEDICAL GROUP
 4002 VISTA WAY
 OCEANSIDE, CA 92056-4506
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: G58235
NPI: 1538153341
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Rady Childrens Hospital San Diego, Scripps Green Hospital, Tri City Medical Ctr, Paradise Valley Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

YOO, FRANK K, MD
Provider ID: 257373
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 3998 VISTA WAY STE 108
 OCEANSIDE, CA 92056-4515
Phone: (858) 909-9033
Fax: (858) 429-4009
After Hours Phone: (858) 909-9033
Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: G86513
NPI: 1295774545
Provider English Spoken: Yes
Provider Language(s) Spoken: Korean, Spanish, Telugu, Vietnamese
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas, Tri City Medical Ctr, Palomar Health Downtown Campus, Pomerado Hospital, Alvarado Hospital Llc, Paradise Valley Hospital, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

SURGERY ORTHOPEDIC

CIDAMBI, EMILY O

Provider ID: 246469
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565
Phone: (858) 966-6789
Fax: (858) 966-8519
After Hours Phone: (858) 966-6789
Provider Gender: Female

License number: A127390
NPI: 1659634699
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

KANE, NORMAN

Provider ID: 284474
Board Certified Specialty: No
HEALTH EXCEL IPA INC
3905 WARING RD
OCEANSIDE, CA 92056-4405
Phone: (760) 724-9000
Fax: (760) 724-3686
After Hours Phone: (760) 724-9000
Provider Gender: Male
License number: A33041
NPI: 1588625982
Provider English Spoken: Yes
Provider Language(s) Spoken: Afrikaans
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Tri City Medical Ctr, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: No
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

MEINEKE, RYAN C

Provider ID: 284404
Board Certified Specialty: No
HEALTH EXCEL IPA INC
3905 WARING RD
OCEANSIDE, CA 92056-4405
Phone: (760) 724-9000
Fax: (760) 724-3686
After Hours Phone: (760) 724-9000
Provider Gender: Male
License number: A101056
NPI: 1851579015
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: No
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

SURGERY PEDIATRIC

FAIRBANKS, TIMOTHY J

Provider ID: 205498
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (760) 547-1020
 Fax: (760) 547-1021
 After Hours Phone: (760) 547-1020
 Provider Gender: Male
 License number: A80244
 NPI: 1407010556
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Sharp Memorial Hospital, Scripps Memorial Hospital, Childrens Hosp And Resrch Ctr At Oakland
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility: Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

KLING, KAREN M
 Provider ID: 206129
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3605 VISTA WAY STE 172
 OCEANSIDE, CA 92056-4565
 Phone: (760) 547-1020
 Fax: (760) 547-1021
 After Hours Phone: (760) 547-1020
 Provider Gender: Female
 License number: A53583
 NPI: 1982775144
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Sharp Mary Birch Hosp For Women And Newborns, National Naval Med Ctr, Sharp Memorial Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility: Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

UROLOGY

CHIANG, GEORGE
 Provider ID: 205944
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3605 VISTA WAY STE 172
 OCEANSIDE, CA 92056-4565
 Phone: (760) 547-1020
 Fax: (760) 547-1021
 After Hours Phone: (760) 547-1020
 Provider Gender: Male
 License number: A98687
 NPI: 1093773954
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Doctors Hospital Of Riverside Llc
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No

Accessibility: Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

FRASIER, BRADLEY L
 Provider ID: 244526
 Board Certified Specialty: Yes
 HEALTH EXCEL IPA INC
 3609 VISTA WAY
 OCEANSIDE, CA 92056-4522
 Phone: (760) 637-2500
 Fax: (760) 637-2501
 After Hours Phone: (760) 637-2500

Provider Gender: Male
 License number: G56768
 NPI: 1013932045
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Tri City Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 10/105
 American Sign Language (ASL): No
 Accessibility: Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Health Excel Ipa Inc

GUERENA, MICHAEL P
 Provider ID: 244572
 Board Certified Specialty: Yes
 HEALTH EXCEL IPA INC
 3609 VISTA WAY
 OCEANSIDE, CA 92056-4522

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D. Directorio de proveedores de atención especializada

Phone: (760) 637-2500
Fax: (760) 637-2501
After Hours Phone: (760) 637-2500
Provider Gender: Male
License number: G80926
NPI: 1841222171
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

MARIETTI SHEPHERD, SARAH R

Provider ID: 265121
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760) 547-1020
Provider Gender: Female
License number: A106447
NPI: 1801094115
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Childrens Hosp And Resrch Ctr At

Oakland, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

VILCHIS, CAROLINE J

Provider ID: 244551
Board Certified Specialty: No
HEALTH EXCEL IPA INC
3609 VISTA WAY
OCEANSIDE, CA 92056-4522
Phone: (760) 637-2500
Fax: (760) 637-2501
After Hours Phone: (760) 637-2500
Provider Gender: Female
License number: A104518
NPI: 1083810410
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 18/100
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

POWAY

CERTIFIED NURSE PRACTITIONER

APPELBAUM, GITA

Provider ID: 285558
Board Certified Specialty: No
HEALTH EXCEL IPA INC
15564 POMERADO RD # 100
POWAY, CA 92064
Phone: (858) 485-5111
Fax: (858) 485-6747
After Hours Phone: (858) 485-5111
Provider Gender: Female
License number: NP19632
NPI: 1467711903
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

PODIATRIST

NEGRON, RICARDO J , MD

Provider ID: 274645
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
13010 POWAY RD
POWAY, CA 92064

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 218-3000
Fax: (858) 633-4688
After Hours Phone: (858) 218-3000
Provider Gender: Male
License number: DPM5260
NPI: 1932548393
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Providence St Joseph Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

POWAY

ANESTHESIOLOGY PAIN MANAGEMENT

COHEN, ZACHARY C , MD
Provider ID: 268179
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
15611 POMERADO RD STE 505
POWAY, CA 92064-2437
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760) 631-3000
Provider Gender: Male
License number: A146733
NPI: 1598021982
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No

Hospital Affiliation: Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

FISHER, CASEY J
Provider ID: 204416
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
15725 POMERADO RD STE 218
POWAY, CA 92064-2060
Phone: (619) 825-8511
Fax:
After Hours Phone: (619) 825-8511

Provider Gender: Male
License number: A118592
NPI: 1275780686
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Sharp Memorial Hospital, Scripps Mercy Hospital, Pomerado Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,

Health Excel Ipa Inc
VERDOLIN, MICHAEL H , MD
Provider ID: 203330
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
15725 POMERADO RD STE 218
POWAY, CA 92064-2060
Phone: (619) 825-8511
Fax:

After Hours Phone: (619) 825-8511
Provider Gender: Male
License number: A92149
NPI: 1477525657
Provider English Spoken: Yes
Provider Language(s) Spoken: Italian, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Sharp Chula Vista Med Ctr, Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc

ANESTHESIOLOGY

PRASAD, RUPA S
Provider ID: 283630
Board Certified Specialty: No
HEALTH EXCEL IPA INC
15611 POMERADO RD STE 505
POWAY, CA 92064-2437

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D. Directorio de proveedores de atención especializada

Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760) 631-3000
Provider Gender: Female
License number: A152691
NPI: 1689037384
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Palomar Medical Center, Tri City Medical Ctr, Scripps Memorial Hospital Encinitas, Sharp Memorial Hospital, Scripps Green Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

CARDIOLOGY

ACHEATEL, ROGER J , MD
Provider ID: 272330
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
15611 POMERADO RD STE 580
POWAY, CA 92064-2438
Phone: (858) 592-2696
Fax: (858) 592-0627
After Hours Phone: (858) 592-2696
Provider Gender: Male
License number: G45947
NPI: 1730182619
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Pomerado Hospital, Palomar Medical Center, Palomar Health Downtown Campus
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

BALOUCHE, MARYAM
Provider ID: 269384
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
15615 POMERADO RD
POWAY, CA 92064-2405
Phone: (760) 743-0546
Fax:
After Hours Phone: (760) 743-0546
Provider Gender: Female
License number: A121988
NPI: 1215201108
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi
Cultural Competency: No
Hospital Affiliation: Pomerado Hospital, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

BAYAT, HAMED, MD
Provider ID: 269450
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
15611 POMERADO RD STE 400
POWAY, CA 92064-2437
Phone: (858) 592-2696
Fax: (760) 743-8837
After Hours Phone: (858) 592-2696
Provider Gender: Male
License number: A61356
NPI: 1356344196
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi
Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus, Pomerado Hospital, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc

CHEN, ANDREW K , MD
Provider ID: 269315
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
15611 POMERADO RD STE 400
POWAY, CA 92064-2437
Phone: (858) 592-2696
Fax: (760) 743-8837
After Hours Phone: (858) 592-2696

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D. Directorio de proveedores de atención especializada

Provider Gender: Male
License number: A120866
NPI: 1134357007
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Green Hospital, Palomar Health
Downtown Campus, Pomerado
Hospital, Palomar Medical
Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MULVIHILL, DANIEL F , MD
Provider ID: 54301
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
15611 POMERADO RD STE 580
POWAY, CA 92064-2438
Phone: (858) 592-2696
Fax: (858) 592-0627
After Hours Phone: (858)
592-2696
Provider Gender: Male
License number: G55384
NPI: 1124021969
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Pomerado
Hospital, Palomar Medical
Center
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):

No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SERRY, ROD D , MD
Provider ID: 269471
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
15611 POMERADO RD STE 400
POWAY, CA 92064-2437
Phone: (858) 675-3100
Fax:
After Hours Phone: (858)
675-3100
Provider Gender: Male
License number: A76061
NPI: 1912945130
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Portuguese, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

**VANICHSARN, CHRISTOPHER
T , MD**
Provider ID: 274775
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
15611 POMERADO RD STE 400
POWAY, CA 92064-2437

Phone: (858) 592-2696
Fax: (858) 592-0627
After Hours Phone: (858)
592-2696
Provider Gender: Male
License number: A129210
NPI: 1851658173
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

CARDIOVASCULAR DISEASE

ZAKOV, KAMEN N , MD
Provider ID: 122539
Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC
15611 POMERADO RD STE 400
POWAY, CA 92064-2437
Phone: (858) 592-2696
Fax: (760) 743-8837
After Hours Phone: (858)
592-2696
Provider Gender: Male
License number: G31706
NPI: 1518933613
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Pomerado
Hospital, Palomar Medical
Center
Medi-Cal Open Panel: Yes
Min/Max Age: None

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

CERTIFIED BEHAVIORAL ANALYST MASTERS

MASON, DIANA

Provider ID: 118103
Board Certified Specialty: No
INCLUDE AUTISM INC
15318 POMERADO RD
POWAY, CA 92064-2436
Phone: (858) 603-5840
Fax: (619) 432-0048
After Hours Phone: (858) 603-5840
Provider Gender: Female
License number: BCBA23279
NPI: 1285172858
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SALUCCI, CRISTIANA

Provider ID: 107369
Board Certified Specialty: No
INCLUDE AUTISM INC
15318 POMERADO RD

POWAY, CA 92064-2436
Phone: (858) 603-9835
Fax: (619) 432-0048
After Hours Phone: (858) 603-9835
Provider Gender: Female
License number: BCBA11621760
NPI: 1093199671
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CERTIFIED NURSE PRACTITIONER

BISHOP, LESLIE A , NPA

Provider ID: 243218
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
15611 POMERADO RD STE 505
POWAY, CA 92064-2437
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760) 631-3000
Provider Gender: Female
License number: NP95010047
NPI: 1669941878
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Pomerado Hospital, Tri City Medical Ctr, Palomar Medical Center, Scripps

Memorial Hospital Encinitas
Medi-Cal Open Panel: No
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

BISHOP, LESLIE A

Provider ID: 252887
Board Certified Specialty: No
HEALTH EXCEL IPA INC
15611 POMERADO RD STE 505
POWAY, CA 92064-2437
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760) 631-3000
Provider Gender: Female
License number: NP95010047
NPI: 1669941878
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/110
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

MCCONNIN, COMMERINA T

Provider ID: 280943
Board Certified Specialty: No

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D. Directorio de proveedores de atención especializada

RADY CHILDRENS HEALTH NETWORK

15615 POMERADO RD
POWAY, CA 92064-2405

Phone: (858) 613-4143

Fax: (858) 613-4539

After Hours Phone: (858)

613-4143

Provider Gender: Female

License number: NP7195

NPI: 1154653459

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

MCELHOSE, JESSICA J

Provider ID: 281020

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

15615 POMERADO RD
POWAY, CA 92064-2405

Phone: (858) 613-4143

Fax: (858) 613-4539

After Hours Phone: (858)

613-4143

Provider Gender: Female

License number: NP95012326

NPI: 1013196310

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

MEYERS, JUDITH S , NPA

Provider ID: 257040

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

15611 POMERADO RD STE 400

POWAY, CA 92064-2437

Phone: (858) 675-3100

Fax:

After Hours Phone: (858)

675-3100

Provider Gender: Female

License number: NP95010314

NPI: 1538637194

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

NINCHAK, VIOLA M

Provider ID: 285897

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

15611 POMERADO RD STE 505

POWAY, CA 92064-2437

Phone: (760) 631-3000

Fax: (760) 631-3017

After Hours Phone: (760)

631-3000

Provider Gender: Female

License number: NP95010549

NPI: 1275007403

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

TRAVERS, NAOMI J

Provider ID: 242463

Board Certified Specialty: No

HEALTH EXCEL IPA INC

15725 POMERADO RD STE 102

POWAY, CA 92064-2057

Phone: (858) 397-5755

Fax: (858) 900-3698

After Hours Phone: (858)

397-5755

Provider Gender: Female

License number: NP12905

NPI: 1639550833

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

WOLFE, AMANDA S

Provider ID: 243582
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 15525 POMERADO RD STE B1
 POWAY, CA 92064-2425
Phone: (858) 457-8333
Fax:
After Hours Phone: (858)
 457-8333
Provider Gender: Female
License number: NP23837
NPI: 1063813475

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No

☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

WRIGHT, KIMBERLY D , NPA

Provider ID: 256378
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 15611 POMERADO RD STE 400
 POWAY, CA 92064-2437

Phone: (858) 675-3200
Fax:
After Hours Phone: (858)
 675-3200
Provider Gender: Female
License number: NP95006947
NPI: 1811400708
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

DERMATOLOGY

ARMSTRONG, PATRICK A , MD

Provider ID: 269732
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 15611 POMERADO RD STE 400
 POWAY, CA 92064-2437
Phone: (858) 675-3145
Fax: (858) 385-7855
After Hours Phone: (858)
 675-3145
Provider Gender: Male
License number: A137103
NPI: 1588008775
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Providence
 Mission Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

CALAME, ANTOANELLA

Provider ID: 109343
Board Certified Specialty: No
COMPASS DERMATOPATHOLOGY INC
 15725 POMERADO RD STE 102
 POWAY, CA 92064-2057
Phone: (858) 397-5755
Fax:
After Hours Phone: (858)
 397-5755
Provider Gender: Female
License number: A84455
NPI: 1285817569

Provider English Spoken: Yes
Provider Language(s) Spoken:
 Romanian
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital, Scripps
 Mercy Hospital, Scripps Mercy
 Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No

☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

CALAME, ANTOANELLA

Provider ID: 208891
Board Certified Specialty: No

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

HEALTH EXCEL IPA INC
15725 POMERADO RD STE 102
POWAY, CA 92064-2057
Phone: (858) 397-5755
Fax: (858) 500-3698
After Hours Phone: (858)
397-5755
Provider Gender: Female
License number: A84455
NPI: 1285817569
Provider English Spoken: Yes
Provider Language(s) Spoken:
Romanian
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Scripps
Mercy Hospital, Scripps Mercy
Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

JOU, PAUL C , MD
Provider ID: 269479
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
15611 POMERADO RD STE 400
POWAY, CA 92064-2437
Phone: (858) 675-3145
Fax: (858) 385-7855
After Hours Phone: (858)
675-3145
Provider Gender: Male
License number: A148966
NPI: 1356608319
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SHEWMAKE, STEPHEN W , MD
Provider ID: 88451
Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC
15611 POMERADO RD STE 400
POWAY, CA 92064-2437
Phone: (858) 675-3140
Fax: (858) 385-7855
After Hours Phone: (858)
675-3140
Provider Gender: Male
License number: G36481
NPI: 1912973868
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

UEBELHOER, NATHAN S
Provider ID: 128022
Board Certified Specialty: No
HEALTH EXCEL IPA INC
15725 POMERADO RD STE 102

POWAY, CA 92064-2057
Phone: (858) 397-5755
Fax: (858) 500-3698
After Hours Phone: (858)
397-5755
Provider Gender: Male
License number: 20A9328
NPI: 1659344513
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Naval Medical
Ctr Sd Rbe
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

FAMILY PRACTICE

FLINN, SCOTT D , MD
Provider ID: 270054
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
15611 POMERADO RD STE 400
POWAY, CA 92064-2437
Phone: (858) 675-3200
Fax: (858) 613-2938
After Hours Phone: (858)
675-3200
Provider Gender: Male
License number: G68423
NPI: 1184694598
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Pomerado Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MAGAT, PATROCINIA A

Provider ID: 279684
Board Certified Specialty: No
HEALTH EXCEL IPA INC
15644 POMERADO RD STE 100
POWAY, CA 92064-2419
Phone: (858) 485-5111
Fax: (858) 485-6747
After Hours Phone: (858) 485-5111
Provider Gender: Female
License number: A37781
NPI: 1417028663
Provider English Spoken: Yes
Provider Language(s) Spoken: Chinese, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Pomerado Hospital
Medi-Cal Open Panel: No
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

NAJAND, SADAF, MD

Provider ID: 270055

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
15611 POMERADO RD STE 400
POWAY, CA 92064-2437
Phone: (858) 675-3200
Fax: (858) 613-2938
After Hours Phone: (858) 675-3200
Provider Gender: Female
License number: A124150
NPI: 1669769717
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

WELLS, TODD D , MD

Provider ID: 129348
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
15611 POMERADO RD STE 400
POWAY, CA 92064-2437
Phone: (858) 675-3200
Fax: (858) 613-2938
After Hours Phone: (858) 675-3200
Provider Gender: Male
License number: A71920
NPI: 1952377806
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Pomerado Hospital

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

WHITE, KERI L , MD

Provider ID: 269491
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
15611 POMERADO RD STE 400
POWAY, CA 92064-2437
Phone: (858) 675-3200
Fax: (858) 613-2938
After Hours Phone: (858) 675-3200
Provider Gender: Female
License number: A73336
NPI: 1295701159
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

GASTROENTEROLOGY

ZAKKO, MARAM F , MD

Provider ID: 270028
Board Certified Specialty: No

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

COMMUNITY CARE IPA LLC
 15611 POMERADO RD STE 400
 POWAY, CA 92064-2437
 Phone: (858) 675-3150
 Fax: (858) 613-2941
 After Hours Phone: (858)
 675-3150
 Provider Gender: Male
 License number: A64346
 NPI: 1972579068
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Armenian, Chinese, Spanish
 Cultural Competency: No
 Hospital Affiliation: Palomar
 Health Downtown Campus,
 Pomerado Hospital, Palomar
 Medical Center
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility: P, EB, IB, E, R,
 W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

INTERNAL MEDICINE CRITICAL CARE MEDICINE

HIRSCH, GREGORY L , MD
 Provider ID: 53775
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 15611 POMERADO RD STE 400
 POWAY, CA 92064-2437
 Phone: (858) 675-3100
 Fax:
 After Hours Phone: (858)
 675-3100
 Provider Gender: Male
 License number: G40467

NPI: 1639287071
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Palomar
 Health Downtown Campus,
 Palomar Medical Center,
 Pomerado Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: P, EB, IB, E, R
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

INTERNAL MEDICINE GERIATRIC MEDICINE

SCHWARTZ, MARTIN A , MD
 Provider ID: 122531
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 15611 POMERADO RD STE 400
 POWAY, CA 92064-2437
 Phone: (858) 675-3135
 Fax: (858) 726-6081
 After Hours Phone: (858)
 675-3135
 Provider Gender: Male
 License number: G39185
 NPI: 1861606790
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Pomerado
 Hospital, Palomar Medical
 Center
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):

No
 Accessibility: P, EB, IB, E, R
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

INTERNAL MEDICINE

GREENSTEIN, JOSHUA K
 Provider ID: 113528
 Board Certified Specialty: No
 BALBOA NEPHROLOGY MED
 GRP INC
 15708 POMERADO RD # N-205
 POWAY, CA 92064-2066
 Phone: (760) 294-1660
 Fax:
 After Hours Phone: (760)
 294-1660
 Provider Gender: Male
 License number: A68100
 NPI: 1104881457
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: W
 Hours: M-F 9AM-5PM, SA
 9AM-5PM
 Website: www.bnmg.org
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc, Imperial
 Health Holdings Medical
 Group-Sd

REDDY, SMITHA C

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider ID: 212773
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 15725 POMERADO RD STE 117
 POWAY, CA 92064-2058
Phone: (858) 312-1717
Fax: (858) 435-0207
After Hours Phone: (858)
 312-1717

Provider Gender: Female
License number: A85072
NPI: 1750534715
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Hindi, Kannada, Telugu
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital, Pomerado Hospital,
 Scripps Mercy Hospital Chula
 Vista, Palomar Health Downtown
 Campus, Scripps Memorial
 Hospital, Scripps Green Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999

American Sign Language (ASL):
 No

♻️ *Accessibility:*
Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc

THAPER, MOHINDERPAL S , MD

Provider ID: 270016
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 15611 POMERADO RD STE 575
 POWAY, CA 92064-2438
Phone: (858) 675-3135
Fax: (858) 726-6050
After Hours Phone: (858)
 675-3135

Provider Gender: Male
License number: A106869
NPI: 1295795037

Provider English Spoken: Yes
Provider Language(s) Spoken:
 Hindi, Punjabi

Cultural Competency: No
Hospital Affiliation: Palomar
 Health Downtown Campus,
 Pomerado Hospital, Palomar
 Medical Center

Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
 No

♻️ *Accessibility:*
Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

TRESTMAN, KENNETH G , MD

Provider ID: 269146
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 15611 POMERADO RD STE 400
 POWAY, CA 92064-2437
Phone: (858) 675-3100

Fax:

After Hours Phone: (858)
 675-3100

Provider Gender: Male
License number: G69663
NPI: 1346358793

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

Cultural Competency: No
Hospital Affiliation: Palomar
 Health Downtown Campus,
 Palomar Medical Center

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL):

No

♻️ *Accessibility:* P, EB, IB, E, R
Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

NEONATAL / PERINATAL MEDICINE

FATAYERJI, NABIL I

Provider ID: 205749
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK

15615 POMERADO RD
 POWAY, CA 92064-2405

Phone: (858) 613-4143

Fax: (858) 613-4539

After Hours Phone: (858)
 613-4143

Provider Gender: Male

License number: A63224

NPI: 1649341405

Provider English Spoken: Yes

Provider Language(s) Spoken:
 Arabic

Cultural Competency: No

Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Palomar Health Downtown
 Campus, Pomerado Hospital,
 Southwest Healthcare System

Wildomar, Southwest Healthcare
 System Murrieta, Palomar

Medical Center, Scripps
 Memorial Hospital, Scripps

Mercy Hospital, Scripps Mercy
 Hospital Chula Vista, Scripps

Memorial Hospital Encinitas

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Rady Childrens Health Network</p>	<p>Network</p> <p>SAUER, CHARLES W <i>Provider ID:</i> 206164 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 15615 POMERADO RD POWAY, CA 92064-2405 <i>Phone:</i> (858) 613-4143 <i>Fax:</i> (858) 613-4539 <i>After Hours Phone:</i> (858) 613-4143 <i>Provider Gender:</i> Male <i>License number:</i> 20A9535 <i>NPI:</i> 1538388988 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Scripps Memorial Hospital Encinitas, Palomar Medical Center, Scripps Mercy Hospital Chula Vista, Pomerado Hospital, Scripps Memorial Hospital, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/0 <i>American Sign Language (ASL):</i> No</p>	<p><i>Board Certified Specialty:</i> No BALBOA NEPHROLOGY MED GRP INC 15708 POMERADO RD # N-205 POWAY, CA 92064-2066 <i>Phone:</i> (858) 558-8150 <i>Fax:</i> (858) 485-8703 <i>After Hours Phone:</i> (858) 558-8150 <i>Provider Gender:</i> Male <i>License number:</i> A52055 <i>NPI:</i> 1437154143 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Afrikaans, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Memorial Hospital, Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No</p>
<p>GOLEMBESKI, DAVID J <i>Provider ID:</i> 205891 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 15615 POMERADO RD POWAY, CA 92064-2405 <i>Phone:</i> (858) 613-4143 <i>Fax:</i> (858) 613-4539 <i>After Hours Phone:</i> (858) 613-4143 <i>Provider Gender:</i> Male <i>License number:</i> G63111 <i>NPI:</i> 1376614131 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Palomar Health Downtown Campus, Scripps Memorial Hospital Encinitas, Pomerado Hospital, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Palomar Medical Center, Scripps Memorial Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No</p>	<p>♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>	<p>BOISKIN, MARK M <i>Provider ID:</i> 40763 <i>Board Certified Specialty:</i> No BALBOA NEPHROLOGY MED GRP INC 15708 POMERADO RD # N-205 POWAY, CA 92064-2066 <i>Phone:</i> (760) 294-1660 <i>Fax:</i> <i>After Hours Phone:</i> (760) 294-1660</p>
<p>♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Rady Childrens Health Network</p>	<p style="text-align: center;">NEPHROLOGY</p> <p>BOISKIN, MARK M <i>Provider ID:</i> 40763</p>	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Male
License number: A52055
NPI: 1437154143
Provider English Spoken: Yes
Provider Language(s) Spoken: Afrikaans, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas, Sharp Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 9AM-5PM, SA 9AM-5PM
Website: www.bnmg.org
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

GREENSTEIN, JOSHUA K

Provider ID: 262223
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
15708 POMERADO RD # N-205
POWAY, CA 92064-2066
Phone: (760) 294-1660
Fax: (760) 745-5016
After Hours Phone: (760) 294-1660
Provider Gender: Male
License number: A68100
NPI: 1104881457
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

SHAPIRO, MARK H

Provider ID: 113537
Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC
15708 POMERADO RD # N-205
POWAY, CA 92064-2066
Phone: (760) 294-1660
Fax:
After Hours Phone: (760) 294-1660
Provider Gender: Male
License number: G65280
NPI: 1912962275
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Swahili
Cultural Competency: No
Hospital Affiliation: Palomar Medical Center, Tri City Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 9AM-5PM, SA 9AM-5PM
Website: www.bnmg.org
Email:
Medical Group(s):

IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

SHAPIRO, MARK H

Provider ID: 262183
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
15708 POMERADO RD # N-205
POWAY, CA 92064-2066
Phone: (760) 294-1660
Fax: (760) 745-5016
After Hours Phone: (760) 294-1660
Provider Gender: Male
License number: G65280
NPI: 1912962275
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Swahili
Cultural Competency: No
Hospital Affiliation: Palomar Medical Center
Medi-Cal Open Panel: No
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

NEUROLOGY

BLUMENFELD, ANDREW M , MD

Provider ID: 268086
Board Certified Specialty: No

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D. Directorio de proveedores de atención especializada

<p>COMMUNITY CARE IPA LLC 15611 POMERADO RD STE 505 POWAY, CA 92064-2437 Phone: (760) 631-3000 Fax: (760) 631-3016 After Hours Phone: (760) 631-3000 Provider Gender: Male License number: A47863 NPI: 1164459913 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Memorial Hospital Encinitas Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Ⓜ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Health Excel Ipa Inc</p>	<p>Hospital Affiliation: Scripps Memorial Hospital Encinitas Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Ⓜ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Health Excel Ipa Inc</p>	<p>IPA: Community Care Ipa Llc, Health Excel Ipa Inc</p>
<p>BLUMENFELD, ANDREW M Provider ID: 277678 Board Certified Specialty: No HEALTH EXCEL IPA INC 15611 POMERADO RD STE 505 POWAY, CA 92064-2437 Phone: (760) 631-3000 Fax: (760) 631-3016 After Hours Phone: (760) 631-3000 Provider Gender: Male License number: A47863 NPI: 1164459913 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No</p>	<p>DELANEY, MICHAEL W Provider ID: 252866 Board Certified Specialty: No HEALTH EXCEL IPA INC 15611 POMERADO RD STE 505 POWAY, CA 92064-2437 Phone: (760) 631-3000 Fax: (760) 631-3016 After Hours Phone: (760) 631-3000 Provider Gender: Male License number: C146015 NPI: 1710157920 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Palomar Medical Center, Pomerado Hospital, Scripps Memorial Hospital Encinitas, Tri City Medical Ctr Medi-Cal Open Panel: Yes Min/Max Age: 18/110 American Sign Language (ASL): No Ⓜ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s):</p>	<p>DELANEY, MICHAEL W , MD Provider ID: 269105 Board Certified Specialty: No COMMUNITY CARE IPA LLC 15721 POMERADO RD POWAY, CA 92064-2021 Phone: (760) 631-3000 Fax: After Hours Phone: (760) 631-3000 Provider Gender: Male License number: C146015 NPI: 1710157920 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Palomar Medical Center, Pomerado Hospital, Scripps Memorial Hospital Encinitas, Tri City Medical Ctr Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Ⓜ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Health Excel Ipa Inc</p>
	<p>DELANEY, MICHAEL W , MD Provider ID: 272331 Board Certified Specialty: No COMMUNITY CARE IPA LLC 15611 POMERADO RD STE 505 POWAY, CA 92064-2437</p>	

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D. Directorio de proveedores de atención especializada

Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760) 631-3000
Provider Gender: Male
License number: C146015
NPI: 1710157920
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Palomar Medical Center, Pomerado Hospital, Scripps Memorial Hospital Encinitas, Tri City Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/200
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

HO, GILBERT J
Provider ID: 212731
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 15644 POMERADO RD STE 401
 POWAY, CA 92064-2418
Phone: (858) 674-1289
Fax: (858) 726-6221
After Hours Phone: (858) 674-1289
Provider Gender: Male
License number: A55117
NPI: 1851320600
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Taiwanese
Cultural Competency: No

Hospital Affiliation: Palomar Health Downtown Campus, Pomerado Hospital, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

WANG, ANCHI
Provider ID: 257234
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 15611 POMERADO RD STE 505
 POWAY, CA 92064-2437
Phone: (760) 630-3000
Fax: (760) 631-3016
After Hours Phone: (760) 630-3000
Provider Gender: Female
License number: A79381
NPI: 1093744542
Provider English Spoken: Yes
Provider Language(s) Spoken: Mandarin, Spanish
Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus, Scripps Memorial Hospital Encinitas, Tri City Medical Ctr, Pomerado Hospital, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

WANG, CHUNYANG T
Provider ID: 253008
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 15611 POMERADO RD STE 505
 POWAY, CA 92064-2437
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760) 631-3000
Provider Gender: Female
License number: A105660
NPI: 1386890770
Provider English Spoken: Yes
Provider Language(s) Spoken: Mandarin, Spanish
Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus, Scripps Memorial Hospital Encinitas, Tri City Medical Ctr, Pomerado Hospital, Scripps Memorial Hospital, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

WANG, CHUNYANG T , MD
Provider ID: 268120
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

15611 POMERADO RD STE 505
POWAY, CA 92064-2437
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760) 631-3000
Provider Gender: Female
License number: A105660
NPI: 1386890770
Provider English Spoken: Yes
Provider Language(s) Spoken: Mandarin, Spanish
Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus, Scripps Memorial Hospital Encinitas, Tri City Medical Ctr, Pomerado Hospital, Scripps Memorial Hospital, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility: Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

OBSTETRICS / GYNECOLOGY

COBB, DAMON C

Provider ID: 206030
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
15706 POMERADO RD STE 110
POWAY, CA 92064-2032
Phone: (858) 485-0130
Fax: (858) 485-9424
After Hours Phone: (858) 485-0130

Provider Gender: Male
License number: 20A11368
NPI: 1851435598
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Pomerado Hospital, Scripps Memorial Hospital, Grossmont Hospital, Palomar Health Downtown Campus, Sharp Memorial Hospital, Palomar Medical Center, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
♿ Accessibility: Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

LOZIER, JEFFREY R , MD

Provider ID: 270187
Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC
15611 POMERADO RD STE 400
POWAY, CA 92064-2437
Phone: (858) 675-3140
Fax: (858) 613-2936
After Hours Phone: (858) 675-3140
Provider Gender: Male
License number: G54719
NPI: 1225004450
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Pomerado Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

OTOLARYNGOLOGY

FITZGERALD, PATRICK J , MD

Provider ID: 70742
Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC
15525 POMERADO RD STE C1
POWAY, CA 92064-2425
Phone: (858) 485-7870
Fax: (858) 485-6473
After Hours Phone: (858) 485-7870
Provider Gender: Male
License number: G80210
NPI: 1790882728
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Pomerado Hospital, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

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D. Directorio de proveedores de atención especializada

LEARN, ALISON A , MD

Provider ID: 70715
Board Certified Specialty: Yes
 COMMUNITY CARE IPA LLC
 15525 POMERADO RD STE C1
 POWAY, CA 92064-2425
Phone: (858) 485-7870
Fax: (858) 485-6473
After Hours Phone: (858) 485-7870
Provider Gender: Female
License number: G78450
NPI: 1477650406
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

NPI: 1649341405
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Arabic
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Pomerado Hospital, Southwest
 Healthcare System Wildomar,
 Southwest Healthcare System
 Murrieta, Palomar Medical
 Center, Scripps Memorial
 Hospital, Scripps Mercy Hospital,
 Scripps Mercy Hospital Chula
 Vista, Scripps Memorial Hospital
 Encinitas, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Scripps Memorial Hospital
 Encinitas, Pomerado Hospital,
 Southwest Healthcare System
 Wildomar, Southwest Healthcare
 System Murrieta, Palomar
 Medical Center, Scripps
 Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

SAUER, CHARLES W

Provider ID: 52545
Board Certified Specialty: No
 RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDTN
 15615 POMERADO RD
 POWAY, CA 92064-2405
Phone: (858) 613-4143
Fax: (858) 613-4539
After Hours Phone: (858)
 613-4143
Provider Gender: Male
License number: 20A9535
NPI: 1538388988
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Scripps Memorial Hospital
 Encinitas, Palomar Medical
 Center, Scripps Mercy Hospital

PEDIATRICS

FATAYERJI, NABIL I

Provider ID: 52509
Board Certified Specialty: No
 RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDTN
 15615 POMERADO RD
 POWAY, CA 92064-2405
Phone: (858) 613-4143
Fax:
After Hours Phone: (858)
 613-4143
Provider Gender: Male
License number: A63224

GOLEMBESKI, DAVID J

Provider ID: 52531
Board Certified Specialty: No
 RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDTN
 15615 POMERADO RD
 POWAY, CA 92064-2405
Phone: (858) 613-4143
Fax:
After Hours Phone: (858)
 613-4143
Provider Gender: Male
License number: G63111
NPI: 1376614131
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Chula Vista, Pomerado Hospital,
Scripps Memorial Hospital,
Southwest Healthcare System
Wildomar, Southwest Healthcare
System Murrieta
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

PHYSICAL MEDICINE / REHABILITATION

BULLOCK, ANDREW C

Provider ID: 257589
Board Certified Specialty: No
BLUE SHIELD PROMISE
HEALTH PLAN DIRECT
15644 POMERADO RD STE 204
POWAY, CA 92064-2419
Phone: (619) 379-6579
Fax: (619) 501-3846
After Hours Phone: (619)
379-6579
Provider Gender: Male
License number: 20A6842
NPI: 1295743045
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Fataleka, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:* W

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health
Plan Direct, Community Care Ipa
Llc

BULLOCK, ANDREW C

Provider ID: 268442
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
15644 POMERADO RD STE 204
POWAY, CA 92064-2419
Phone: (619) 379-6579
Fax: (619) 501-3846
After Hours Phone: (619)
379-6579
Provider Gender: Male
License number: 20A6842
NPI: 1295743045

Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Fataleka, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Blue Shield Promise Health
Plan Direct, Community Care Ipa
Llc

FISHER, CASEY J

Provider ID: 244864
Board Certified Specialty: No
HEALTH EXCEL IPA INC
15725 POMERADO RD STE 210

POWAY, CA 92064-2059
Phone: (619) 825-8511
Fax: (619) 726-6291
After Hours Phone: (619)
825-8511
Provider Gender: Male
License number: A118592
NPI: 1275780686
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital Chula Vista, Scripps
Memorial Hospital Encinitas,
Sharp Memorial Hospital, Scripps
Mercy Hospital, Pomerado
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

PHYSICIANS ASSISTANT

CHATFIELD, ALEXANDRA J

Provider ID: 276715
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
15611 POMERADO RD STE 525
POWAY, CA 92064-2439
Phone: (858) 485-0050
Fax: (858) 673-5187
After Hours Phone: (858)
485-0050
Provider Gender: Female
License number: PA57107
NPI: 1215584628
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

GRINDLE, SILVIA S

Provider ID: 265291
Board Certified Specialty: No
HEALTH EXCEL IPA INC
13525 MIDLAND RD STE F
POWAY, CA 92064-4772
Phone: (858) 486-9100
Fax: (858) 486-9101
After Hours Phone: (858)
486-9100
Provider Gender: Female
License number: PA21499
NPI: 1598056392
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 16/99
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

GRINDLE, SILVIA S

Provider ID: 269926
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
13525 MIDLAND RD STE F
POWAY, CA 92064-4772
Phone: (858) 486-9100
Fax: (858) 486-9101
After Hours Phone: (858)
486-9100
Provider Gender: Female
License number: PA21499
NPI: 1598056392
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

HUANG, STEPHANIE K , NPA
Provider ID: 268025
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
15611 POMERADO RD STE 505
POWAY, CA 92064-2437
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760)
631-3000
Provider Gender: Female
License number: PA21008
NPI: 1073826210
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

HUANG, STEPHANIE K , NPA

Provider ID: 269352
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
15721 POMERADO RD
POWAY, CA 92064-2021
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760)
631-3000
Provider Gender: Female
License number: PA21008
NPI: 1073826210
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

PODIATRIST

SMITH, COLLIN S

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D. Directorio de proveedores de atención especializada

Provider ID: 276913
Board Certified Specialty: No
HEALTH EXCEL IPA INC
15706 POMERADO RD # S102
POWAY, CA 92064-2067
Phone: (858) 485-1494
Fax: (858) 485-1515
After Hours Phone: (858)
485-1494
Provider Gender: Male
License number: DPM5268
NPI: 1801223896
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

PULMONARY DISEASES

BENDER, FRANK D , MD
Provider ID: 270195
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
15611 POMERADO RD STE 580
POWAY, CA 92064-2438
Phone:
Fax:
After Hours Phone:
Provider Gender: Male
License number: G33933
NPI: 1912015363
Provider English Spoken: Yes
Provider Language(s) Spoken:

Spanish
Cultural Competency: No
Hospital Affiliation: Palomar
Medical Center, Pomerado
Hospital, Palomar Health
Downtown Campus
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health
Plan Direct, Community Care Ipa
Llc

OTOSHI, JAMES S , MD
Provider ID: 274767
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
15611 POMERADO RD STE 400
POWAY, CA 92064-2437
Phone: (760) 489-1458
Fax: (760) 489-1246
After Hours Phone: (760)
489-1458

Provider Gender: Male
License number: G27763
NPI: 1679681027
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Palomar
Health Downtown Campus,
Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility: P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc

POPPER, STEVEN T , MD
Provider ID: 129606
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
15611 POMERADO RD STE 400
POWAY, CA 92064-2437
Phone: (858) 675-3100
Fax: (858) 675-3100
After Hours Phone: (858)
675-3100
Provider Gender: Male
License number: A127156
NPI: 1679849012
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish

Cultural Competency: No
Hospital Affiliation: Kaiser
Foundation Hospital Bellflower,
Palomar Medical Center, Scripps
Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

RADIOLOGY DIAGNOSTIC X-RAY

ALLEN, DERRICK R
Provider ID: 125995
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC
12620 MONTE VISTA RD STE A

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D. Directorio de proveedores de atención especializada

POWAY, CA 92064-2531 Phone: (858) 487-9729 Fax: (858) 487-4764 After Hours Phone: (858) 487-9729 Provider Gender: Male License number: A69840 NPI: 1215982970 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc	Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc ANDERSON, GREGORY S Provider ID: 125986 Board Certified Specialty: No IHS RADIOLOGY MEDICAL GROUP INC 12620 MONTE VISTA RD STE A POWAY, CA 92064-2531 Phone: (858) 487-9729 Fax: After Hours Phone: (858) 487-9729 Provider Gender: Male License number: A90018 NPI: 1841467099 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:	IHS RADIOLOGY MEDICAL GROUP INC 12620 MONTE VISTA RD STE A POWAY, CA 92064-2531 Phone: (858) 487-9729 Fax: (858) 487-4764 After Hours Phone: (858) 487-9729 Provider Gender: Female License number: G62517 NPI: 1063465219 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Medical Ctr At Ucsf, Scripps Mercy Hospital Chula Vista Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:
ALLEN, DERRICK R , MD Provider ID: 268359 Board Certified Specialty: No COMMUNITY CARE IPA LLC 12620 MONTE VISTA RD STE A POWAY, CA 92064-2531 Phone: (858) 487-9729 Fax: (866) 558-4329 After Hours Phone: (858) 487-9729 Provider Gender: Male License number: A69840 NPI: 1215982970 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista Medi-Cal Open Panel: Yes	ANDERSON, GREGORY S Provider ID: 125986 Board Certified Specialty: No IHS RADIOLOGY MEDICAL GROUP INC 12620 MONTE VISTA RD STE A POWAY, CA 92064-2531 Phone: (858) 487-9729 Fax: After Hours Phone: (858) 487-9729 Provider Gender: Male License number: A90018 NPI: 1841467099 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: BAKER, LORI L Provider ID: 125994 Board Certified Specialty: No	BORSO, MAYA G Provider ID: 126007 Board Certified Specialty: No IHS RADIOLOGY MEDICAL GROUP INC 12620 MONTE VISTA RD STE A POWAY, CA 92064-2531 Phone: (858) 487-9729 Fax: (858) 487-4764 After Hours Phone: (858) 487-9729 Provider Gender: Female License number: A97134 NPI: 1548473507 Provider English Spoken: Yes Provider Language(s) Spoken:

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D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Scripps Green Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☒ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BUCKLEY, DAVID W
Provider ID: 243262
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 12620 MONTE VISTA RD STE A
 POWAY, CA 92064-2531
Phone: (858) 487-9729
Fax: (866) 558-4329
After Hours Phone: (858) 487-9729
Provider Gender: Male
License number: G57383
NPI: 1982657060
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☒ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Community Care Ipa Llc
CHOU, ERIC T
Provider ID: 126015
Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 12620 MONTE VISTA RD STE A
 POWAY, CA 92064-2531
Phone: (858) 487-9729
Fax: (858) 487-4764
After Hours Phone: (858) 487-9729
Provider Gender: Male
License number: A96095
NPI: 1689627838
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☒ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

COOPER, JAMES A
Provider ID: 126043
Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 12620 MONTE VISTA RD STE A
 POWAY, CA 92064-2531
Phone: (858) 487-9729
Fax: (858) 487-4764
After Hours Phone: (858) 487-9729
Provider Gender: Male

License number: A62473
NPI: 1497708622
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Pomerado Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, East Los Angeles Doctors Hsp, Memorial Hosp Of Gardena Inc, Riverside Community Hosp, Palmdale Regional Medical Center, Barstow Community Hospital, Kindred Hospital South Bay, Loma Linda University Med Ctr Murrieta
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☒ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

DOEMENY, JOHN M
Provider ID: 126049
Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 12620 MONTE VISTA RD STE A
 POWAY, CA 92064-2531
Phone: (858) 487-9729
Fax: (619) 295-9729
After Hours Phone: (858) 487-9729
Provider Gender: Male
License number: G50925
NPI: 1841243912
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy

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D. Directorio de proveedores de atención especializada

<p>Hospital, Scripps Mercy Hospital Chula Vista Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc</p> <p>FIROOZNA, NILOFAR Provider ID: 126174 Board Certified Specialty: No IHS RADIOLOGY MEDICAL GROUP INC 12620 MONTE VISTA RD STE A POWAY, CA 92064-2531 Phone: (858) 487-9729 Fax: After Hours Phone: (858) 487-9729 Provider Gender: Female License number: A109806 NPI: 1962521419 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Alvarado Hospital Llc, Redlands Community Hosp, Barstow Community Hospital, Kindred Hospital Riverside, Victor Valley Global Med Ctr Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s):</p>	<p>IPA: FRANKE, MARK A Provider ID: 126055 Board Certified Specialty: No IHS RADIOLOGY MEDICAL GROUP INC 12620 MONTE VISTA RD STE A POWAY, CA 92064-2531 Phone: (858) 487-9729 Fax: After Hours Phone: (858) 487-9729 Provider Gender: Male License number: A118792 NPI: 1114246329 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Santa Monica Ucla Med Ctr, Ronald Reagan Ucla Med Ctr, Alvarado Hospital Llc Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc</p> <p>HARMAN, SCOTT A Provider ID: 126068 Board Certified Specialty: No IHS RADIOLOGY MEDICAL GROUP INC 12620 MONTE VISTA RD STE A POWAY, CA 92064-2531 Phone: (858) 487-9729 Fax: (858) 487-4764 After Hours Phone: (858) 487-9729</p>	<p>Provider Gender: Male License number: G57284 NPI: 1124071311 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Alvarado Hospital Llc Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:</p> <p>JOHNSON, JOHN O Provider ID: 126080 Board Certified Specialty: No IHS RADIOLOGY MEDICAL GROUP INC 12620 MONTE VISTA RD STE A POWAY, CA 92064-2531 Phone: (858) 487-9729 Fax: (858) 487-4764 After Hours Phone: (858) 487-9729 Provider Gender: Male License number: G59632 NPI: 1073565792 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM</p>
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D. Directorio de proveedores de atención especializada

<p><i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>	<p><i>Phone:</i> (858) 487-9729 <i>Fax:</i> (858) 487-4764 <i>After Hours Phone:</i> (858) 487-9729 <i>Provider Gender:</i> Male <i>License number:</i> G77575 <i>NPI:</i> 1194863902 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Alvarado Hospital Llc, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc</p>	<p>Chula Vista <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc</p>
<p>LIZERBRAM, ERIC K <i>Provider ID:</i> 126093 <i>Board Certified Specialty:</i> No IHS RADIOLOGY MEDICAL GROUP INC 12620 MONTE VISTA RD STE A POWAY, CA 92064-2531 <i>Phone:</i> (858) 487-9729 <i>Fax:</i> (858) 487-4764 <i>After Hours Phone:</i> (858) 487-9729 <i>Provider Gender:</i> Male <i>License number:</i> G74959 <i>NPI:</i> 1598718926 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>	<p>MOFFIT, BRIAN J <i>Provider ID:</i> 126120 <i>Board Certified Specialty:</i> No IHS RADIOLOGY MEDICAL GROUP INC 12620 MONTE VISTA RD STE A POWAY, CA 92064-2531 <i>Phone:</i> (858) 487-9729 <i>Fax:</i> (858) 487-4764 <i>After Hours Phone:</i> (858) 487-9729 <i>Provider Gender:</i> Male <i>License number:</i> G51551 <i>NPI:</i> 1508817305 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Scripps Mercy Hospital</p>	<p>NALBANDIAN, ALLEN B <i>Provider ID:</i> 29391 <i>Board Certified Specialty:</i> No VALLEY RADIOLOGY CONSULTANTS MED GRP INC 15725 POMERADO RD STE 101 POWAY, CA 92064-2057 <i>Phone:</i> (858) 485-6500 <i>Fax:</i> <i>After Hours Phone:</i> (858) 485-6500 <i>Provider Gender:</i> Male <i>License number:</i> A54742 <i>NPI:</i> 1619938099 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Pomerado Hospital, Palomar Medical Center, Scripps Green Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> W <i>Hours:</i> M-F 8AM-4:30PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>
<p>LUBISICH, JOHN P <i>Provider ID:</i> 126099 <i>Board Certified Specialty:</i> No IHS RADIOLOGY MEDICAL GROUP INC 12620 MONTE VISTA RD STE A POWAY, CA 92064-2531</p>	<p>MOFFIT, BRIAN J <i>Provider ID:</i> 126120 <i>Board Certified Specialty:</i> No IHS RADIOLOGY MEDICAL GROUP INC 12620 MONTE VISTA RD STE A POWAY, CA 92064-2531 <i>Phone:</i> (858) 487-9729 <i>Fax:</i> (858) 487-4764 <i>After Hours Phone:</i> (858) 487-9729 <i>Provider Gender:</i> Male <i>License number:</i> G51551 <i>NPI:</i> 1508817305 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Scripps Mercy Hospital</p>	<p>NALBANDIAN, ALLEN B <i>Provider ID:</i> 29391 <i>Board Certified Specialty:</i> No VALLEY RADIOLOGY CONSULTANTS MED GRP INC 15725 POMERADO RD STE 101 POWAY, CA 92064-2057 <i>Phone:</i> (858) 485-6500 <i>Fax:</i> <i>After Hours Phone:</i> (858) 485-6500 <i>Provider Gender:</i> Male <i>License number:</i> A54742 <i>NPI:</i> 1619938099 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Pomerado Hospital, Palomar Medical Center, Scripps Green Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> W <i>Hours:</i> M-F 8AM-4:30PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>

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D. Directorio de proveedores de atención especializada

OLOUGHLIN, BRIAN J

Provider ID: 126126
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC
12620 MONTE VISTA RD STE A
POWAY, CA 92064-2531
Phone: (858) 487-9729

Fax:
After Hours Phone: (858)
487-9729

Provider Gender: Male
License number: A120064
NPI: 1972709087

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Santa Monica

Ucla Med Ctr, Alvarado Hospital
Llc, Scripps Memorial Hospital,
Scripps Mercy Hospital, Scripps
Mercy Hospital Chula Vista,
Scripps Memorial Hospital
Encinitas, Scripps Green
Hospital

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ *Accessibility:* W
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA:

OSHAUGHNESSY, LOUISE S

Provider ID: 126132
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC
12620 MONTE VISTA RD STE A
POWAY, CA 92064-2531

Phone: (858) 487-9729
Fax: (858) 487-4764
After Hours Phone: (858)
487-9729

Provider Gender: Female
License number: G48800
NPI: 1285685925

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Alvarado
Hospital Llc, Ucsd Medical Ctr
Medi-Cal Open Panel: No

Min/Max Age: None
American Sign Language (ASL):
No

♿ *Accessibility:* W
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA:

SCHECHTER, MARK S

Provider ID: 126138
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC

12620 MONTE VISTA RD STE A
POWAY, CA 92064-2531
Phone: (858) 487-9729
Fax: (858) 487-4764

After Hours Phone: (858)
487-9729

Provider Gender: Male
License number: G42390
NPI: 1942253018

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, El Centro Regional
Medical Center, Selma

Community Hospital, Adventist
Medical Center, Adventist Med

Ctr Reedley, Scripps Mercy
Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ *Accessibility:* W
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA:

SCHWARTZBERG, ROSS E

Provider ID: 126145
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC

12620 MONTE VISTA RD STE A
POWAY, CA 92064-2531

Phone: (858) 487-9729
Fax: (858) 487-4764

After Hours Phone: (858)
487-9729

Provider Gender: Male
License number: G72997
NPI: 1215976766

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Alvarado
Hospital Llc
Medi-Cal Open Panel: No

Min/Max Age: None
American Sign Language (ASL):
No

♿ *Accessibility:* W
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SNYDER, WILLIAM C

Provider ID: 126152

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC
12620 MONTE VISTA RD STE A
POWAY, CA 92064-2531
Phone: (858) 487-9729
Fax: (866) 558-4329
After Hours Phone: (858)
487-9729
Provider Gender: Male
License number: A65059
NPI: 1477505162
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado
Hospital Llc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SPOTO, GARY P

Provider ID: 126158
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC
12620 MONTE VISTA RD STE A
POWAY, CA 92064-2531
Phone: (858) 487-9729
Fax: (858) 487-4764
After Hours Phone: (858)
487-9729
Provider Gender: Male
License number: G58131
NPI: 1659332062
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista, Scripps Memorial
Hospital, Scripps Memorial
Hospital Encinitas, Scripps
Green Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SUNG, RAYMOND Y

Provider ID: 29394
Board Certified Specialty: No
VALLEY RADIOLOGY
CONSULTANTS MED GRP INC
15725 POMERADO RD STE 101
POWAY, CA 92064-2057
Phone: (858) 485-6500
Fax: (760) 520-8520
After Hours Phone: (858)
485-6500
Provider Gender: Male
License number: A63965
NPI: 1023079365
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Pomerado
Hospital, Scripps Green Hospital,
Palomar Medical Center
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-4:30PM, SA
9AM-5PM
Website:

Email:
Medical Group(s):
IPA:

TENA, ROWENA G

Provider ID: 126164
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC
12620 MONTE VISTA RD STE A
POWAY, CA 92064-2531
Phone: (858) 487-9729
Fax: (858) 487-4764
After Hours Phone: (858)
487-9729
Provider Gender: Female
License number: A69607
NPI: 1629029335
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista, Vibra Hospital Of
San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Community Care Ipa Llc

TOBIN, MICHAEL L

Provider ID: 126217
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC
12620 MONTE VISTA RD STE A
POWAY, CA 92064-2531

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 487-9729
 Fax: (858) 487-4764
 After Hours Phone: (858) 487-9729

Provider Gender: Male
 License number: A45908
 NPI: 1730132150
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No

♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

TSUKADA, GLENN H

Provider ID: 126202
 Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 12620 MONTE VISTA RD STE A POWAY, CA 92064-2531
 Phone: (858) 487-9729
 Fax: (858) 487-4764
 After Hours Phone: (858) 487-9729
 Provider Gender: Male
 License number: A60235
 NPI: 1710938394
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Pomerado Hospital, Alvarado Hospital Llc, Scripps Memorial Hospital, Grossmont Hospital, Scripps

Mercy Hospital, Ucsd Medical Ctr, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Scripps Green Hospital
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No

♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

ZINK BRODY, GORDON C

Provider ID: 126195
 Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 12620 MONTE VISTA RD STE A POWAY, CA 92064-2531
 Phone: (858) 487-9729
 Fax: (858) 487-4764
 After Hours Phone: (858) 487-9729
 Provider Gender: Male
 License number: G68636
 NPI: 1689610362
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Alvarado Hospital Llc, Oak Valley Dist Hosp, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Scripps Green Hospital
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No

♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

RADIOLOGY

DOEMENY, JOHN M

Provider ID: 269749
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 12620 MONTE VISTA RD STE A POWAY, CA 92064-2531
 Phone: (858) 487-9729
 Fax: (866) 558-4329
 After Hours Phone: (858) 487-9729
 Provider Gender: Male
 License number: G50925
 NPI: 1841243912
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

FRANKE, MARK A

Provider ID: 269634
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 12620 MONTE VISTA RD STE A POWAY, CA 92064-2531

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D. Directorio de proveedores de atención especializada

Phone: (858) 487-9729
 Fax: (866) 558-4329
 After Hours Phone: (858) 487-9729
 Provider Gender: Male
 License number: A118792
 NPI: 1114246329
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Santa Monica
 UCLA Med Ctr, Ronald Reagan
 UCLA Med Ctr, Alvarado Hospital
 LLC
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

MOFFIT, BRIAN J

Provider ID: 269528
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 12620 MONTE VISTA RD STE A
 POWAY, CA 92064-2531
 Phone: (858) 487-9729
 Fax: (866) 558-4329
 After Hours Phone: (858)
 487-9729
 Provider Gender: Male
 License number: G51551
 NPI: 1508817305
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy
 Hospital, Scripps Mercy Hospital
 Chula Vista

Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

SCHWARTZBERG, ROSS E

Provider ID: 245627
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 12620 MONTE VISTA RD STE A
 POWAY, CA 92064-2531
 Phone: (858) 487-9729
 Fax:
 After Hours Phone: (858)
 487-9729
 Provider Gender: Male
 License number: G72997
 NPI: 1215976766
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Alvarado
 Hospital Llc

Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

TENA, ROWENA G , MD

Provider ID: 269825
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 12620 MONTE VISTA RD STE A

POWAY, CA 92064-2531
 Phone: (858) 487-9729
 Fax: (866) 558-4329
 After Hours Phone: (858)
 487-9729
 Provider Gender: Female
 License number: A69607
 NPI: 1629029335
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy
 Hospital, Scripps Mercy Hospital
 Chula Vista, Vibra Hospital Of
 San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

REGISTERED PHYSICAL THERAPIST

BLACKBURN, GARY L

Provider ID: 269448
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 15525 POMERADO RD STE D4
 POWAY, CA 92064-2426
 Phone: (858) 674-1600
 Fax: (858) 618-1523
 After Hours Phone: (858)
 674-1600
 Provider Gender: Male
 License number: PT28897
 NPI: 1487769352
 Provider English Spoken: Yes
 Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

CHAN, ORIANA

Provider ID: 129858
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
15525 POMERADO RD STE D4
POWAY, CA 92064-2426
Phone: (858) 674-1600
Fax:
After Hours Phone: (858)
674-1600
Provider Gender: Female
License number: PT293406
NPI: 1023533155
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

RHEUMATOLOGY

MABAQUIAO, ARTHUR R

Provider ID: 279414

Board Certified Specialty: No
HEALTH EXCEL IPA INC
15725 POMERADO RD STE 117
POWAY, CA 92064-2058
Phone: (858) 312-1717
Fax: (858) 435-0207
After Hours Phone: (858)
312-1717
Provider Gender: Male
License number: A61769
NPI: 1730271933
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

RAO, SOUMYA G , MD

Provider ID: 46060
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
15611 POMERADO RD STE 400
POWAY, CA 92064-2437
Phone: (858) 675-3150
Fax: (858) 924-1775
After Hours Phone: (858)
675-3150
Provider Gender: Female
License number: A99911
NPI: 1033388616
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi, Kannada, Russian,
Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp

Memorial Hospital, Sharp Chula
Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

REDDY, SMITHA C , MD

Provider ID: 269402
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
15725 POMERADO RD STE 117
POWAY, CA 92064-2058
Phone: (858) 312-1717
Fax: (858) 435-0207
After Hours Phone: (858)
312-1717
Provider Gender: Female
License number: A85072
NPI: 1750534715
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi, Kannada, Telugu
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Pomerado Hospital,
Scripps Mercy Hospital Chula
Vista, Scripps Green Hospital,
Palomar Health Downtown
Campus, Scripps Memorial
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

SURGERY GENERAL

FILICIOTTO, SAM

Provider ID: 127863
Board Certified Specialty: No
HEALTH EXCEL IPA INC
15708 POMERADO RD # N207
POWAY, CA 92064-2066
Phone: (858) 487-8741
Fax: (858) 487-8744
After Hours Phone: (858)
487-8741
Provider Gender: Male
License number: G65491
NPI: 1881655744
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Pomerado
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

SURGERY ORTHOPEDIC

BALIKIAN, PHILIP, MD

Provider ID: 119552
Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC
15611 POMERADO RD STE 400
POWAY, CA 92064-2437

Phone: (858) 675-3286
Fax: (858) 385-1690
After Hours Phone: (858)
675-3286
Provider Gender: Male
License number: C52136
NPI: 1407803687
Provider English Spoken: Yes
Provider Language(s) Spoken:
Armenian, Italian, Spanish,
Vietnamese
Cultural Competency: No
Hospital Affiliation: Pomerado
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health
Plan Direct, Community Care Ipa
Llc

BALIKIAN, PHILIP

Provider ID: 257485
Board Certified Specialty: Yes
BLUE SHIELD PROMISE
HEALTH PLAN DIRECT
15611 POMERADO RD STE 400
POWAY, CA 92064-2437
Phone: (858) 675-3286
Fax: (858) 385-1690
After Hours Phone: (858)
675-3286
Provider Gender: Male
License number: C52136
NPI: 1407803687
Provider English Spoken: Yes
Provider Language(s) Spoken:
Armenian, Italian, Spanish,
Vietnamese

Cultural Competency: No
Hospital Affiliation: Pomerado
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health
Plan Direct, Community Care Ipa
Llc

BRIED, JAMES M , MD

Provider ID: 269500
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
15611 POMERADO RD STE 525
POWAY, CA 92064-2439
Phone: (858) 485-0050
Fax: (858) 485-5071
After Hours Phone: (858)
485-0050
Provider Gender: Male
License number: G62595
NPI: 1891809257
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Palomar
Health Downtown Campus,
Pomerado Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

IPA: Community Care Ipa Llc

COHEN, BRAD S

Provider ID: 257489

Board Certified Specialty: No

BLUE SHIELD PROMISE

HEALTH PLAN DIRECT

15611 POMERADO RD STE 525

POWAY, CA 92064-2439

Phone: (858) 485-0050

Fax: (858) 485-5071

After Hours Phone: (858)

485-0050

Provider Gender: Male

License number: A62550

NPI: 1164536538

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Palomar

Health Downtown Campus,

Pomerado Hospital, Palomar

Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Blue Shield Promise Health

Plan Direct, Community Care Ipa

Llc

COHEN, BRAD S , MD

Provider ID: 269449

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

15611 POMERADO RD STE 525

POWAY, CA 92064-2439

Phone: (858) 485-0050

Fax: (858) 485-5071

After Hours Phone: (858)

485-0050

Provider Gender: Male

License number: A62550

NPI: 1164536538

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Palomar

Health Downtown Campus,

Pomerado Hospital, Palomar

Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Blue Shield Promise Health

Plan Direct, Community Care Ipa

Llc

OWSLEY, KEVIN C , MD

Provider ID: 269325

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

15611 POMERADO RD STE 525

POWAY, CA 92064-2439

Phone: (858) 485-0050

Fax: (858) 485-5071

After Hours Phone: (858)

485-0050

Provider Gender: Male

License number: A98739

NPI: 1992714406

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Palomar

Health Downtown Campus,

Pomerado Hospital, Marina Del

Rey Hospital, Palomar Medical

Center, Adventist Health White

Memorial

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

PALANCA, ARIEL A , MD

Provider ID: 269861

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

15611 POMERADO RD STE 525

POWAY, CA 92064-2439

Phone: (858) 485-0050

Fax: (760) 743-4779

After Hours Phone: (858)

485-0050

Provider Gender: Female

License number: A114257

NPI: 1629203971

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Palomar

Medical Center, Lucile Salter

Packard Childrens Hosp,

Stanford Health Care

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Community Care Ipa Llc

UROLOGY

DICKS, BRIAN M , MD

Provider ID: 270141
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
12630 MONTE VISTA RD STE 103
POWAY, CA 92064-2526
Phone: (858) 451-1772
Fax: (858) 429-7927
After Hours Phone: (858) 451-1772
Provider Gender: Male
License number: A100413
NPI: 1144425687
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Pomerado Hospital, Palomar Medical Center, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Ucsd Medical Ctr, Sharp Memorial Hospital, Kaiser Foundation Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

NEUSTEIN, PAUL, MD

Provider ID: 42034
Board Certified Specialty: No

GENESIS HEALTHCARE PARTNERS PC
15644 POMERADO RD STE 206
POWAY, CA 92064-2419
Phone: (858) 485-0554
Fax: (858) 429-7933
After Hours Phone: (858) 485-0554
Provider Gender: Male
License number: G42225
NPI: 1578529731
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Doctors Hsp Of Modesto
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

PE, MARK- RALLY L , MD

Provider ID: 269348
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
12630 MONTE VISTA RD STE 103
POWAY, CA 92064-2526
Phone: (858) 451-1772
Fax: (858) 429-7927
After Hours Phone: (858) 451-1772
Provider Gender: Male
License number: A112013
NPI: 1801003694
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish

Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

RAMONA

REGISTERED PHYSICAL THERAPIST

PFEIFER, JANAYA M

Provider ID: 269584
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
850 MAIN ST STE 105
RAMONA, CA 92065-1968
Phone: (760) 789-1424
Fax:
After Hours Phone: (760) 789-1424
Provider Gender: Female
License number: PT292928
NPI: 1699172593
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM

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D. Directorio de proveedores de atención especializada

Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

STUDLEY, DAKOTA L

Provider ID: 270595
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
850 MAIN ST STE 105
RAMONA, CA 92065-1968
Phone: (760) 789-1424
Fax:
After Hours Phone: (760)
789-1424
Provider Gender: Female
License number: PT294388
NPI: 1972003101
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

⚭ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SAN DIEGO

INTERNAL MEDICINE

SAEED, ODAY

Provider ID: 213796
Board Certified Specialty: No
HEALTH EXCEL IPA INC
528 G ST
SAN DIEGO, CA 92123

Phone: (760) 353-0404
Fax: (760) 353-0392
After Hours Phone: (760)
353-0404
Provider Gender: Male
License number: A135162
NPI: 1639432164
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic
Cultural Competency: No
Hospital Affiliation: El Centro
Regional Medical Center,
Pioneers Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
⚭ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

SAN DIEGO

ADDICTIVE MEDICINE

SALGUERO GALLAND, MARIO L

Provider ID: 284590
Board Certified Specialty: No
HEALTH EXCEL IPA INC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608
Phone: (619) 564-8765
Fax: (619) 564-8786
After Hours Phone: (619)
564-8765
Provider Gender: Male
License number: A122101
NPI: 1487947826
Provider English Spoken: Yes
Provider Language(s) Spoken:

Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 12/999
American Sign Language (ASL):
No
⚭ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

ADOLESCENT MEDICINE

INWARDS-BRELAND, DAVID

Provider ID: 267032
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
8110 BIRMINGHAM WAY FL 2
SAN DIEGO, CA 92123-2758
Phone: (858) 966-8493
Fax:

After Hours Phone: (858)
966-8493
Provider Gender: Male
License number: A68214
NPI: 1043256738
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
⚭ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Rady Childrens Health Network

INWARDS-BRELAND, DAVID

Provider ID: 267033
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8493
Fax:
After Hours Phone: (858) 966-8493
Provider Gender: Male
License number: A68214
NPI: 1043256738
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

KUMAR, MAYA M

Provider ID: 259637
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
8110 BIRMINGHAM WAY # 2
SAN DIEGO, CA 92123-2758

Phone: (858) 966-8493
Fax: (858) 966-8818
After Hours Phone: (858) 966-8493
Provider Gender: Female
License number: A126520
NPI: 1184066367
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

KUMAR, MAYA M

Provider ID: 262274
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8493
Fax: (858) 966-8818
After Hours Phone: (858) 966-8493
Provider Gender: Female
License number: A126520
NPI: 1184066367
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Rady Childrens Hospital San Diego

Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

TITCHEN, KANANI E

Provider ID: 259139
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
8110 BIRMINGHAM WAY FL 2
SAN DIEGO, CA 92123-2758
Phone: (858) 966-8493
Fax: (858) 966-8818
After Hours Phone: (858) 966-8493
Provider Gender: Female
License number: A163273
NPI: 1184981797
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

TITCHEN, KANANI E

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D. Directorio de proveedores de atención especializada

Provider ID: 259140
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8493
Fax: (858) 966-8818
After Hours Phone: (858) 966-8493
Provider Gender: Female
License number: A163273
NPI: 1184981797
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

ADVANCED HEART FAILURE AND TRANSPLANT CARDIOLOGY

HOAGLAND, PETER M
Provider ID: 275445
Board Certified Specialty: No
HEALTH EXCEL IPA INC
3131 BERGER AVE STE 200
SAN DIEGO, CA 92123-4203
Phone: (858) 244-6800
Fax: (858) 244-6809
After Hours Phone: (858) 244-6800

Provider Gender: Male
License number: G54598
NPI: 1629059779
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Sharp Memorial Hospital, Sharp Mary Birch Hosp For Women And Newborns
Medi-Cal Open Panel: Yes
Min/Max Age: 18/110
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

HONG, KIMBERLY N
Provider ID: 246311
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273

Provider Gender: Female
License number: A156242
NPI: 1346515442
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

JASKI, BRIAN E
Provider ID: 275473
Board Certified Specialty: No
HEALTH EXCEL IPA INC
3131 BERGER AVE STE 200
SAN DIEGO, CA 92123-4203
Phone: (858) 244-6800
Fax: (858) 244-6809
After Hours Phone: (858) 244-6800
Provider Gender: Male
License number: G55011
NPI: 1194706242
Provider English Spoken: Yes
Provider Language(s) Spoken: French
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/110
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

JASKI, BRIAN E
Provider ID: 53743
Board Certified Specialty: No
SAN DIEGO CARDIAC CTR
MED GRP INC
3131 BERGER AVE STE 200
SAN DIEGO, CA 92123-4203

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D. Directorio de proveedores de atención especializada

Phone: (858) 244-6800
 Fax:
 After Hours Phone: (858) 244-6800
 Provider Gender: Male
 License number: G55011
 NPI: 1194706242
 Provider English Spoken: Yes
 Provider Language(s) Spoken: French
 Cultural Competency: No
 Hospital Affiliation: Sharp Memorial Hospital, Sharp Chula Vista Med Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Health Excel Ipa Inc

RAISSI SHABARI, FARSHAD
 Provider ID: 110747
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-6222
 Fax:
 After Hours Phone: (619) 543-6222
 Provider Gender: Male
 License number: A99160
 NPI: 1124295027
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Farsi, French
 Cultural Competency: No
 Hospital Affiliation: Pioneers Memorial Hospital, El Centro

Regional Medical Center, Ucsd
 La Jolla John Sally Thornton,
 Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

RAISSI SHABARI, FARSHAD
 Provider ID: 120351
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
 Phone: (619) 543-5743
 Fax:
 After Hours Phone: (619) 543-5743
 Provider Gender: Male
 License number: A99160
 NPI: 1124295027
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Farsi, French
 Cultural Competency: No
 Hospital Affiliation: Pioneers Memorial Hospital, El Centro
 Regional Medical Center, Ucsd
 La Jolla John Sally Thornton,
 Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website:
 Email:

Medical Group(s):
 IPA:

ALLERGY IMMUNOLOGY

ACEVES, SEEMA S
 Provider ID: 205624
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY FL 2
 SAN DIEGO, CA 92123-4232
 Phone: (858) 966-5961
 Fax: (858) 966-6791
 After Hours Phone: (858) 966-5961
 Provider Gender: Female
 License number: A74305
 NPI: 1366511628
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

ACEVES, SEEMA S
 Provider ID: 51868
 Board Certified Specialty: No
 RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 3030 CHILDRENS WAY FL 2
 SAN DIEGO, CA 92123-4232

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D. Directorio de proveedores de atención especializada

Phone: (858) 966-4003
 Fax:
 After Hours Phone: (858) 966-4003
 Provider Gender: Female
 License number: A74305
 NPI: 1366511628
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

ALKATIB, RHONDA E

Provider ID: 268622
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 2655 CAMINO DEL RIO N STE 120
 SAN DIEGO, CA 92108-1633
 Phone: (619) 286-6687
 Fax: (619) 286-6695
 After Hours Phone: (619) 286-6687
 Provider Gender: Female
 License number: A163910
 NPI: 1417363086
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Alvarado Hosp Med Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999

American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Health Excel Ipa Inc, Rady Childrens Health Network

ALKATIB, RHONDA E

Provider ID: 271038
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 2655 CAMINO DEL RIO N STE 120
 SAN DIEGO, CA 92108-1633
 Phone: (619) 286-6687
 Fax: (619) 286-6695
 After Hours Phone: (619) 286-6687
 Provider Gender: Female
 License number: A163910
 NPI: 1417363086
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Alvarado Hosp Med Ctr, Scripps Memorial Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Health Excel Ipa Inc, Rady Childrens Health Network

BRODERICK, LORI

Provider ID: 206080

Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY FL 2 NORTH
 SAN DIEGO, CA 92123-4232
 Phone: (858) 966-5961
 Fax: (858) 966-6791
 After Hours Phone: (858) 966-5961
 Provider Gender: Female
 License number: A106397
 NPI: 1417152232
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

CHOI, SUN

Provider ID: 273213
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8899 UNIVERSITY CENTER LN
 SAN DIEGO, CA 92122-1013
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A150029
 NPI: 1306252101

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D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CHOI, SUN

Provider ID: 273214
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
 926-8273
Provider Gender: Female
License number: A150029
NPI: 1306252101
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Ucsd Medical Group
COLLINS, CATHLEEN A
Provider ID: 118896
Board Certified Specialty: No
 RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDTN
 3030 CHILDRENS WAY FL 2
 SAN DIEGO, CA 92123-4232
Phone: (858) 966-5961
Fax:
After Hours Phone: (858)
 966-5961
Provider Gender: Female
License number: A122537
NPI: 1205128089

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Lucile Salter
 Packard Childrens Hosp,
 Stanford Health Care, Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

COLLINS, CATHLEEN A
Provider ID: 285133
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223

Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858)
 966-8800
Provider Gender: Female
License number: A122537
NPI: 1205128089
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Lucile Salter
 Packard Childrens Hosp,
 Stanford Health Care, Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

EBBELING, WILLIAM L

Provider ID: 268259
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3030 CHILDRENS WAY # 2
 SAN DIEGO, CA 92123-4232
Phone: (858) 966-5961
Fax:
After Hours Phone: (858)
 966-5961
Provider Gender: Male
License number: C50225
NPI: 1205808284
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: St Agnes
 Medical Center, Fresno

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Community Hospital, Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

HOFFMAN, HAROLD M

Provider ID: 51892
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123-4232
Phone: (858) 966-4003
Fax:
After Hours Phone: (858)
966-4003
Provider Gender: Male
License number: A53101
NPI: 1326074261
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Rady Childrens Hospital San
Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health

Network
JAMES, CHRISTINE K
Provider ID: 284917
Board Certified Specialty: No
UCSD MEDICAL GROUP
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122-1013
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A172774
NPI: 1144589979
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LAUBACH, SUSAN S

Provider ID: 53683
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN
5776 RUFFIN RD
SAN DIEGO, CA 92123-1013
Phone: (858) 292-4900
Fax:
After Hours Phone: (858)
292-4900
Provider Gender: Female

License number: A114061
NPI: 1366656209
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital,
Childrens Hosp And Resrch Ctr
At Oakland
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

PENDLETON, JENNIFER J

Provider ID: 26514
Board Certified Specialty: No
ALLERGY PARTNERS OF SAN
DIEGO
2655 CAMINO DEL RIO N STE
120
SAN DIEGO, CA 92108-1633
Phone: (619) 286-6687
Fax: (619) 286-6695
After Hours Phone: (619)
286-6687
Provider Gender: Female
License number: A80748
NPI: 1821054446
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p><i>American Sign Language (ASL):</i> No <i>Accessibility:</i> ☯ <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Health Excel Ipa Inc, Rady Childrens Health Network</p>	<p>IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 6699 ALVARADO RD STE 2301 SAN DIEGO, CA 92120-5241 <i>Phone:</i> (619) 588-4074 <i>Fax:</i> (619) 588-4004 <i>After Hours Phone:</i> (619) 588-4074 <i>Provider Gender:</i> Female <i>License number:</i> C52581 <i>NPI:</i> 1053300251 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cambodian, Hindi, Spanish, Telugu <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> ☯ <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd</p>	<p><i>Provider Language(s) Spoken:</i> Cambodian, Hindi, Spanish, Telugu <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> ☯ <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd</p>
<p>PENDLETON, JENNIFER J <i>Provider ID:</i> 285499 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 2655 CAMINO DEL RIO N STE 425 SAN DIEGO, CA 92108-1633 <i>Phone:</i> (619) 286-6687 <i>Fax:</i> (619) 286-6695 <i>After Hours Phone:</i> (619) 286-6687 <i>Provider Gender:</i> Female <i>License number:</i> A80748 <i>NPI:</i> 1821054446 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> ☯ <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Health Excel Ipa Inc, Rady Childrens Health Network</p>	<p>PENDLETON, JENNIFER J <i>Provider ID:</i> 285499 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 2655 CAMINO DEL RIO N STE 425 SAN DIEGO, CA 92108-1633 <i>Phone:</i> (619) 286-6687 <i>Fax:</i> (619) 286-6695 <i>After Hours Phone:</i> (619) 286-6687 <i>Provider Gender:</i> Female <i>License number:</i> A80748 <i>NPI:</i> 1821054446 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> ☯ <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd</p>	<p>RIEDL, MARC A <i>Provider ID:</i> 255768 <i>Board Certified Specialty:</i> Yes UCSD MEDICAL GROUP 8899 UNIVERSITY CENTER LN STE 230 SAN DIEGO, CA 92122-1010 <i>Phone:</i> (858) 657-5350 <i>Fax:</i> <i>After Hours Phone:</i> (858) 657-5350 <i>Provider Gender:</i> Male <i>License number:</i> A75551 <i>NPI:</i> 1285654889 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> ☯ <i>Hours:</i> M-SA 9AM-5PM</p>
<p>REDDY, SUMANA <i>Provider ID:</i> 262116 <i>Board Certified Specialty:</i> No</p>	<p>REDDY, SUMANA, MD <i>Provider ID:</i> 65617 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 6699 ALVARADO RD STE 2301 SAN DIEGO, CA 92120-5241 <i>Phone:</i> (619) 588-4074 <i>Fax:</i> (619) 588-4004 <i>After Hours Phone:</i> (619) 588-4074 <i>Provider Gender:</i> Female <i>License number:</i> C52581 <i>NPI:</i> 1053300251 <i>Provider English Spoken:</i> Yes</p>	<p>REDDY, SUMANA, MD <i>Provider ID:</i> 65617 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 6699 ALVARADO RD STE 2301 SAN DIEGO, CA 92120-5241 <i>Phone:</i> (619) 588-4074 <i>Fax:</i> (619) 588-4004 <i>After Hours Phone:</i> (619) 588-4074 <i>Provider Gender:</i> Female <i>License number:</i> C52581 <i>NPI:</i> 1053300251 <i>Provider English Spoken:</i> Yes</p>

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D. Directorio de proveedores de atención especializada

Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

RIEDL, MARC A

Provider ID: 84585
Board Certified Specialty: Yes
UCSD MEDICAL GROUP
8899 UNIVERSITY CENTER LN
STE 350
SAN DIEGO, CA 92122-1010
Phone: (858) 657-5350
Fax:
After Hours Phone: (858)
657-5350
Provider Gender: Male
License number: A75551
NPI: 1285654889
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

WALTERS, KRISTEN M

Provider ID: 109072
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FN D TN
5776 RUFFIN RD
SAN DIEGO, CA 92123-1013

Phone: (858) 292-1144
Fax:
After Hours Phone: (858)
292-1144
Provider Gender: Female
License number: A129955
NPI: 1437442308
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

WELCH, MICHAEL J

Provider ID: 206201
Board Certified Specialty: Yes
RADY CHILDRENS HEALTH
NETWORK
5776 RUFFIN RD
SAN DIEGO, CA 92123-1013
Phone: (858) 966-4900
Fax: (858) 268-5145
After Hours Phone: (858)
966-4900
Provider Gender: Male
License number: G34844
NPI: 1699794222
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes

Min/Max Age: 0/99
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

ANESTHESIOLOGY PAIN MANAGEMENT

ABDULHADI, HUSSEIN M
Provider ID: 262146
Board Certified Specialty: Yes
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
6645 ALVARADO RD # 253
SAN DIEGO, CA 92120-5208
Phone: (619) 326-0326
Fax: (619) 326-0101
After Hours Phone: (619)
326-0326
Provider Gender: Male
License number: A61032
NPI: 1629004890
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Spanish
Cultural Competency: No
Hospital Affiliation: Alvarado
Hospital Llc, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings
Medical Group-Sd

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D. Directorio de proveedores de atención especializada

CASTELLANOS, JOEL

Provider ID: 243553
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
 926-8273
Provider Gender: Male
License number: A154199
NPI: 1700296514
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

STEINER, ALICJA

Provider ID: 262105
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 2100 5TH AVE # 200
 SAN DIEGO, CA 92101-2102
Phone: (619) 948-8464
Fax: (619) 501-4806
After Hours Phone: (619)
 948-8464
Provider Gender: Female
License number: A69227
NPI: 1851309314

Provider English Spoken: Yes
Provider Language(s) Spoken:
 Polish, Russian
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings
 Medical Group-Sd

VAN NOORD, BRANDON A

Provider ID: 207405
Board Certified Specialty: Yes
 HEALTH EXCEL IPA INC
 3969 4TH AVE STE 208
 SAN DIEGO, CA 92103-3165
Phone: (619) 849-5777
Fax: (619) 849-5776
After Hours Phone: (619)
 849-5777
Provider Gender: Male
License number: A113568
NPI: 1558407510
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital, Sharp Memorial
 Hospital, Scripps Mercy Hospital
 Chula Vista, Scripps Memorial
 Hospital Encinitas, Scripps
 Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ♿ *Accessibility:*

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

ANESTHESIOLOGY

LEE, INSUN

Provider ID: 282099
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 5395 RUFFIN RD STE 201
 SAN DIEGO, CA 92123-1338
Phone: (858) 571-3630
Fax: (858) 295-3948
After Hours Phone: (858)
 571-3630
Provider Gender: Female
License number: A119066
NPI: 1447499199
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 18/999
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

OSWALD, JESSICA C

Provider ID: 239600
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911

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D. Directorio de proveedores de atención especializada

Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A130925
NPI: 1427315118
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

THOMPSON, SANDRA A

Provider ID: 270537
Board Certified Specialty: Yes
HEALTH EXCEL IPA INC
4033 3RD AVE # 430
SAN DIEGO, CA 92103-2117
Phone: (619) 578-3740
Fax: (858) 437-6702
After Hours Phone: (619) 578-3740
Provider Gender: Female
License number: G156943
NPI: 1326085713
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

TRIVEDI, SURAJ S
Provider ID: 246749
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A122196
NPI: 1699057885
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

TZENG, ERIC

Provider ID: 284577
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A153819
NPI: 1801258264
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CARDIAC ELECTROPHYSIOLOGY

HAN, FREDERICK T

Provider ID: 210012
Board Certified Specialty: No
UCSD MEDICAL GROUP
16950 VIA TAZON
SAN DIEGO, CA 92127-1607
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A112325
NPI: 1427255967
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HAN, FREDERICK T

Provider ID: 210099
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A112325
NPI: 1427255967
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CARDIOLOGY

ALANI, ANAS A

Provider ID: 201252
Board Certified Specialty: Yes
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A125237
NPI: 1154633709
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr, Loma Linda
University Med Ctr, Riverside
County Regional Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

ALSHAWABKEH, LAITH

Provider ID: 118271
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Male
License number: A150246
NPI: 1346470408

Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BASSI, HARJOT K

Provider ID: 109154
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNFTN
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 576-1700
Fax:
After Hours Phone: (858)
576-1700
Provider Gender: Female
License number: A137189
NPI: 1891025565
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<i>Email:</i>	SAN DIEGO, CA 92123-4223	Hospital, El Centro Regional
<i>Medical Group(s):</i>	<i>Phone:</i> (858) 966-5855	Medical Center
<i>IPA:</i> Rady Childrens Health Network	<i>Fax:</i> (858) 966-7903	<i>Medi-Cal Open Panel:</i> Yes
	<i>After Hours Phone:</i> (858) 966-5855	<i>Min/Max Age:</i> 0/999
BOCK, MATTHEW J	<i>Provider Gender:</i> Female	<i>American Sign Language (ASL):</i> No
<i>Provider ID:</i> 280463	<i>License number:</i> A138091	<i>Accessibility:</i>
<i>Board Certified Specialty:</i> No	<i>NPI:</i> 1114277787	<i>Hours:</i> M-SA 9AM-5PM
RADY CHILDRENS HEALTH NETWORK	<i>Provider English Spoken:</i> Yes	<i>Website:</i>
3020 CHILDRENS WAY	<i>Provider Language(s) Spoken:</i> Spanish	<i>Email:</i>
SAN DIEGO, CA 92123-4223	<i>Cultural Competency:</i> No	<i>Medical Group(s):</i>
<i>Phone:</i> (858) 966-5855	<i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego	<i>IPA:</i> Ucsd Medical Group
<i>Fax:</i> (858) 966-7903	<i>Medi-Cal Open Panel:</i> Yes	
<i>After Hours Phone:</i> (858) 966-5855	<i>Min/Max Age:</i> 0/18	CASTELLANOS, LUIS R
<i>Provider Gender:</i> Male	<i>American Sign Language (ASL):</i> No	<i>Provider ID:</i> 211765
<i>License number:</i> A112611	<i>Accessibility:</i>	<i>Board Certified Specialty:</i> No
<i>NPI:</i> 1356514624	<i>Hours:</i> M-SA 9AM-5PM	UCSD MEDICAL GROUP
<i>Provider English Spoken:</i> Yes	<i>Website:</i>	16950 VIA TAZON
<i>Provider Language(s) Spoken:</i>	<i>Email:</i>	SAN DIEGO, CA 92127-1607
<i>Cultural Competency:</i> No	<i>Medical Group(s):</i>	<i>Phone:</i> (800) 926-8273
<i>Hospital Affiliation:</i> Loma Linda University Med Ctr, Loma Linda University Childrens Hospital, Rady Childrens Hospital San Diego	<i>IPA:</i> Rady Childrens Health Network	<i>Fax:</i> (888) 539-8781
<i>Medi-Cal Open Panel:</i> Yes		<i>After Hours Phone:</i> (800) 926-8273
<i>Min/Max Age:</i> 0/99	CASTELLANOS, LUIS R	<i>Provider Gender:</i> Male
<i>American Sign Language (ASL):</i> No	<i>Provider ID:</i> 211764	<i>License number:</i> A89654
<i>Accessibility:</i>	<i>Board Certified Specialty:</i> No	<i>NPI:</i> 1013059286
<i>Hours:</i> M-SA 9AM-5PM	UCSD MEDICAL GROUP	<i>Provider English Spoken:</i> Yes
<i>Website:</i>	330 LEWIS ST FL 3	<i>Provider Language(s) Spoken:</i>
<i>Email:</i>	SAN DIEGO, CA 92103-2108	<i>Cultural Competency:</i> No
<i>Medical Group(s):</i>	<i>Phone:</i> (858) 657-8530	<i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr, Pioneers Memorial Hospital, El Centro Regional Medical Center
<i>IPA:</i> Rady Childrens Health Network	<i>Fax:</i> (619) 543-2287	<i>Medi-Cal Open Panel:</i> Yes
	<i>After Hours Phone:</i> (858) 657-8530	<i>Min/Max Age:</i> 0/999
BORQUEZ, ALEJANDRO A	<i>Provider Gender:</i> Male	<i>American Sign Language (ASL):</i> No
<i>Provider ID:</i> 284120	<i>License number:</i> A89654	<i>Accessibility:</i>
<i>Board Certified Specialty:</i> No	<i>NPI:</i> 1013059286	<i>Hours:</i> M-SA 9AM-5PM
RADY CHILDRENS HEALTH NETWORK	<i>Provider English Spoken:</i> Yes	<i>Website:</i>
3020 CHILDRENS WAY	<i>Provider Language(s) Spoken:</i>	<i>Email:</i>
	<i>Cultural Competency:</i> No	<i>Medical Group(s):</i>
	<i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr, Pioneers Memorial	<i>IPA:</i> Ucsd Medical Group

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

CHAU, PETER

Provider ID: 271427
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5855
Fax: (858) 966-7903
After Hours Phone: (858) 966-5855
Provider Gender: Male
License number: A124924
NPI: 1407146947
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Loma Linda University Childrens Hospital, Loma Linda University Med Ctr, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

COTTER, BRUNO R

Provider ID: 64554
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (619) 543-6248
Fax:
After Hours Phone: (619) 543-6248

Provider Gender: Male
License number: A67069
NPI: 1205886389
Provider English Spoken: Yes
Provider Language(s) Spoken: French, German
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

COX, JUSTIN M

Provider ID: 284604
Board Certified Specialty: No
HEALTH EXCEL IPA INC
3131 BERGER AVE STE 200
SAN DIEGO, CA 92123-4203
Phone: (858) 244-6800
Fax: (858) 244-6809
After Hours Phone: (858) 244-6800
Provider Gender: Male
License number: A132232
NPI: 1821144718
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Cedars Sinai Medical Center, Sharp Memorial Hospital, Naval Medical Ctr Sd Rbe
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

DUMMER, KIRSTEN B

Provider ID: 127310
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
3020 CHILDRENS WAY # 5008 MC
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5855
Fax:
After Hours Phone: (858) 966-5855
Provider Gender: Female
License number: C156520
NPI: 1780642280
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

DUMMER, KIRSTEN B

Provider ID: 260595
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5855
Fax: (858) 966-7903
After Hours Phone: (858)
966-5855
Provider Gender: Female
License number: C156520
NPI: 1780642280
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

DUONG, THAO T

Provider ID: 238975
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A142202
NPI: 1205272945
Provider English Spoken: Yes
Provider Language(s) Spoken:
Vietnamese
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally

Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

GOLDING, IAN F

Provider ID: 210823
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5855
Fax: (858) 966-7903
After Hours Phone: (858)
966-5855
Provider Gender: Male
License number: C157929
NPI: 1962974956
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

GOLLAPUDI, RAGHAVA R , MD

Provider ID: 270060

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
7901 FROST ST
SAN DIEGO, CA 92123-2701
Phone: (858) 499-1900
Fax:
After Hours Phone: (858)
499-1900
Provider Gender: Male
License number: A73392
NPI: 1467429191
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Scripps
Mercy Hospital Chula Vista,
Grossmont Hospital, Sharp
Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

GOLLAPUDI, RAGHAVA R , MD

Provider ID: 270061
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
6402 EL CAJON BLVD # 102
SAN DIEGO, CA 92115-2645
Phone: (858) 499-1900
Fax:
After Hours Phone: (858)
499-1900
Provider Gender: Male
License number: A73392

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>NPI: 1467429191 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Memorial Hospital, Scripps Mercy Hospital Chula Vista, Grossmont Hospital, Sharp Chula Vista Med Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc</p>	<p>No <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA:</p>	<p>FNDTN 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-5855 <i>Fax:</i> <i>After Hours Phone:</i> (858) 966-5855 <i>Provider Gender:</i> Female <i>License number:</i> A125568 <i>NPI:</i> 1023329885 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Rady Childrens Health Network</p>
<p>GREENBERG, BARRY H <i>Provider ID:</i> 64568 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 4168 FRONT ST SAN DIEGO, CA 92103-2030 <i>Phone:</i> (619) 543-6248 <i>Fax:</i> <i>After Hours Phone:</i> (619) 543-6248 <i>Provider Gender:</i> Male <i>License number:</i> G29316 <i>NPI:</i> 1093773137 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> French <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i></p>	<p>GUYON, PETER W <i>Provider ID:</i> 284116 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-5855 <i>Fax:</i> (858) 966-7903 <i>After Hours Phone:</i> (858) 966-5855 <i>Provider Gender:</i> Male <i>License number:</i> A138673 <i>NPI:</i> 1205255510 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Rady Childrens Health Network</p> <p>HALEY, JESSICA E <i>Provider ID:</i> 118754 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED</p>	<p>HO, GORDON <i>Provider ID:</i> 127036 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 4168 FRONT ST SAN DIEGO, CA 92103-2030 <i>Phone:</i> (858) 657-8530 <i>Fax:</i> <i>After Hours Phone:</i> (858) 657-8530 <i>Provider Gender:</i> Male <i>License number:</i> A117703 <i>NPI:</i> 1346516069 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Chinese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla</p>

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D. Directorio de proveedores de atención especializada

John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

JUSTINO, HENRI

Provider ID: 284123
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5855
Fax: (858) 966-7903
After Hours Phone: (858)
966-5855
Provider Gender: Male
License number: C173773
NPI: 1518036821
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

KIM, PAUL J

Provider ID: 121303
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Male
License number: A109213
NPI: 1417104837
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KIM, PAUL J

Provider ID: 244996
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A109213
NPI: 1417104837
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KING, KEVIN R

Provider ID: 122219
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Male
License number: A151729
NPI: 1437440427
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

**LEHNERT SCHUCHARDT,
ELEANOR L**

Provider ID: 127691
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5855
Fax:
After Hours Phone: (858)
966-5855
Provider Gender: Female
License number: A156946
NPI: 1760707210
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

**LEHNERT SCHUCHARDT,
ELEANOR L**

Provider ID: 262250
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 966-5855
Fax: (858) 966-7903
After Hours Phone: (858)
966-5855
Provider Gender: Female
License number: A156946
NPI: 1760707210
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/99
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

MCCANDLESS, RACHEL T

Provider ID: 86645
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN
3020 CHILDRENS WAY BLDG
24 FL 1
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5980
Fax:
After Hours Phone: (858)
966-5980
Provider Gender: Female
License number: A131801
NPI: 1487821815
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,

Childrens Hosp And Resrch Ctr
At Oakland
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

MIZZELL, ANNA M

Provider ID: 214020
Board Certified Specialty: No
UCSD MEDICAL GROUP
16950 VIA TAZON
SAN DIEGO, CA 92127-1607
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A112810
NPI: 1851561021
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MOHAMEDALI, BURHAN, MD

Provider ID: 245577

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
292 EUCLID AVE STE 210
SAN DIEGO, CA 92114-3629
Phone: (619) 616-2100

Fax: (619) 616-2104

After Hours Phone: (619)
616-2100

Provider Gender: Male

License number: A125669

NPI: 1831393289

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish, Swahili

Cultural Competency: No

Hospital Affiliation: Sharp Chula
Vista Med Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

MOUSSAVIAN, MEHRAN, MD

Provider ID: 242264

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
292 EUCLID AVE STE 210
SAN DIEGO, CA 92114-3629
Phone: (619) 616-2100

Fax: (619) 616-2104

After Hours Phone: (619)
616-2100

Provider Gender: Male

License number: 20A7241

NPI: 1689788234

Provider English Spoken: Yes

Provider Language(s) Spoken:
Farsi, Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Chula
Vista Med Ctr, Tri City Medical
Ctr, Sharp Memorial Hospital,
Alvarado Hospital Llc, Grossmont
Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 16/120

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

MUELLER, DANA M

Provider ID: 245535

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 966-5855

Fax:

After Hours Phone: (858)
966-5855

Provider Gender: Female

License number: A131157

NPI: 1184915712

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

NARAYANAN, MEENA R , MD

Provider ID: 247695

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
292 EUCLID AVE STE 210
SAN DIEGO, CA 92114-3629
Phone: (619) 616-2100

Fax: (619) 616-2104

After Hours Phone: (619)
616-2100

Provider Gender: Female

License number: A113448

NPI: 1508170697

Provider English Spoken: Yes

Provider Language(s) Spoken:
Farsi, Spanish

Cultural Competency: No

Hospital Affiliation: Sharp
Memorial Hospital, Sharp Chula
Vista Med Ctr

Medi-Cal Open Panel: No

Min/Max Age: 18/999

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

NGUYEN, TRI T

Provider ID: 121932

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
7345 LINDA VISTA RD STE A
SAN DIEGO, CA 92111-5800

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>Phone: (858) 277-5463 Fax: (858) 279-8296 After Hours Phone: (858) 277-5463 Provider Gender: Male License number: G79496 NPI: 1962598425 Provider English Spoken: Yes Provider Language(s) Spoken: Chinese, Vietnamese Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Sharp Memorial Hospital Medi-Cal Open Panel: No Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>	<p>Provider Language(s) Spoken: Chinese, Vietnamese Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Sharp Memorial Hospital Medi-Cal Open Panel: Yes Min/Max Age: 18/100 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>	<p>American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>
<p>NGUYEN, TRI T Provider ID: 205379 Board Certified Specialty: No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 4206 44TH ST SAN DIEGO, CA 92115-4820 Phone: (361) 962-4943 Fax: (619) 624-9436 After Hours Phone: (361) 962-4943 Provider Gender: Male License number: G79496 NPI: 1962598425 Provider English Spoken: Yes Provider Language(s) Spoken: Chinese, Vietnamese Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Sharp Memorial Hospital Medi-Cal Open Panel: No Min/Max Age: 0/999</p>	<p>NGUYEN, TRI T Provider ID: 270970 Board Certified Specialty: No COMMUNITY CARE IPA LLC 4206 44TH ST SAN DIEGO, CA 92115-4820 Phone: (361) 962-4943 Fax: (619) 624-9436 After Hours Phone: (361) 962-4943 Provider Gender: Male License number: G79496 NPI: 1962598425 Provider English Spoken: Yes Provider Language(s) Spoken: Chinese, Vietnamese Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Sharp Memorial Hospital Medi-Cal Open Panel: No Min/Max Age: 0/999</p>	<p>PHREANER, NICHOLAS J Provider ID: 239946 Board Certified Specialty: No UCSD MEDICAL GROUP 16950 VIA TAZON SAN DIEGO, CA 92127-1607 Phone: (800) 926-8273 Fax: After Hours Phone: (800) 926-8273 Provider Gender: Male License number: A126789 NPI: 1023373040 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group</p>
<p>SAH, SERENA P Provider ID: 101287</p>		

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D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
3020 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5855
Fax:
After Hours Phone: (858) 966-5855
Provider Gender: Female
License number: A113704
NPI: 1295042653
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SHARF, ALBERT J , MD
Provider ID: 246500
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4444 EL CAJON BLVD STE 2
SAN DIEGO, CA 92115-4392
Phone: (619) 470-7700
Fax: (619) 900-4589
After Hours Phone: (619) 470-7700
Provider Gender: Male
License number: G72122
NPI: 1649349820
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Paradise Valley Hospital, Scripps Mercy Hospital
Chula Vista, Scripps Memorial Hospital, Scripps Mercy Hospital, Alvarado Hospital Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

SHEN, JIA
Provider ID: 118285
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: A149351
NPI: 1295053403
Provider English Spoken: Yes
Provider Language(s) Spoken: Mandarin
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA:
SILVA SEPULVEDA, JOSE A
Provider ID: 119314
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5855
Fax:
After Hours Phone: (858) 966-5855
Provider Gender: Male
License number: A120119
NPI: 1417222472
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

STEINBERG, LEONARD G
Provider ID: 248208
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

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D. Directorio de proveedores de atención especializada

<p>Phone: (858) 966-5855 Fax: After Hours Phone: (858) 966-5855 Provider Gender: Male License number: C149271 NPI: 1538279484 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: Yes Min/Max Age: 0/18 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network</p>	<p>American Sign Language (ASL): FNDTN No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network</p>	<p>3020 CHILDRENS WAY FL 1 SAN DIEGO, CA 92123-4223 Phone: (858) 966-5855 Fax: After Hours Phone: (858) 966-5855 Provider Gender: Female License number: A109772 NPI: 1891004461 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network</p>
<p>STRINGER, JESSE D Provider ID: 118220 Board Certified Specialty: No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 Phone: (858) 966-5855 Fax: After Hours Phone: (858) 966-5855 Provider Gender: Male License number: A120899 NPI: 1972745388 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Rady Childrens Hospital San Diego Medi-Cal Open Panel: No Min/Max Age: None</p>	<p>THOMAS, ISAC C Provider ID: 122433 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 Phone: (619) 543-6222 Fax: After Hours Phone: (619) 543-6222 Provider Gender: Male License number: A130326 NPI: 1003129388 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:</p>	<p>VELLORE GOVARDHAN, SHILPA Provider ID: 271454 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 Phone: (858) 966-5855 Fax: (858) 966-7903 After Hours Phone: (858) 966-5855 Provider Gender: Female License number: A121935 NPI: 1477702165 Provider English Spoken: Yes</p>
<p>VAUGHN, GABRIELLE R Provider ID: 102157 Board Certified Specialty: No RADY CHILDRENS SPECIALISTS SAN DIEGO MED</p>	<p></p>	<p></p>

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D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

WALTERS, DANIEL

Provider ID: 240404

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A129565

NPI: 1659665461

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

WERHO, DAVID K

Provider ID: 118921

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED

FNDTN

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-5855

Fax:

After Hours Phone: (858)

966-5855

Provider Gender: Male

License number: A135895

NPI: 1235391863

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

WILLIAMS, MATTHEW R

Provider ID: 101011

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED

FNDTN

3020 CHILDRENS WAY FL 1

SAN DIEGO, CA 92123-4223

Phone: (858) 966-5855

Fax: (858) 966-7903

After Hours Phone: (858)

966-5855

Provider Gender: Male

License number: A109398

NPI: 1831423250

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Ucsd Medical Ctr, Childrens

Hosp And Resrch Ctr At Oakland

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

WILLIS, BRIGHAM C

Provider ID: 277972

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-5855

Fax: (858) 966-7903

After Hours Phone: (858)

966-5855

Provider Gender: Male

License number: A71310

NPI: 1598701500

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Phoenix Childrens Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

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D. Directorio de proveedores de atención especializada

No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	UCSD MEDICAL GROUP 4168 FRONT ST SAN DIEGO, CA 92103-2030 <i>Phone:</i> (619) 543-5743 <i>Fax:</i> <i>After Hours Phone:</i> (619) 543-5743 <i>Provider Gender:</i> Male <i>License number:</i> A116525 <i>NPI:</i> 1477699601 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>	<i>Hospital Affiliation:</i> Sharp Memorial Hospital, Scripps Mercy Hospital Chula Vista, Sharp Chula Vista Med Ctr, Tri City Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>
YEANG, CALVIN <i>Provider ID:</i> 238822 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 16950 VIA TAZON SAN DIEGO, CA 92127-1607 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Male <i>License number:</i> A127678 <i>NPI:</i> 1598011058 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Mandarin <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group	ATHILL, CHARLES A <i>Provider ID:</i> 53654 <i>Board Certified Specialty:</i> No SAN DIEGO CARDIAC CTR MED GRP INC 3131 BERGER AVE STE 200 SAN DIEGO, CA 92123-4203 <i>Phone:</i> (858) 244-6800 <i>Fax:</i> <i>After Hours Phone:</i> (858) 244-6800 <i>Provider Gender:</i> Male <i>License number:</i> G78671 <i>NPI:</i> 1174504252 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No	BAHADORANI, JOHN N <i>Provider ID:</i> 101234 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 4168 FRONT ST SAN DIEGO, CA 92103-2030 <i>Phone:</i> (858) 657-8530 <i>Fax:</i> <i>After Hours Phone:</i> (858) 657-8530 <i>Provider Gender:</i> Male <i>License number:</i> A123767 <i>NPI:</i> 1780883082 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi, Persian, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i>
CARDIOVASCULAR DISEASE		
ADLER, ERIC D <i>Provider ID:</i> 120563 <i>Board Certified Specialty:</i> No		

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D. Directorio de proveedores de atención especializada

Medical Group(s):

IPA:

BARNARD, DENISE D

Provider ID: 64528

Board Certified Specialty: No

UCSD MEDICAL GROUP

4168 FRONT ST

SAN DIEGO, CA 92103-2030

Phone: (619) 543-5743

Fax: (619) 543-2917

After Hours Phone: (619)

543-5743

Provider Gender: Female

License number: G65241

NPI: 1669497731

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

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

9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

CARLSON, STEVEN K

Provider ID: 238128

Board Certified Specialty: No

HEALTH EXCEL IPA INC

292 EUCLID AVE STE 210

SAN DIEGO, CA 92114-3629

Phone: (619) 616-2100

Fax: (619) 616-2104

After Hours Phone: (619)

616-2100

Provider Gender: Male

License number: A109957

NPI: 1467602946

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Garfield

Medical Center, Santa Monica

Ucla Med Ctr, Ronald Reagan

Ucla Med Ctr, Scripps Mercy

Hospital, Sharp Chula Vista Med

Ctr, Sharp Memorial Hospital,

Alvarado Hospital Llc, Grossmont

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 18/99

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc

CASTELLANOS, LUIS R

Provider ID: 64282

Board Certified Specialty: No

UCSD MEDICAL GROUP

330 LEWIS ST

SAN DIEGO, CA 92103-2108

Phone: (619) 471-9260

Fax:

After Hours Phone: (619)

471-9260

Provider Gender: Male

License number: A89654

NPI: 1013059286

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr, Pioneers Memorial

Hospital, El Centro Regional

Medical Center

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

CHUNG, KIYON

Provider ID: 246315

Board Certified Specialty: No

HEALTH EXCEL IPA INC

4060 4TH AVE STE 650

SAN DIEGO, CA 92103-2121

Phone: (619) 819-7222

Fax: (619) 299-5023

After Hours Phone: (619)

819-7222

Provider Gender: Female

License number: C54514

NPI: 1972517910

Provider English Spoken: Yes

Provider Language(s) Spoken:

Korean

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital, Scripps Mercy Hospital

Chula Vista

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

DEMARIA, ANTHONY N

Provider ID: 64558

Board Certified Specialty: No

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D. Directorio de proveedores de atención especializada

UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (619) 543-6248
Fax:
After Hours Phone: (619)
543-6248
Provider Gender: Male
License number: G20471
NPI: 1124043948
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FELD, GREGORY K

Provider ID: 64560
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (619) 543-6248
Fax: (619) 543-7418
After Hours Phone: (619)
543-6248
Provider Gender: Male
License number: G37258
NPI: 1720003924
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FRIEDMAN, RICHARD G

Provider ID: 246324
Board Certified Specialty: No
HEALTH EXCEL IPA INC
4060 4TH AVE STE 650
SAN DIEGO, CA 92103-2121
Phone: (619) 819-7222
Fax: (619) 299-5023
After Hours Phone: (619)
819-7222
Provider Gender: Male
License number: G32430
NPI: 1881789196
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Scripps
Mercy Hospital, Scripps Mercy
Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 18/99
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

GLASSMAN, JERROLD

Provider ID: 246319

Board Certified Specialty: No
HEALTH EXCEL IPA INC
4060 4TH AVE STE 650
SAN DIEGO, CA 92103-2121
Phone: (619) 819-7222
Fax: (619) 299-5023
After Hours Phone: (619)
819-7222
Provider Gender: Male
License number: G34309
NPI: 1245326883
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital Chula Vista, Scripps
Mercy Hospital
Medi-Cal Open Panel: No
Min/Max Age: 18/99
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

GOLLAPUDI, RAGHAVA R

Provider ID: 221389
Board Certified Specialty: No
HEALTH EXCEL IPA INC
3131 BERGER AVE STE 200
SAN DIEGO, CA 92123-4203
Phone: (858) 244-6800
Fax: (858) 244-6809
After Hours Phone: (858)
244-6800
Provider Gender: Male
License number: A73392
NPI: 1467429191
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Scripps Mercy Hospital Chula Vista, Grossmont Hospital, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

GORDON, JOHN B
Provider ID: 278284
Board Certified Specialty: No
HEALTH EXCEL IPA INC
3131 BERGER AVE STE 200
SAN DIEGO, CA 92123-4203
Phone: (858) 244-6800
Fax: (858) 244-6809
After Hours Phone: (858) 244-6800
Provider Gender: Male
License number: C42631
NPI: 1962483099
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/110
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Health Excel Ipa Inc
GORDON, JOHN B
Provider ID: 53855
Board Certified Specialty: No
SAN DIEGO CARDIAC CTR
MED GRP INC
3131 BERGER AVE STE 200
SAN DIEGO, CA 92123-4203
Phone: (858) 244-6800
Fax:
After Hours Phone: (858) 244-6800
Provider Gender: Male
License number: C42631
NPI: 1962483099
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

HOAGLAND, PETER M
Provider ID: 53768
Board Certified Specialty: No
SAN DIEGO CARDIAC CTR
MED GRP INC
3131 BERGER AVE STE 200
SAN DIEGO, CA 92123-4203
Phone: (858) 244-6800
Fax:
After Hours Phone: (858) 244-6800
Provider Gender: Male

License number: G54598
NPI: 1629059779
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Sharp Mary Birch Hosp For Women And Newborns, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

KERAMATI, SHAHIN
Provider ID: 53717
Board Certified Specialty: No
HEALTH EXCEL IPA INC
501 WASHINGTON ST STE 512
SAN DIEGO, CA 92103-2238
Phone: (619) 297-0014
Fax: (619) 297-1014
After Hours Phone: (619) 297-0014
Provider Gender: Male
License number: G80033
NPI: 1568479392
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi
Cultural Competency: No
Hospital Affiliation: Sharp Coronado Hosp And Healthcare Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

LY, NANCY L

Provider ID: 275481
Board Certified Specialty: No
HEALTH EXCEL IPA INC
4844 UNIVERSITY AVE STE A
SAN DIEGO, CA 92105-8021
Phone: (619) 434-4288
Fax: (619) 434-4315
After Hours Phone: (619) 434-4288
Provider Gender: Female
License number: A125595
NPI: 1295007144
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

MAI, TUAN V

Provider ID: 265367
Board Certified Specialty: No
HEALTH EXCEL IPA INC
501 WASHINGTON ST STE 512
SAN DIEGO, CA 92103-2238

Phone: (619) 297-0014
Fax: (619) 297-1014
After Hours Phone: (619) 297-0014
Provider Gender: Male
License number: A113870
NPI: 1326280231
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital, Sharp Chula Vista Med Ctr, Sharp Coronado Hosp And Healthcare Ctr, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

MEHTA, HIRSCH S

Provider ID: 275525
Board Certified Specialty: No
HEALTH EXCEL IPA INC
3131 BERGER AVE STE 200
SAN DIEGO, CA 92123-4203
Phone: (858) 244-6800
Fax: (858) 244-6809
After Hours Phone: (858) 244-6800
Provider Gender: Male
License number: A105910
NPI: 1407099799
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No

Hospital Affiliation: Sharp Memorial Hospital, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/110
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

MOHAMEDALI, BURHAN

Provider ID: 238121
Board Certified Specialty: No
HEALTH EXCEL IPA INC
292 EUCLID AVE STE 210
SAN DIEGO, CA 92114-3629
Phone: (619) 616-2100
Fax: (619) 616-2104
After Hours Phone: (619) 616-2100
Provider Gender: Male
License number: A125669
NPI: 1831393289
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Swahili
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

MOUSSAVIAN, MEHRAN

Provider ID: 238396
Board Certified Specialty: No
HEALTH EXCEL IPA INC
292 EUCLID AVE STE 210
SAN DIEGO, CA 92114-3629
Phone: (619) 616-2100
Fax: (619) 616-2104
After Hours Phone: (619) 616-2100
Provider Gender: Male
License number: 20A7241
NPI: 1689788234
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Sharp Memorial Hospital, Tri City Medical Ctr, Alvarado Hospital Llc, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 16/120
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

MOUSSAVIAN, MEHRAN

Provider ID: 265302
Board Certified Specialty: No
HEALTH EXCEL IPA INC
16918 DOVE CANYON RD STE 103
SAN DIEGO, CA 92127-3455

Phone: (858) 649-5100
Fax: (858) 649-5099
After Hours Phone: (858) 649-5100
Provider Gender: Male
License number: 20A7241
NPI: 1689788234
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Sharp Memorial Hospital, Tri City Medical Ctr, Alvarado Hospital Llc, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 16/120
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

NANAVATI, VIMAL I

Provider ID: 268056
Board Certified Specialty: No
HEALTH EXCEL IPA INC
6655 ALVARADO RD
SAN DIEGO, CA 92120-5208
Phone: (619) 229-3170
Fax: (619) 229-7079
After Hours Phone: (619) 229-3170
Provider Gender: Male
License number: G83522
NPI: 1851408082
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado

Community Hospital, Paradise Valley Hospital, Alvarado Hospital Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

NARAYANAN, MEENA R

Provider ID: 238133
Board Certified Specialty: No
HEALTH EXCEL IPA INC
292 EUCLID AVE STE 210
SAN DIEGO, CA 92114-3629
Phone: (619) 616-2100
Fax: (619) 616-2104
After Hours Phone: (619) 616-2100
Provider Gender: Female
License number: A113448
NPI: 1508170697
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/99
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,

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D. Directorio de proveedores de atención especializada

Health Excel Ipa Inc

NARULA, ARVIN P

Provider ID: 218622

Board Certified Specialty: No

HEALTH EXCEL IPA INC

3131 BERGER AVE STE 200

SAN DIEGO, CA 92123-4203

Phone: (858) 244-6800

Fax: (858) 244-6809

After Hours Phone: (858)

244-6800

Provider Gender: Male

License number: A125186

NPI: 1144535709

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

NGUYEN, TRI T

Provider ID: 269954

Board Certified Specialty: No

HEALTH EXCEL IPA INC

4206 44TH ST

SAN DIEGO, CA 92115-4820

Phone: (361) 962-4943

Fax: (619) 624-9436

After Hours Phone: (361)

962-4943

Provider Gender: Male

License number: G79496

NPI: 1962598425

Provider English Spoken: Yes

Provider Language(s) Spoken:

Chinese, Vietnamese

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital, Scripps Mercy Hospital

Chula Vista, Sharp Memorial

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Blue Shield Promise Health

Plan Direct, Community Care Ipa

Llc, Health Excel Ipa Inc, Imperial

Health Holdings Medical

Group-Sd

NGUYEN, TRI T

Provider ID: 269955

Board Certified Specialty: No

HEALTH EXCEL IPA INC

7345 LINDA VISTA RD STE A

SAN DIEGO, CA 92111-5800

Phone: (858) 277-5463

Fax: (858) 279-8296

After Hours Phone: (858)

277-5463

Provider Gender: Male

License number: G79496

NPI: 1962598425

Provider English Spoken: Yes

Provider Language(s) Spoken:

Chinese, Vietnamese

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital, Scripps Mercy Hospital

Chula Vista, Sharp Memorial

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Blue Shield Promise Health

Plan Direct, Community Care Ipa

Llc, Health Excel Ipa Inc, Imperial

Health Holdings Medical

Group-Sd

NUNEZ GARCIA, ARISMENDY S

Provider ID: 280025

Board Certified Specialty: No

HEALTH EXCEL IPA INC

3131 BERGER AVE STE 200

SAN DIEGO, CA 92123-4203

Phone: (858) 244-6800

Fax: (858) 244-6809

After Hours Phone: (858)

244-6800

Provider Gender: Male

License number: A171872

NPI: 1013236330

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

PARIKH, MILIND D

Provider ID: 238195

Board Certified Specialty: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

HEALTH EXCEL IPA INC
292 EUCLID AVE STE 210
SAN DIEGO, CA 92114-3629
Phone: (619) 616-2100
Fax: (619) 616-2104
After Hours Phone: (619)
616-2100
Provider Gender: Male
License number: 20A13745
NPI: 1194161406
Provider English Spoken: Yes
Provider Language(s) Spoken:
Gujarati, Hindi, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/99
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

PARIZO, JUSTIN T
Provider ID: 284538
Board Certified Specialty: No
HEALTH EXCEL IPA INC
3131 BERGER AVE STE 200
SAN DIEGO, CA 92123-4203
Phone: (858) 244-6800
Fax: (858) 244-6809
After Hours Phone: (858)
244-6800
Provider Gender: Male
License number: A139952
NPI: 1023438637
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No

Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

PATEL, MITUL P
Provider ID: 64131
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Male
License number: A95406
NPI: 1457572448
Provider English Spoken: Yes
Provider Language(s) Spoken:
Gujarati, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SALAMI, BOBAK
Provider ID: 265353
Board Certified Specialty: No

HEALTH EXCEL IPA INC
501 WASHINGTON ST STE 512
SAN DIEGO, CA 92103-2238
Phone: (619) 297-0014
Fax: (619) 297-1014
After Hours Phone: (619)
297-0014
Provider Gender: Male
License number: A75049
NPI: 1891700340
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Sharp
Coronado Hosp And Healthcare
Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

SCLAR, CRAIG M
Provider ID: 43642
Board Certified Specialty: No
HEALTH EXCEL IPA INC
7830 CLAIREMONT MESA
BLVD STE 100
SAN DIEGO, CA 92111-1632
Phone: (858) 268-1111
Fax: (858) 268-0761
After Hours Phone: (858)
268-1111
Provider Gender: Male
License number: A36023
NPI: 1730114497
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

SHEREV, DIMITRI A

Provider ID: 107321
Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC
6402 EL CAJON BLVD # 100
SAN DIEGO, CA 92115-2645
Phone: (619) 582-4490
Fax: (619) 668-1554
After Hours Phone: (619) 582-4490
Provider Gender: Male
License number: A70917
NPI: 1154323996
Provider English Spoken: Yes
Provider Language(s) Spoken: Bulgarian, Malayalam, Russian, Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Alvarado Community Hospital, Sharp Memorial Hospital, Scripps Memorial Hospital, Alvarado Hospital Llc, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W

Hours: M-F 7:30AM-4PM, SA 9AM-5PM
Website: bnmg.org
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

SHEREV, DIMITRI A

Provider ID: 276846
Board Certified Specialty: No
HEALTH EXCEL IPA INC
6402 EL CAJON BLVD # 102
SAN DIEGO, CA 92115-2645
Phone: (619) 582-4490
Fax: (619) 582-4737
After Hours Phone: (619) 582-4490
Provider Gender: Male
License number: A70917
NPI: 1154323996
Provider English Spoken: Yes
Provider Language(s) Spoken: Bulgarian, Malayalam, Russian, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Grossmont Hospital, Alvarado Community Hospital, Sharp Memorial Hospital, Scripps Memorial Hospital, Alvarado Hospital Llc, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

SHETABI, KAMBIZ

Provider ID: 257164
Board Certified Specialty: No
HEALTH EXCEL IPA INC
292 EUCLID AVE STE 210
SAN DIEGO, CA 92114-3629
Phone: (619) 616-2100
Fax: (619) 616-2104
After Hours Phone: (619) 616-2100
Provider Gender: Male
License number: A126187
NPI: 1972827806
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

CERTIFIED BEHAVIORAL ANALYST DOCTORATE

HOWARTH, MATTHEW

Provider ID: 103967
Board Certified Specialty: No
VERBAL BEHAVIOR ASSOCIATES
15373 INNOVATION DR STE 200
SAN DIEGO, CA 92128-3425

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 699-7579
Fax:
After Hours Phone: (858)
699-7579
Provider Gender: Male
License number: BCBA4385
NPI: 1629338082
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CERTIFIED BEHAVIORAL ANALYST MASTERS

ANDERSON, RENEE
Provider ID: 116603
Board Certified Specialty: No
ABACUS BEHAVIORAL
HEALTH
4204A ADAMS AVE
SAN DIEGO, CA 92116-2300
Phone: (619) 786-0074
Fax: (619) 202-7741
After Hours Phone: (619)
786-0074
Provider Gender: Female
License number: BCBA17411
NPI: 1952774028
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No

Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 9AM-5PM, SA
9AM-5PM
Website: www.abacusd.com
Email:
Medical Group(s):
IPA:

CALARCO, KATHERINE
Provider ID: 116600
Board Certified Specialty: No
ABACUS BEHAVIORAL
HEALTH
4204A ADAMS AVE
SAN DIEGO, CA 92116-2300
Phone: (619) 786-0074
Fax: (619) 202-7741
After Hours Phone: (619)
786-0074
Provider Gender: Female
License number: BCBA2509
NPI: 1528216876
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 9AM-5PM, SA
9AM-5PM
Website: www.abacusd.com
Email:
Medical Group(s):
IPA:

ESSEY, MEREDITH
Provider ID: 105856
Board Certified Specialty: No
VERBAL BEHAVIOR

ASSOCIATES
15373 INNOVATION DR STE
200
SAN DIEGO, CA 92128-3425
Phone: (858) 699-7579
Fax:
After Hours Phone: (858)
699-7579
Provider Gender: Female
License number: BCBA11417862
NPI: 1508256736
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GRUNDON, GRETCHEN
Provider ID: 105857
Board Certified Specialty: No
VERBAL BEHAVIOR
ASSOCIATES
15373 INNOVATION DR STE
200
SAN DIEGO, CA 92128-3425
Phone: (858) 699-7579
Fax:
After Hours Phone: (858)
699-7579
Provider Gender: Female
License number: BCBA11212007
NPI: 1346581063
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
⌘ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

JOHANNSEN, KAITLIN

Provider ID: 103981
Board Certified Specialty: No
VERBAL BEHAVIOR
ASSOCIATES
15373 INNOVATION DR STE 200
SAN DIEGO, CA 92128-3425
Phone: (858) 699-7579
Fax:
After Hours Phone: (858) 699-7579
Provider Gender: Female
License number: BCBA9560
NPI: 1619370681
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
⌘ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LO, CRYSTAL

Provider ID: 105860
Board Certified Specialty: No
VERBAL BEHAVIOR

ASSOCIATES
15373 INNOVATION DR STE 200
SAN DIEGO, CA 92128-3425
Phone: (858) 699-7579
Fax:
After Hours Phone: (858) 699-7579
Provider Gender: Female
License number: BCBA19702
NPI: 1184020760
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
⌘ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LUND, CHRISTINA

Provider ID: 107337
Board Certified Specialty: No
AUTISM SPECTRUM THERAPIES
9445 FARNHAM ST STE 104
SAN DIEGO, CA 92123-1399
Phone: (866) 727-8274
Fax:
After Hours Phone: (866) 727-8274
Provider Gender: Female
License number: BCBA25064
NPI: 1508176314
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No

Min/Max Age: None
American Sign Language (ASL): No
⌘ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MACHADO, AMY

Provider ID: 105863
Board Certified Specialty: No
INCLUDE AUTISM INC
625 PENNSYLVANIA AVE
SAN DIEGO, CA 92103-4321
Phone: (858) 603-9835
Fax:
After Hours Phone: (858) 603-9835
Provider Gender: Female
License number: BCBA11210466
NPI: 1205192093
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
⌘ Accessibility:
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MASON, DIANA

Provider ID: 118102
Board Certified Specialty: No
INCLUDE AUTISM INC
625 PENNSYLVANIA AVE
SAN DIEGO, CA 92103-4321

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D. Directorio de proveedores de atención especializada

Phone: (858) 603-9835
Fax:
After Hours Phone: (858)
603-9835
Provider Gender: Female
License number: BCBA23279
NPI: 1285172858
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MONCLUS, BRITTANY

Provider ID: 116927
Board Certified Specialty: No
CENTER FOR AUTISM AND
RELATED DISORDER
7297 RONSON RD STE H
SAN DIEGO, CA 92111-1428
Phone: (858) 278-6603
Fax: (866) 287-2383
After Hours Phone: (858)
278-6603
Provider Gender: Female
License number: BCBA22800
NPI: 1356894109
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

PEARCE, TAYLOR

Provider ID: 106341
Board Certified Specialty: No
OPTIMUM BEHAVIORAL
HEALTH
3702 RUFFIN RD STE 100
SAN DIEGO, CA 92123-1893
Phone: (619) 297-4300
Fax:
After Hours Phone: (619)
297-4300
Provider Gender: Female
License number: BCBA12133
NPI: 1396084935
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 9AM-6PM, SA
9AM-5PM
Website: optimum behavioral
health.com
Email:
Medical Group(s):
IPA:

POPE, CATHERINE

Provider ID: 103983
Board Certified Specialty: No
VERBAL BEHAVIOR
ASSOCIATES
15373 INNOVATION DR STE
200

SAN DIEGO, CA 92128-3425
Phone: (858) 699-7579
Fax:
After Hours Phone: (858)
699-7579
Provider Gender: Female
License number: BCBA13424
NPI: 1265840763
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SALUCCI, CRISTIANA

Provider ID: 107365
Board Certified Specialty: No
INCLUDE AUTISM INC
625 PENNSYLVANIA AVE
SAN DIEGO, CA 92103-4321
Phone: (858) 603-9835
Fax:
After Hours Phone: (858)
603-9835
Provider Gender: Female
License number: BCBA11621760
NPI: 1093199671
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

SWAIN, JAZMINA

Provider ID: 104803

Board Certified Specialty: No
AUTISM SPECTRUM
THERAPIES

9445 FARNHAM ST STE 104
SAN DIEGO, CA 92123-1399
Phone: (866) 727-8274

Fax:

After Hours Phone: (866)
727-8274

Provider Gender: Female

License number: BCBA17031

NPI: 1144618117

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

URIBE, ANNETTE

Provider ID: 105872

Board Certified Specialty: No
AUTISM SPECTRUM
THERAPIES

9445 FARNHAM ST STE 104
SAN DIEGO, CA 92123-1399

Phone: (866) 727-8274

Fax:

After Hours Phone: (866)
727-8274

Provider Gender: Female

License number: BCBA11521119

NPI: 1528426012

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

VOLEN, SHAWNA

Provider ID: 106468

Board Certified Specialty: No
AUTISM SPECTRUM
THERAPIES

9445 FARNHAM ST STE 104
SAN DIEGO, CA 92123-1399
Phone: (866) 727-8274

Fax:

After Hours Phone: (866)
727-8274

Provider Gender: Female

License number: BCBA18995

NPI: 1710360417

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

CERTIFIED MIDWIFE (NON RN)

RAY, BROOKE E

Provider ID: 284635

Board Certified Specialty: No
HEALTH EXCEL IPA INC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608
Phone: (619) 280-4213

Fax: (619) 795-9849

After Hours Phone: (888)

216-8982

Provider Gender: Female

License number: NM1398

NPI: 1760557136

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

RAY, BROOKE E

Provider ID: 284635

Board Certified Specialty: No
HEALTH EXCEL IPA INC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

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D. Directorio de proveedores de atención especializada

Phone: (619) 280-4213
Fax: (619) 795-9849
After Hours Phone: (888) 216-8982
Provider Gender: Female
License number: NP11068
NPI: 1760557136
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

CERTIFIED NURSE PRACTITIONER

ABARE, KATHRYN H
Provider ID: 262187
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY STE 410
SAN DIEGO, CA 92123-4228
Phone: (858) 966-6789
Fax: (858) 966-6706
After Hours Phone: (858) 966-6789
Provider Gender: Female
License number: NP95003999
NPI: 1609147651
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady

Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/99
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

ABCEDE, EMILY A
Provider ID: 263772
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5855
Fax: (858) 966-7903
After Hours Phone: (858) 966-5855
Provider Gender: Female
License number: NP95007801
NPI: 1548654916
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

ABDOU, KRISTY R

Provider ID: 104606
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: NP19601
NPI: 1487801817
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

AGUILAR, JIRA JANE B
Provider ID: 284158
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
8001 FROST ST
SAN DIEGO, CA 92123-2746
Phone: (858) 966-5999
Fax: (858) 966-4930
After Hours Phone: (858) 966-5999
Provider Gender: Female
License number: NP95016636
NPI: 1376136770
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

AJMERA, ARCHANA J

Provider ID: 126606
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Female
License number: NP22933
NPI: 1063792240
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

AKINS, TARA M

Provider ID: 112490
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Female
License number: NP14090
NPI: 1548475072
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ALBANO, RIZALINA, NPA

Provider ID: 271000
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9610 GRANITE RIDGE DR STE
B
SAN DIEGO, CA 92123-2684
Phone: (619) 461-3880
Fax: (619) 461-3895
After Hours Phone: (619)
461-3880
Provider Gender: Female
License number: NP95005436
NPI: 1811430820
Provider English Spoken: Yes
Provider Language(s) Spoken:
Tagalog
Cultural Competency: No

Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

ALVAREZ, LISA J

Provider ID: 125378
Board Certified Specialty: No
LOGAN HEIGHTS FAMILY
HEALTH CENTER
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2560
Fax:
After Hours Phone: (619)
515-2560
Provider Gender: Female
License number: NP19911
NPI: 1417262718
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

AMER DAVIS, STACY K

Provider ID: 83186
Board Certified Specialty: No

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D. Directorio de proveedores de atención especializada

UCSD EMERG PHYSICIANS
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Female
License number: NP20267
NPI: 1750661641
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ARCANGEL, ANGEL I

Provider ID: 270380
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
995 GATEWAY CENTER WAY
STE 202
SAN DIEGO, CA 92102-4545
Phone: (619) 264-3107
Fax: (619) 264-6927
After Hours Phone: (619)
264-3107
Provider Gender: Female
License number: NP95012405
NPI: 1801319306
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes

Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

BACANI, GRACE M

Provider ID: 256096
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: NP95001006
NPI: 1093124703
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BAKER, TANYA E

Provider ID: 255625
Board Certified Specialty: No
UCSD MEDICAL GROUP
4510 EXECUTIVE DR

SAN DIEGO, CA 92121-3021
Phone: (858) 534-8019
Fax:
After Hours Phone: (858)
534-8019
Provider Gender: Female
License number: NP95004209
NPI: 1699184259
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BALL, KELLY R

Provider ID: 110935
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Female
License number: NP95004819
NPI: 1902343833
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>	UCSD MEDICAL GROUP 4168 FRONT ST SAN DIEGO, CA 92103-2030 <i>Phone:</i> (858) 657-1636 <i>Fax:</i> (619) 543-6500 <i>After Hours Phone:</i> (858) 657-1636 <i>Provider Gender:</i> Female <i>License number:</i> NP10291 <i>NPI:</i> 1700099645 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network, Ucsd Medical Group	<i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network, Ucsd Medical Group
BARBA, LAURA A <i>Provider ID:</i> 109544 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3030 CHILDRENS WAY FL 2 SAN DIEGO, CA 92123-4232 <i>Phone:</i> (858) 966-4003 <i>Fax:</i> <i>After Hours Phone:</i> (858) 966-4003 <i>Provider Gender:</i> Female <i>License number:</i> NP10291 <i>NPI:</i> 1700099645 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network, Ucsd Medical Group	BARBA, LAURA A <i>Provider ID:</i> 255791 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 330 LEWIS ST SAN DIEGO, CA 92103-2108 <i>Phone:</i> (619) 543-7496 <i>Fax:</i> <i>After Hours Phone:</i> (619) 543-7496 <i>Provider Gender:</i> Female <i>License number:</i> NP10291 <i>NPI:</i> 1700099645 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego	BARBA, LAURA A <i>Provider ID:</i> 262151 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3030 CHILDRENS WAY STE 410 SAN DIEGO, CA 92123-4228 <i>Phone:</i> (858) 966-4032 <i>Fax:</i> (858) 966-6227 <i>After Hours Phone:</i> (858) 966-4032 <i>Provider Gender:</i> Female <i>License number:</i> NP10291 <i>NPI:</i> 1700099645 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> 0/99 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network, Ucsd Medical Group
BARBA, LAURA A <i>Provider ID:</i> 110350 <i>Board Certified Specialty:</i> No	BARBA, LAURA A <i>Provider ID:</i> 255791 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 330 LEWIS ST SAN DIEGO, CA 92103-2108 <i>Phone:</i> (619) 543-7496 <i>Fax:</i> <i>After Hours Phone:</i> (619) 543-7496 <i>Provider Gender:</i> Female <i>License number:</i> NP10291 <i>NPI:</i> 1700099645 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego	BATAC, NADINE M

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider ID: 254564
Board Certified Specialty: No
HEALTH EXCEL IPA INC
7525 METROPOLITAN DR STE
302
SAN DIEGO, CA 92108-4404
Phone: (619) 761-5308
Fax: (619) 752-3968
After Hours Phone: (619)
761-5308
Provider Gender: Female
License number: NP21763
NPI: 1942657937

Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

BELL, KAREN L

Provider ID: 83213
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Female
License number: NP349853
NPI: 1982632758
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BELL, KAREN L

Provider ID: 83214
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST
SAN DIEGO, CA 92103-2108
Phone: (619) 471-9260
Fax:
After Hours Phone: (619)
471-9260
Provider Gender: Female
License number: NP349853
NPI: 1982632758
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BENARD, ROBERT A

Provider ID: 268229
Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: NP95000121
NPI: 1184027724
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, University
Hsp Of San Diego Co
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BENNETT, REBECCA

Provider ID: 109564
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDRN
3020 CHILDRENS WAY # 5063
MC
SAN DIEGO, CA 92123-4223
Phone: (858) 966-4073
Fax:
After Hours Phone: (858)
966-4073
Provider Gender: Female
License number: NP10150
NPI: 1558575076
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

BENNETT, REBECCA

Provider ID: 262298
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8974
Fax: (858) 966-4051
After Hours Phone: (858)
966-8974
Provider Gender: Female
License number: NP10150
NPI: 1558575076
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/99
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

BERNARDO-GREGORY, ELSIE S , NPA

Provider ID: 244829
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9995 CARMEL MOUNTAIN RD
STE B10
SAN DIEGO, CA 92129-2889
Phone: (844) 200-2426
Fax: (858) 240-6470
After Hours Phone: (844)
200-2426
Provider Gender: Female
License number: NP15257
NPI: 1588808349
Provider English Spoken: Yes
Provider Language(s) Spoken:
Tagalog
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

BERNARDO-GREGORY, ELSIE S , NPA

Provider ID: 244830
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9995 CARMEL MOUNTAIN RD
STE B11
SAN DIEGO, CA 92129-2889
Phone: (844) 200-2426
Fax: (858) 240-6470
After Hours Phone: (844)
200-2426
Provider Gender: Female

License number: NP15257
NPI: 1588808349
Provider English Spoken: Yes
Provider Language(s) Spoken:
Tagalog
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

BIANCO, ANDREA D

Provider ID: 115264
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Female
License number: RN551574
NPI: 1720326952
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

BIANCO, ANDREA D

Provider ID: 115264
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Female
License number: NP22530
NPI: 1720326952
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BILENKAYA, IRINA

Provider ID: 83240
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Female
License number: NP15880
NPI: 1801030267
Provider English Spoken: Yes
Provider Language(s) Spoken:
Russian, Ukrainian

Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BINAVI, HOWNAZ Z

Provider ID: 256104
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9339 GENESEE AVE STE 350
SAN DIEGO, CA 92121-2150
Phone: (858) 454-4300
Fax: (858) 454-5088
After Hours Phone: (858)
454-4300
Provider Gender: Female
License number: NP95010956
NPI: 1083276273
Provider English Spoken: Yes
Provider Language(s) Spoken:
Kurdish, Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

BINAVI, HOWNAZ Z

Provider ID: 256105

Board Certified Specialty: No
HEALTH EXCEL IPA INC
4060 4TH AVE STE 415
SAN DIEGO, CA 92103-2121
Phone: (619) 298-9809
Fax: (619) 298-9823
After Hours Phone: (619)
298-9809
Provider Gender: Female
License number: NP95010956
NPI: 1083276273
Provider English Spoken: Yes
Provider Language(s) Spoken:
Kurdish, Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

BOLIVAR, NATALIE A

Provider ID: 268648
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8000
Fax: (858) 966-7433
After Hours Phone: (858)
966-8000
Provider Gender: Female
License number: NP95004672
NPI: 1083169296
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Southwest Healthcare System Murrieta, Southwest Healthcare System Wildomar, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

BOSLEY, JAZMYNE A

Provider ID: 279141
Board Certified Specialty: No
HEALTH EXCEL IPA INC
10251 VISTA SORRENTO PKWY STE 280
SAN DIEGO, CA 92121-3776
Phone: (818) 575-6351
Fax: (289) 236-3022
After Hours Phone: (818) 575-6351
Provider Gender: Female
License number: NP95010166
NPI: 1932583150
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 50/120
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

BUCKLEY, MAUREEN D

Provider ID: 110384
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: NP95001205
NPI: 1619377447
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BUCKLEY, PATRICIA J

Provider ID: 279061
Board Certified Specialty: No
HEALTH EXCEL IPA INC
16918 DOVE CANYON RD STE 103
SAN DIEGO, CA 92127-3455
Phone: (858) 649-5100
Fax: (858) 649-5099
After Hours Phone: (858) 649-5100
Provider Gender: Female
License number: NP95015705
NPI: 1700470200
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 17/120
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

BUENROSTRO, CHRISTINA

Provider ID: 243718
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NP95004366
NPI: 1851749253
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CAIN, JULIA M

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider ID: 83250
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Female
License number: NP18867
NPI: 1457593808
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CALLAHAN, ABIGAIL B

Provider ID: 102155
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN
3020 CHILDRENS WAY # 410
SAN DIEGO, CA 92123-4223
Phone: (858) 966-6789
Fax:
After Hours Phone: (858)
966-6789
Provider Gender: Female
License number: NP95001371
NPI: 1649655317
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

CALLAHAN, ABIGAIL B

Provider ID: 262165
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY # 300
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8974
Fax: (858) 966-6721
After Hours Phone: (858)
966-8974
Provider Gender: Female
License number: NP95001371
NPI: 1649655317
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

CAMARGO-LOWTHERS, ANGELICA M

Provider ID: 241988
Board Certified Specialty: No
HEALTH EXCEL IPA INC
8010 FROST ST STE 510
SAN DIEGO, CA 92123-4284
Phone: (858) 637-4700
Fax: (858) 637-4701
After Hours Phone: (858)
637-4700
Provider Gender: Female
License number: NP14412
NPI: 1912982539
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/120
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

CAMARGO-LOWTHERS, ANGELICA M

Provider ID: 241988
Board Certified Specialty: No
HEALTH EXCEL IPA INC
8010 FROST ST STE 510
SAN DIEGO, CA 92123-4284
Phone: (858) 637-4700
Fax: (858) 637-4701
After Hours Phone: (858)
637-4700
Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: RN521048
NPI: 1912982539
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/120
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

CAMARGO-LOWTHERS, ANGELICA M , NPA

Provider ID: 270981
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
8010 FROST ST STE 510
SAN DIEGO, CA 92123-4284
Phone: (858) 637-4700
Fax: (858) 637-4701
After Hours Phone: (858)
637-4700
Provider Gender: Female
License number: RN521048
NPI: 1912982539
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

CAMARGO-LOWTHERS, ANGELICA M , NPA

Provider ID: 270981
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
8010 FROST ST STE 510
SAN DIEGO, CA 92123-4284
Phone: (858) 637-4700
Fax: (858) 637-4701
After Hours Phone: (858)
637-4700
Provider Gender: Female
License number: NP14412
NPI: 1912982539
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

CAMARGO-LOWTHERS, ANGELICA M

Provider ID: 54944
Board Certified Specialty: No
BALBOA NEPHROLOGY MED
GRP INC

8010 FROST ST STE 510
SAN DIEGO, CA 92123-4284
Phone: (858) 637-4700
Fax: (858) 637-4701
After Hours Phone: (858)
637-4700
Provider Gender: Female
License number: RN521048
NPI: 1912982539
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

CAMARGO-LOWTHERS, ANGELICA M

Provider ID: 54944
Board Certified Specialty: No
BALBOA NEPHROLOGY MED
GRP INC
8010 FROST ST STE 510
SAN DIEGO, CA 92123-4284
Phone: (858) 637-4700
Fax: (858) 637-4701
After Hours Phone: (858)
637-4700
Provider Gender: Female
License number: NP14412
NPI: 1912982539
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

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D. Directorio de proveedores de atención especializada

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♻️ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc, Imperial

Health Holdings Medical

Group-Sd

CAPOZZI, JENNIFER E

Provider ID: 241031

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: NP11056

NPI: 1336258276

Provider English Spoken: Yes

Provider Language(s) Spoken:

Tagalog

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♻️ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

CARRION GELABERT, ANA M

Provider ID: 262207

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

8001 FROST ST

SAN DIEGO, CA 92123-2746

Phone: (858) 966-8052

Fax: (858) 966-7789

After Hours Phone: (858)

966-8052

Provider Gender: Female

License number: NP95000052

NPI: 1023178233

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: 0/99

American Sign Language (ASL):

No

♻️ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

CHASE, AVA LOU C

Provider ID: 83281

Board Certified Specialty: No

CITY HEIGHTS FAMILY

HEALTH CENTERS INC

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2400

Fax:

After Hours Phone: (619)

515-2400

Provider Gender: Female

License number: NP95000602

NPI: 1164496386

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♻️ *Accessibility:* ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): City Heights

Family Health Centers Inc

IPA:

CHAVEZ, ALEXANDRIA D

Provider ID: 243357

Board Certified Specialty: No

UCSD MEDICAL GROUP

4510 EXECUTIVE DR # 7

SAN DIEGO, CA 92121-3021

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: NP95012447

NPI: 1811543622

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♻️ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

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D. Directorio de proveedores de atención especializada

CHUNG, JAYME F

Provider ID: 280137
Board Certified Specialty: No
HEALTH EXCEL IPA INC
16918 DOVE CANYON RD STE 103
SAN DIEGO, CA 92127-3455
Phone: (858) 309-6585
Fax: (858) 609-7190
After Hours Phone: (858) 309-6585
Provider Gender: Female
License number: NP95016703
NPI: 1861794943
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 17/120
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

CHURCHMAN, CATHERINE M

Provider ID: 277170
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5961
Fax: (858) 966-6791
After Hours Phone: (858) 966-5961
Provider Gender: Female
License number: NP95016265
NPI: 1407442049
Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

COLLIER, SUMMER B

Provider ID: 113776
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST FL 2
SAN DIEGO, CA 92103-2030
Phone: (619) 543-5415
Fax:
After Hours Phone: (619) 543-5415
Provider Gender: Female
License number: NP19943
NPI: 1487964235
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

COLLINSWORTH, JESSICA B

Provider ID: 259724
Board Certified Specialty: No
HEALTH EXCEL IPA INC
5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123-1338
Phone: (858) 571-3630
Fax: (858) 430-3146
After Hours Phone: (858) 571-3630
Provider Gender: Female
License number: NP95008585
NPI: 1467887828
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

COLLINS, ANGELINA E

Provider ID: 123644
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: NP16516
NPI: 1720001324
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

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D. Directorio de proveedores de atención especializada

<i>Hospital Affiliation:</i>	16950 VIA TAZON	<i>Medi-Cal Open Panel:</i> Yes
<i>Medi-Cal Open Panel:</i> No	SAN DIEGO, CA 92127-1607	<i>Min/Max Age:</i> 0/999
<i>Min/Max Age:</i> None	<i>Phone:</i> (800) 926-8273	<i>American Sign Language (ASL):</i>
<i>American Sign Language (ASL):</i>	<i>Fax:</i> (888) 539-8781	No
No	<i>After Hours Phone:</i> (800)	<i>Accessibility:</i>
<i>Accessibility:</i> W	926-8273	<i>Hours:</i> M-SA 9AM-5PM
<i>Hours:</i> M-SA 9AM-5PM	<i>Provider Gender:</i> Female	<i>Website:</i>
<i>Website:</i>	<i>License number:</i> NP13032	<i>Email:</i>
<i>Email:</i>	<i>NPI:</i> 1609081710	<i>Medical Group(s):</i>
<i>Medical Group(s):</i>	<i>Provider English Spoken:</i> Yes	<i>IPA:</i> Ucsd Medical Group
<i>IPA:</i>	<i>Provider Language(s) Spoken:</i>	
	<i>Cultural Competency:</i> No	CONTILLO, AMBER L
COLLINS, CYNTHIA M	<i>Hospital Affiliation:</i> Ucsd La Jolla	<i>Provider ID:</i> 260069
<i>Provider ID:</i> 83299	John Sally Thornton, Ucsd	<i>Board Certified Specialty:</i> No
<i>Board Certified Specialty:</i> No	Medical Ctr	RADY CHILDRENS HEALTH
UCSD MEDICAL GROUP	<i>Medi-Cal Open Panel:</i> Yes	NETWORK
4168 FRONT ST FL 2	<i>Min/Max Age:</i> 0/999	8001 FROST ST
SAN DIEGO, CA 92103-2030	<i>American Sign Language (ASL):</i>	SAN DIEGO, CA 92123-2746
<i>Phone:</i> (619) 543-5415	No	<i>Phone:</i> (858) 966-5999
<i>Fax:</i>	<i>Accessibility:</i>	<i>Fax:</i> (858) 966-4930
<i>After Hours Phone:</i> (619)	<i>Hours:</i> M-SA 9AM-5PM	<i>After Hours Phone:</i> (858)
543-5415	<i>Website:</i>	966-5999
<i>Provider Gender:</i> Female	<i>Email:</i>	<i>Provider Gender:</i> Female
<i>License number:</i> NP17358	<i>Medical Group(s):</i>	<i>License number:</i> NP95005629
<i>NPI:</i> 1780869164	<i>IPA:</i> Ucsd Medical Group	<i>NPI:</i> 1154630838
<i>Provider English Spoken:</i> Yes	CONNOR, CAROLINE L	<i>Provider English Spoken:</i> Yes
<i>Provider Language(s) Spoken:</i>	<i>Provider ID:</i> 279836	<i>Provider Language(s) Spoken:</i>
Spanish	<i>Board Certified Specialty:</i> No	<i>Cultural Competency:</i> No
<i>Cultural Competency:</i> No	UCSD MEDICAL GROUP	<i>Hospital Affiliation:</i> Rady
<i>Hospital Affiliation:</i>	6030 VILLAGE WAY	Childrens Hospital San Diego
<i>Medi-Cal Open Panel:</i> No	SAN DIEGO, CA 92130-2972	<i>Medi-Cal Open Panel:</i> No
<i>Min/Max Age:</i> None	<i>Phone:</i> (800) 926-8273	<i>Min/Max Age:</i> 0/18
<i>American Sign Language (ASL):</i>	<i>Fax:</i> (888) 539-8781	<i>American Sign Language (ASL):</i>
No	<i>After Hours Phone:</i> (800)	No
<i>Accessibility:</i>	926-8273	<i>Accessibility:</i>
<i>Hours:</i> M-SA 9AM-5PM	<i>Provider Gender:</i> Female	<i>Hours:</i> M-SA 9AM-5PM
<i>Website:</i>	<i>License number:</i> NP13032	<i>Website:</i>
<i>Email:</i>	<i>NPI:</i> 1609081710	<i>Email:</i>
<i>Medical Group(s):</i>	<i>Provider English Spoken:</i> Yes	<i>Medical Group(s):</i>
<i>IPA:</i>	<i>Provider Language(s) Spoken:</i>	<i>IPA:</i> Rady Childrens Health
	<i>Cultural Competency:</i> No	Network
CONNOR, CAROLINE L	<i>Hospital Affiliation:</i> Ucsd La Jolla	COSINO, ANJELICA T
<i>Provider ID:</i> 279835	John Sally Thornton, Ucsd	<i>Provider ID:</i> 201309
<i>Board Certified Specialty:</i> No	Medical Ctr	<i>Board Certified Specialty:</i> No
UCSD MEDICAL GROUP		

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D. Directorio de proveedores de atención especializada

UCSD MEDICAL GROUP
200 W ARBOR DR FL 1
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: NP95008222
NPI: 1295238749
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

COUCH, SARA M

Provider ID: 113766
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Female
License number: NP20894
NPI: 1851633507
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No

Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CUTLER, APRYL L

Provider ID: 273326
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
4305 UNIVERSITY AVE
SAN DIEGO, CA 92105-1645
Phone: (858) 966-5484
Fax:
After Hours Phone: (858)
966-5484
Provider Gender: Female
License number: NP95012457
NPI: 1467960120
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/21
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

DAVID, RHYS S

Provider ID: 260090
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3030 CHILDRENS WAY FL 2
SOUTH
SAN DIEGO, CA 92123-4232
Phone: (858) 966-4003
Fax: (858) 560-6798
After Hours Phone: (858)
966-4003
Provider Gender: Female
License number: NP21537
NPI: 1790056166
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

DAVIES, SUMMER R

Provider ID: 253692
Board Certified Specialty: No
UCSD MEDICAL GROUP
8899 UNIVERSITY CENTER LN
STE 220
SAN DIEGO, CA 92122-1040
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: NP21519
NPI: 1679850671
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla

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D. Directorio de proveedores de atención especializada

John Sally Thornton, Ucsd
Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

DAVIS, JANET M

Provider ID: 255796

Board Certified Specialty: No

UCSD MEDICAL GROUP

330 LEWIS ST

SAN DIEGO, CA 92103-2108

Phone: (619) 471-9250

Fax: (619) 471-9275

After Hours Phone: (619)

471-9250

Provider Gender: Female

License number: NP95006617

NPI: 1164616280

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

DEUTSCH, KAREN G

Provider ID: 247980

Board Certified Specialty: No

UCSD MEDICAL GROUP

4168 FRONT ST FL 3

SAN DIEGO, CA 92103-2030

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: NP19446

NPI: 1740517127

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

DEUTSCH, KAREN G

Provider ID: 247981

Board Certified Specialty: No

UCSD MEDICAL GROUP

330 LEWIS ST

SAN DIEGO, CA 92103-2108

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: NP19446

NPI: 1740517127

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

DODD-SULLIVAN, REBECCA

M

Provider ID: 112552

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222

Fax:

After Hours Phone: (619)

543-6222

Provider Gender: Female

License number: NP21994

NPI: 1760823629

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

DOVE, JANET H

Provider ID: 83367

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

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D. Directorio de proveedores de atención especializada

SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: NP8210
NPI: 1982860664
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

DWYER, ERIN

Provider ID: 108501
Board Certified Specialty: No
GENESIS HEALTHCARE PARTNERS PC
4060 4TH AVE STE 310
SAN DIEGO, CA 92103-2120
Phone: (619) 297-4707
Fax:
After Hours Phone: (619) 297-4707
Provider Gender: Female
License number: NP95004184
NPI: 1003260894
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

DWYER, ERIN

Provider ID: 265299
Board Certified Specialty: No
HEALTH EXCEL IPA INC
4060 4TH AVE STE 310
SAN DIEGO, CA 92103-2120
Phone: (619) 297-4707
Fax: (858) 429-7927
After Hours Phone: (619) 297-4707
Provider Gender: Female
License number: NP95004184
NPI: 1003260894
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/99
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

Provider ID: 108501
Board Certified Specialty: No
GENESIS HEALTHCARE PARTNERS PC
4060 4TH AVE STE 310
SAN DIEGO, CA 92103-2120
Phone: (619) 297-4707
Fax:
After Hours Phone: (619) 297-4707
Provider Gender: Female
License number: NP95004184
NPI: 1003260894
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/99
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

DWYER, ERIN, NPA

Provider ID: 269863
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4060 4TH AVE STE 310
SAN DIEGO, CA 92103-2120

Phone: (619) 297-4707
Fax: (858) 429-7927
After Hours Phone: (619) 297-4707
Provider Gender: Female
License number: NP95004184
NPI: 1003260894
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

ELMORE, DUDLEY G

Provider ID: 83410
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: NP18199
NPI: 1568620375
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>	<i>Phone:</i> (619) 471-0320 <i>Fax:</i> <i>After Hours Phone:</i> (619) 471-0320 <i>Provider Gender:</i> Female <i>License number:</i> NP20343 <i>NPI:</i> 1508112590 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>	<i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>
ERICKSON, LISA K <i>Provider ID:</i> 278982 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female <i>License number:</i> NP95016319 <i>NPI:</i> 1669442182 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group	ESPEJO, MARISSA C <i>Provider ID:</i> 122175 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 4168 FRONT ST SAN DIEGO, CA 92103-2030 <i>Phone:</i> (619) 543-6248 <i>Fax:</i> <i>After Hours Phone:</i> (619) 543-6248 <i>Provider Gender:</i> Female <i>License number:</i> NP20343 <i>NPI:</i> 1508112590 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None	ESTRELLA, SUE K <i>Provider ID:</i> 127237 <i>Board Certified Specialty:</i> No OPERATION SAMAHAN - MIRA MESA 10737 CAMINO RUIZ STE 235 SAN DIEGO, CA 92126-2375 <i>Phone:</i> (844) 200-2426 <i>Fax:</i> <i>After Hours Phone:</i> (844) 200-2426 <i>Provider Gender:</i> Female <i>License number:</i> NP95005047 <i>NPI:</i> 1083137541 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Tagalog <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-4:30PM, SA 9AM-5PM <i>Website:</i> www.operationsamahan.org <i>Email:</i> <i>Medical Group(s):</i> Operation Samahan - Mira Mesa <i>IPA:</i>
ESPEJO, MARISSA C <i>Provider ID:</i> 121410 <i>Board Certified Specialty:</i> No UCSD RADIOLOGY AT LA JOLLA 200 W ARBOR DR SAN DIEGO, CA 92103-1911	<i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None	FEITH, MEGAN M <i>Provider ID:</i> 260520

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858) 966-8800
Provider Gender: Female
License number: NP95009508
NPI: 1912472754
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

FEIZI, SEDI

Provider ID: 118629
Board Certified Specialty: No
SOUTHERN CALIFORNIA INTERVENTIONAL ASSOC
995 GATEWAY CENTER WAY STE 207
SAN DIEGO, CA 92102-4544
Phone: (619) 263-9729
Fax:
After Hours Phone: (619) 263-9729
Provider Gender: Female
License number: NP95002309
NPI: 1861889370
Provider English Spoken: Yes

Provider Language(s) Spoken: Faroese, Farsi
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

FEIZI, SEDI

Provider ID: 252958
Board Certified Specialty: No
HEALTH EXCEL IPA INC
995 GATEWAY CENTER WAY STE 207
SAN DIEGO, CA 92102-4544
Phone: (619) 263-9729
Fax: (619) 263-9730
After Hours Phone: (619) 263-9729
Provider Gender: Female
License number: NP95002309
NPI: 1861889370
Provider English Spoken: Yes
Provider Language(s) Spoken: Faroese, Farsi
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/99
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

FIELDS, KATHRYN S

Provider ID: 260847
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY STE 410
SAN DIEGO, CA 92123-4228
Phone: (858) 966-6789
Fax: (858) 966-6706
After Hours Phone: (858) 966-6789
Provider Gender: Female
License number: NP20720
NPI: 1679867782
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FIELDS, KATHRYN S

Provider ID: 260848
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
7910 FROST ST STE 190
SAN DIEGO, CA 92123-2731

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 966-9360
Fax: (858) 966-8519
After Hours Phone: (858) 966-9360
Provider Gender: Female
License number: NP20720
NPI: 1679867782
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FIELDS, KATHRYN S

Provider ID: 260851
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5999
Fax: (858) 966-8519
After Hours Phone: (858) 966-5999
Provider Gender: Female
License number: NP20720
NPI: 1679867782
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):

No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FLORES, ELEANOR A

Provider ID: 83432
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: NP13994
NPI: 1730264250
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FLOWERS, JEREMY R

Provider ID: 112525
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: NP15316
NPI: 1013913045
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FRIEBEN, CODY J

Provider ID: 244095
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: NP95008175
NPI: 1992179162
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

GARCIA, DAVID

Provider ID: 78655
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Male
License number: NP9111
NPI: 1851544480
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GARTH, MELISSA A

Provider ID: 274053
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: NP95011870

NPI: 1689232977
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

GENNA, VINCENT T

Provider ID: 83461
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Male
License number: NP19869
NPI: 1447554563
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GILBERT, TARI L

Provider ID: 103582
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST FL 3
SAN DIEGO, CA 92103-2030
Phone: (858) 657-8000
Fax:
After Hours Phone: (858)
657-8000
Provider Gender: Female
License number: NP10378
NPI: 1811248347
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GINGER, KRISTEN S

Provider ID: 261025
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY FL 2
SOUTH
SAN DIEGO, CA 92123-4232
Phone: (858) 966-4003
Fax: (858) 560-6798
After Hours Phone: (858)
966-4003
Provider Gender: Female
License number: NP95002382
NPI: 1659646792
Provider English Spoken: Yes

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D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

GIVENS, DENISE H

Provider ID: 261024

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY # 300
SAN DIEGO, CA 92123-4223

Phone: (858) 966-8974

Fax: (858) 966-6721

After Hours Phone: (858)

966-8974

Provider Gender: Female

License number: NP14891

NPI: 1396810099

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

GODINO, DANIELLE E

Provider ID: 255948

Board Certified Specialty: No

UCSD MEDICAL GROUP

9909 MIRA MESA BLVD STE 200

SAN DIEGO, CA 92131-1061

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: NP95005056

NPI: 1689125965

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

GODINO, DANIELLE E

Provider ID: 255949

Board Certified Specialty: No

UCSD MEDICAL GROUP

330 LEWIS ST

SAN DIEGO, CA 92103-2108

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: NP95005056

NPI: 1689125965

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

GODINO, DANIELLE E

Provider ID: 255950

Board Certified Specialty: No

UCSD MEDICAL GROUP

9333 GENESEE AVE STE 200

SAN DIEGO, CA 92121-2113

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: NP95005056

NPI: 1689125965

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

IPA: Ucsd Medical Group

GONZALEZ, KYLA J

Provider ID: 261017

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 2 SOUTH

SAN DIEGO, CA 92123-4232

Phone: (858) 966-4003

Fax: (858) 560-6798

After Hours Phone: (858) 966-4003

Provider Gender: Female

License number: NP17058

NPI: 1548545494

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

GRISSINGER, AMY E

Provider ID: 271415

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 2 SAN DIEGO, CA 92123-4232

Phone: (858) 966-5961

Fax: (858) 966-6791

After Hours Phone: (858)

966-5961

Provider Gender: Female

License number: NP95001570

NPI: 1649663824

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

GUADARRAMA, IGNACIO

Provider ID: 262419

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD

995 GATEWAY CENTER WAY STE 105

SAN DIEGO, CA 92102-4544

Phone: (619) 264-1934

Fax: (619) 264-1937

After Hours Phone: (619)

264-1934

Provider Gender: Male

License number: NP95003671

NPI: 1821331174

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Imperial Health Holdings

Medical Group-Sd

GWILLIAM, LISA D

Provider ID: 268682

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY # 4

SAN DIEGO, CA 92123-4223

Phone: (858) 966-4032

Fax: (858) 966-6227

After Hours Phone: (858)

966-4032

Provider Gender: Female

License number: NP95002845

NPI: 1598132128

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

HALDEMAN, SHYLAH M

Provider ID: 261030

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 966-5855
Fax: (858) 966-7903
After Hours Phone: (858) 966-5855
Provider Gender: Female
License number: NP95002511
NPI: 1497159495
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

HARKNESS, RUMIKO

Provider ID: 208841
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NP11566
NPI: 1487785093
Provider English Spoken: Yes
Provider Language(s) Spoken:
Japanese
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):

No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HEAD, KRISTIN N

Provider ID: 268656
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
7920 FROST ST STE 200
SAN DIEGO, CA 92123-4289
Phone: (858) 966-7484
Fax: (858) 966-4064
After Hours Phone: (858) 966-7484
Provider Gender: Female
License number: NP20264
NPI: 1699078923

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

HECKER, CAROL E , NPA

Provider ID: 270984
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
7901 FROST ST
SAN DIEGO, CA 92123-2701

Phone: (858) 565-0104
Fax: (858) 565-0097
After Hours Phone: (858) 565-0104
Provider Gender: Female
License number: NP17354
NPI: 1699955625
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

HILLIARD, THESALONICA P

Provider ID: 284022
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126-2375
Phone: (844) 200-2426
Fax: (858) 578-4417
After Hours Phone: (844) 200-2426
Provider Gender: Female
License number: NP95010585
NPI: 1861956724
Provider English Spoken: Yes
Provider Language(s) Spoken:
Tagalog
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

HOOPER, BONNIE J , NPA

Provider ID: 275254

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9339 GENESEE AVE STE 350
SAN DIEGO, CA 92121-2150

Phone: (858) 454-4300

Fax: (858) 454-5088

After Hours Phone: (858)
454-4300

Provider Gender: Female

License number: NP6495

NPI: 1821062878

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

HOOPER, BONNIE J , NPA

Provider ID: 275255

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4060 4TH AVE STE 415
SAN DIEGO, CA 92103-2121

Phone: (619) 298-9809

Fax: (619) 298-9823

After Hours Phone: (619)
298-9809

Provider Gender: Female

License number: NP6495

NPI: 1821062878

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

HORNFELD, COURTNEY A

Provider ID: 277359

Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

License number: NP95013375

NPI: 1982234027

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

JENNINGS, CHARLES A

Provider ID: 112942

Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222

Fax:

After Hours Phone: (619)
543-6222

Provider Gender: Male

License number: NP95000764

NPI: 1790186708

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

JONES, CHRISTA E

Provider ID: 275563

Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

License number: NP95914220

NPI: 1396371431

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KAUFMAN-SCIORTINO, JENNIFER B

Provider ID: 262125
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
6475 ALVARADO RD STE 120
SAN DIEGO, CA 92120-5007
Phone: (619) 583-6133
Fax: (619) 583-0321
After Hours Phone: (619) 583-6133
Provider Gender: Female
License number: NP17347
NPI: 1346435849
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Rady Childrens Health Network
KELLY, COLLEEN F
Provider ID: 262277
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8974
Fax: (858) 966-6721
After Hours Phone: (858) 966-8974
Provider Gender: Female
License number: NP95002304
NPI: 1578932190

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

KELLY, TARA M

Provider ID: 107336
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female

License number: NP95001320
NPI: 1396995163
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KILLIAN-BENIGNO, CHRISTINA M

Provider ID: 105465
Board Certified Specialty: No
CHILDRENS HOSP SAN DIEGO CHADWICK CTR
3010 CHILDRENS WAY # 2W
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5811
Fax:
After Hours Phone: (858) 966-5811
Provider Gender: Female
License number: NP21551
NPI: 1962772970
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

KILLIAN-BENIGNO, CHRISTINA M

Provider ID: 262276
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3010 CHILDRENS WAY # 2W
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858) 966-5811
Provider Gender: Female
License number: NP21551
NPI: 1962772970
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

KIRK, MARY P

Provider ID: 83658
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: NP17276
NPI: 1760668073
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KLEIN, SUSAN H

Provider ID: 283605
Board Certified Specialty: No
HEALTH EXCEL IPA INC
3703 CAMINO DEL RIO S STE 210
SAN DIEGO, CA 92108-4033
Phone: (619) 640-5555
Fax: (619) 640-5550
After Hours Phone: (619) 640-5555
Provider Gender: Female
License number: NP23266
NPI: 1831522010
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 16/99
American Sign Language (ASL): No
Accessibility:

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

KNECHEL, NANCY A

Provider ID: 83659
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: NP17401
NPI: 1871757211
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KNIGHT, TARA J

Provider ID: 276446
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911

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D. Directorio de proveedores de atención especializada

Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NP95012285
NPI: 1801394358
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KOTULA, KELLY E
Provider ID: 268922
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3665 KEARNY VILLA RD STE 400
SAN DIEGO, CA 92123-1955
Phone: (858) 966-8801
Fax: (858) 966-7803
After Hours Phone: (858) 966-8801
Provider Gender: Female
License number: NP95012078
NPI: 1518519305
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):

No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

KUKULJ, ANA V
Provider ID: 110849
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: NP95001490
NPI: 1063800316
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LAFORTEZA, JOZELLE B
Provider ID: 202666
Board Certified Specialty: No
UCSD MEDICAL GROUP
9333 GENESEE AVE STE 200
SAN DIEGO, CA 92121-2113


Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NP95001036
NPI: 1538578307
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LE FLOCH, NATHALIE M
Provider ID: 262126
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3010 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858) 966-5811
Provider Gender: Female
License number: NP15079
NPI: 1689709271
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/99


Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

American Sign Language (ASL): No
Accessibility: 
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s): Rady Childrens Health Network
IPA:

LEBLANC, ALLYN E

Provider ID: 275538
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: NP95004227
NPI: 1376732685
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: 
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LEBLANC, SHANNON K

Provider ID: 125813
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911


Phone: (888) 309-8273
Fax:
After Hours Phone: (888) 309-8273
Provider Gender: Female
License number: NP95003982
NPI: 1073053179
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LEBLANC, SHANNON K

Provider ID: 127300
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: NP95003982
NPI: 1073053179
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA:

LEE, RACHAEL O

Provider ID: 278005
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NP95009773
NPI: 1205318920
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: 
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LEVY, SHARON B

Provider ID: 262166
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
5776 RUFFIN RD
SAN DIEGO, CA 92123-1013

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<i>Phone:</i> (858) 292-1144 <i>Fax:</i> <i>After Hours Phone:</i> (858) 292-1144 <i>Provider Gender:</i> Female <i>License number:</i> NP95003383 <i>NPI:</i> 1316396807 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> 0/99 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group	NETWORK 3030 CHILDRENS WAY FL 2 NORTH SAN DIEGO, CA 92123-4232 <i>Phone:</i> (858) 966-5961 <i>Fax:</i> (858) 966-6791 <i>After Hours Phone:</i> (858) 966-5961 <i>Provider Gender:</i> Female <i>License number:</i> NP14008 <i>NPI:</i> 1003954116 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> 0/99 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network
LIEBMAN, RACHAEL R <i>Provider ID:</i> 280389 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female <i>License number:</i> NP95007834 <i>NPI:</i> 1396130050 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i>	LIM, IMELDA B <i>Provider ID:</i> 99317 <i>Board Certified Specialty:</i> No OPERATION SAMAHAN - MIRA MESA 10737 CAMINO RUIZ STE 235 SAN DIEGO, CA 92126-2375 <i>Phone:</i> (844) 200-2426 <i>Fax:</i> <i>After Hours Phone:</i> (844) 200-2426 <i>Provider Gender:</i> Female <i>License number:</i> NP95000203 <i>NPI:</i> 1093130395 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Tagalog <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> W <i>Hours:</i> M-F 8AM-4:30PM, SA 9AM-5PM <i>Website:</i> www.operationsamahan.org <i>Email:</i> <i>Medical Group(s):</i> Operation Samahan - Mira Mesa <i>IPA:</i>	LUCKETT, DE COURCY E <i>Provider ID:</i> 271115 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 3520 4TH AVE SAN DIEGO, CA 92103-4913 <i>Phone:</i> (714) 619-8777 <i>Fax:</i> <i>After Hours Phone:</i> (714) 619-8777 <i>Provider Gender:</i> Female <i>License number:</i> NP95000435 <i>NPI:</i> 1023410578 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No
	LOPEZ, SARA O <i>Provider ID:</i> 265119 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH	

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D. Directorio de proveedores de atención especializada

Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

LUX, PAULYNE

Provider ID: 126210
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (858) 657-7000
Fax:
After Hours Phone: (858)
657-7000
Provider Gender: Female
License number: NP23162
NPI: 1255763942
Provider English Spoken: Yes
Provider Language(s) Spoken:
Tagalog
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LU, TAMMY C

Provider ID: 123683

Board Certified Specialty: No
LOGAN HEIGHTS FAMILY
HEALTH CENTER
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Provider Gender: Female
License number: NP95007253
NPI: 1457879132
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MADGEDI, SHEILA

Provider ID: 282187
Board Certified Specialty: No
HEALTH EXCEL IPA INC
4282 GENESEE AVE STE 204
SAN DIEGO, CA 92117-4965
Phone: (858) 616-6430
Fax: (858) 616-6415
After Hours Phone: (858)
616-6430
Provider Gender: Female
License number: NP95015221
NPI: 1487262275
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

MAGLIOCCA, MICHAEL A

Provider ID: 113336
Board Certified Specialty: No
UCSD MEDICAL GROUP
4520 EXECUTIVE DR STE P2
SAN DIEGO, CA 92121-3028
Phone: (844) 757-5337
Fax:
After Hours Phone: (844)
757-5337
Provider Gender: Male
License number: NP8830
NPI: 1821063538
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MARCELO, ALLISON J

Provider ID: 116525
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911

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D. Directorio de proveedores de atención especializada

Phone: (619) 543-6222

Fax:

After Hours Phone: (619)
543-6222

Provider Gender: Female

License number: NP95001387

NPI: 1760887194

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp Chula

Vista Med Ctr, Sharp Coronado

Hosp And Healthcare Ctr, Ucsd

La Jolla John Sally Thornton,

Ucsd Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

MARSHALL, KIMBERLY J

Provider ID: 102304

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED

FNDTN

3020 CHILDRENS WAY # 5008

MC

SAN DIEGO, CA 92123-4223

Phone: (858) 966-5818

Fax:

After Hours Phone: (858)

966-5818

Provider Gender: Female

License number: NP95002840

NPI: 1508204090

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Southwest

Healthcare System Wildomar,

Southwest Healthcare System

Murrieta, Rady Childrens

Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

MARTINEZ, JOYCELLE C

Provider ID: 84009

Board Certified Specialty: No

UCSD MEDICAL GROUP

4168 FRONT ST

SAN DIEGO, CA 92103-2030

Phone: (619) 543-6248

Fax: (858) 657-8530

After Hours Phone: (619)

543-6248

Provider Gender: Female

License number: NP16021

NPI: 1891906228

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

MCGILLOWAY, MELANIE L

Provider ID: 269731

Board Certified Specialty: No

HEALTH EXCEL IPA INC

3444 KEARNY VILLA RD STE

202

SAN DIEGO, CA 92123-1960

Phone: (858) 429-7646

Fax: (858) 429-7929

After Hours Phone: (858)

429-7646

Provider Gender: Female

License number: NP95013799

NPI: 1366921322

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

MCQUINN, ELIZABETH A

Provider ID: 125596

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED

FNDTN

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-8974

Fax:

After Hours Phone: (858)

966-8974

Provider Gender: Female

License number: NP95005300

NPI: 1922512318

Provider English Spoken: Yes

Provider Language(s) Spoken:

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D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr, Ucsd La Jolla
John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

MCQUINN, ELIZABETH A
Provider ID: 262249
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax:
After Hours Phone: (858)
966-8800
Provider Gender: Female
License number: NP95005300
NPI: 1922512318
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr, Ucsd La Jolla
John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Rady Childrens Health
Network
MEDILO, LOVELLA T
Provider ID: 273463
Board Certified Specialty: No
HEALTH EXCEL IPA INC
4033 3RD AVE # 430
SAN DIEGO, CA 92103-2117
Phone: (619) 578-3740
Fax: (858) 437-6702
After Hours Phone: (619)
578-3740
Provider Gender: Female
License number: NP95010904
NPI: 1659930485
Provider English Spoken: Yes
Provider Language(s) Spoken:
Tagalog
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

MEYER, DAWN M
Provider ID: 84131
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Female

License number: NP15769
NPI: 1467575126
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MICHAEL, GEORGINA M
Provider ID: 84132
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Female
License number: NP13763
NPI: 1780825679
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

MILLER, EVA M

Provider ID: 255833
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST
SAN DIEGO, CA 92103-2108
Phone: (619) 471-9210
Fax:
After Hours Phone: (619)
471-9210
Provider Gender: Female
License number: NP8121
NPI: 1043492523
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MIRANDA, ADRIANNA R

Provider ID: 283729
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5818
Fax: (858) 966-7483
After Hours Phone: (858)
966-5818
Provider Gender: Female
License number: NP14263
NPI: 1316271570
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Stanford
Health Care, Lucile Salter
Packard Childrens Hosp, Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 18/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

MIRANDA, BRIDGET A

Provider ID: 127249
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FN D T N
7920 FROST ST STE 200
SAN DIEGO, CA 92123-4289
Phone: (858) 966-7484
Fax:
After Hours Phone: (858)
966-7484
Provider Gender: Female
License number: NP95006082
NPI: 1225548159
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: P, EB, IB, E, R,
T, W
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Rady Childrens Health
Network

MIRANDA, BRIDGET A

Provider ID: 262338
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
7920 FROST ST STE 200
SAN DIEGO, CA 92123-4289
Phone: (858) 966-7484
Fax:
After Hours Phone: (858)
966-7484
Provider Gender: Female
License number: NP95006082
NPI: 1225548159
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

MIRANDA, BRIDGET A

Provider ID: 262341
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
8110 BIRMINGHAM WAY BLDG
28
SAN DIEGO, CA 92123-2758

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D. Directorio de proveedores de atención especializada

Phone: (858) 966-8052
Fax:
After Hours Phone: (858) 966-8052
Provider Gender: Female
License number: NP95006082
NPI: 1225548159
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MISEL, TINA J

Provider ID: 110428
Board Certified Specialty: No
UCSD MEDICAL GROUP
4510 EXECUTIVE DR # 7
SAN DIEGO, CA 92121-3021
Phone: (858) 657-8071
Fax:
After Hours Phone: (858) 657-8071
Provider Gender: Female
License number: NP9990
NPI: 1912011347
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:
MOGA, CLAIRE S , NPA
Provider ID: 257026
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
16918 DOVE CANYON RD STE 103
SAN DIEGO, CA 92127-3455
Phone: (858) 649-5100
Fax:
After Hours Phone: (858) 649-5100
Provider Gender: Female
License number: NP95007255
NPI: 1144748211
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 16/120
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings Medical Group-Sd

MOHEBBI, ATHENA

Provider ID: 201325
Board Certified Specialty: No
UCSD MEDICAL GROUP
4520 EXECUTIVE DR STE P2
SAN DIEGO, CA 92121-3028

Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NP19120
NPI: 1952627176
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MOLL, JOCELYN

Provider ID: 276039
Board Certified Specialty: No
HEALTH EXCEL IPA INC
11770 BERNARDO PLAZA CT STE 270
SAN DIEGO, CA 92128-2425
Phone: (858) 485-0554
Fax: (858) 429-7933
After Hours Phone: (858) 485-0554
Provider Gender: Female
License number: NP95010975
NPI: 1285090902
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/999
American Sign Language (ASL): No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MOLL, JOCELYN, NPA

Provider ID: 276040
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
11770 BERNARDO PLAZA CT
STE 270
SAN DIEGO, CA 92128-2425
Phone: (858) 485-0554
Fax: (858) 429-7933
After Hours Phone: (858)
485-0554
Provider Gender: Female
License number: NP95010975
NPI: 1285090902
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MORENO, MANUEL

Provider ID: 116132
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030

Phone: (619) 543-5743
Fax:
After Hours Phone: (619)
543-5743
Provider Gender: Male
License number: NP22268
NPI: 1275991929
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MWAURA, WAIRIMU R

Provider ID: 280178
Board Certified Specialty: No
HEALTH EXCEL IPA INC
16918 DOVE CANYON RD STE
103
SAN DIEGO, CA 92127-3455
Phone: (858) 649-5100
Fax: (858) 649-5099
After Hours Phone: (858)
649-5100
Provider Gender: Female
License number: NP95009639
NPI: 1598320996
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr
Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

NEJATI, FRESHTA

Provider ID: 214112
Board Certified Specialty: No
UCSD MEDICAL GROUP
9909 MIRA MESA BLVD STE
200
SAN DIEGO, CA 92131-1061
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: NP95001514
NPI: 1831598119

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

NGUYEN, MY HANH T

Provider ID: 110207
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST # 1A

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D. Directorio de proveedores de atención especializada

SAN DIEGO, CA 92103-2030
Phone: (619) 543-6303
Fax:
After Hours Phone: (619) 543-6303
Provider Gender: Female
License number: NP23129
NPI: 1598950651
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Vietnamese
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

NOCEDA, ANA B

Provider ID: 262231
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858) 966-8800
Provider Gender: Female
License number: NP19505
NPI: 1386971760
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego

Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

NORTON, SARAH E

Provider ID: 207059
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NP95010335
NPI: 1730659756
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

OFLAHERTY-KEESE, KATE M

Provider ID: 262329

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
8010 FROST ST STE 502
SAN DIEGO, CA 92123-4222
Phone: (858) 966-8574
Fax: (858) 966-7930
After Hours Phone: (858) 966-8574
Provider Gender: Female
License number: NP12100
NPI: 1144417726
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

OFLAHERTY-KEESE, KATE M

Provider ID: 81394
Board Certified Specialty: No
CHILDRENS HOSP SAN DIEGO CHADWICK CTR
3010 CHILDRENS WAY # 2W
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5811
Fax:
After Hours Phone: (858) 966-5811
Provider Gender: Female
License number: NP12100
NPI: 1144417726
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

ORPILLA, IMELDA M

Provider ID: 127158
Board Certified Specialty: No
OPERATION SAMAHAN
RANCHO PENASQUITOS
9995 CARMEL MOUNTAIN RD
STE B10 AND B11
SAN DIEGO, CA 92129-2889
Phone: (844) 200-2426
Fax:
After Hours Phone: (844)
200-2426
Provider Gender: Female
License number: NP95003211
NPI: 1790785988
Provider English Spoken: Yes
Provider Language(s) Spoken:
Tagalog
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M,TU,TH,F
8:30AM-5:30PM, W 10AM-7PM,
SA 9AM-5PM
Website:
www.operationsamahan.org

Email:
Medical Group(s): Operation
Samahan Rancho Penasquitos
IPA: Community Care Ipa Llc
ORPILLA, IMELDA M , NPA
Provider ID: 243506
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9995 CARMEL MOUNTAIN RD #
B10-B11
SAN DIEGO, CA 92129-2889
Phone: (844) 200-2426
Fax:
After Hours Phone: (844)
200-2426
Provider Gender: Female
License number: NP95003211
NPI: 1790785988
Provider English Spoken: Yes
Provider Language(s) Spoken:
Tagalog
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

ORPILLA, IMELDA M

Provider ID: 282962
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126-2375
Phone: (844) 200-2426
Fax: (858) 578-4417
After Hours Phone: (844)
200-2426

Provider Gender: Female
License number: NP95003211
NPI: 1790785988
Provider English Spoken: Yes
Provider Language(s) Spoken:
Tagalog
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

PADILLA, KIMBERLY C

Provider ID: 262458
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123-4232
Phone: (858) 966-6789
Fax: (858) 576-8412
After Hours Phone: (858)
966-6789
Provider Gender: Female
License number: NP95010468
NPI: 1639649239
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PADILLA, KIMBERLY C

Provider ID: 262459
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-6789
Fax: (858) 576-8412
After Hours Phone: (858) 966-6789
Provider Gender: Female
License number: NP95010468
NPI: 1639649239
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PAI, SARAH A

Provider ID: 276870
Board Certified Specialty: No
UCSD MEDICAL GROUP
350 DICKINSON ST
SAN DIEGO, CA 92103-1913

Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NP23711
NPI: 1255762167
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

PANTOJA, DANICA-ELLA

Provider ID: 279148
Board Certified Specialty: No
HEALTH EXCEL IPA INC
10251 VISTA SORRENTO PKWY STE 280
SAN DIEGO, CA 92121-3776
Phone: (818) 575-6351
Fax: (289) 236-3022
After Hours Phone: (818) 575-6351
Provider Gender: Female
License number: NP95016725
NPI: 1457860074
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 50/120
American Sign Language (ASL):

No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

PARK, SUN MIN

Provider ID: 262377
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5999
Fax: (858) 966-8519
After Hours Phone: (858) 966-5999
Provider Gender: Female
License number: NP20538
NPI: 1376678250
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PARK, SUN MIN

Provider ID: 262378
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
7910 FROST ST STE 190

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

SAN DIEGO, CA 92123-2731

Phone: (858) 966-9360

Fax: (858) 966-8519

After Hours Phone: (858)

966-9360

Provider Gender: Female

License number: NP20538

NPI: 1376678250

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

PARK, SUN MIN

Provider ID: 262379

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

3030 CHILDRENS WAY STE

410

SAN DIEGO, CA 92123-4228

Phone: (858) 966-6789

Fax: (858) 966-6706

After Hours Phone: (858)

966-6789

Provider Gender: Female

License number: NP20538

NPI: 1376678250

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

PARNELL, TANIKA E

Provider ID: 255551

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-8800

Fax:

After Hours Phone: (858)

966-8800

Provider Gender: Female

License number: NP95013165

NPI: 1679121750

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

PASTERNAK, ANNA

Provider ID: 279593

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105-1690

Phone: (619) 280-2905

Fax: (619) 283-1614

After Hours Phone: (619)

280-2905

Provider Gender: Female

License number: NP95016490

NPI: 1508459496

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

PATEL, KELLY M

Provider ID: 110294

Board Certified Specialty: No

FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2444

Fax:

After Hours Phone: (619)

515-2444

Provider Gender: Female

License number: NP95004735

NPI: 1033493747

Provider English Spoken: Yes

Provider Language(s) Spoken:

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D. Directorio de proveedores de atención especializada

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:*

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

TH 9AM-6PM, SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Family Hlth Ctr

San Diego-Beach Area

IPA:

PENA LEDON, GILBERTO

Provider ID: 120284

Board Certified Specialty: No

UCSD MEDICAL GROUP

4520 EXECUTIVE DR STE P2

SAN DIEGO, CA 92121-3028

Phone: (855) 355-5864

Fax:

After Hours Phone: (855)

355-5864

Provider Gender: Male

License number: NP22396

NPI: 1447598354

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

PENA LEDON, GILBERTO

Provider ID: 120286

Board Certified Specialty: No

UCSD MEDICAL GROUP

4168 FRONT ST

SAN DIEGO, CA 92103-2030

Phone: (855) 355-5864

Fax:

After Hours Phone: (855)

355-5864

Provider Gender: Male

License number: NP22396

NPI: 1447598354

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

PENA LEDON, GILBERTO

Provider ID: 270084

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

4520 EXECUTIVE DR # CL

SAN DIEGO, CA 92121-3018

Phone: (855) 355-5864

Fax:

After Hours Phone: (855)

355-5864

Provider Gender: Male

License number: NP22396

NPI: 1447598354

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

PETER-TRUESDELL, JILLIAN

Provider ID: 276460

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

11943 EL CAMINO REAL STE

210

SAN DIEGO, CA 92130-2597

Phone: (858) 793-1011

Fax: (858) 793-1035

After Hours Phone: (858)

793-1011

Provider Gender: Female

License number: NP21205

NPI: 1518247436

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

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D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Rady Childrens Health Network

PHILLIPS, KELLY M

Provider ID: 84327
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (888) 309-8273

Fax:
After Hours Phone: (888) 309-8273

Provider Gender: Female
License number: NP18868
NPI: 1336370543

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA:

PIATKOWSKI, BRIAN A

Provider ID: 84329
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222

Fax:
After Hours Phone: (619) 543-6222

Provider Gender: Male

License number: NP20954
NPI: 1366703233
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA:

PONDEXTER, DENIA

Provider ID: 118635
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8974

Fax:
After Hours Phone: (858) 966-8974

Provider Gender: Female
License number: NP23614
NPI: 1114236064

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Grossmont Hospital

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PONDEXTER, DENIA

Provider ID: 262400
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800

Fax: (858) 966-7433
After Hours Phone: (858) 966-8800

Provider Gender: Female
License number: NP23614
NPI: 1114236064

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Grossmont Hospital

Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PROWSE, KAYLEIGH M

Provider ID: 271425
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123-4232

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 966-5961
Fax: (858) 966-6791
After Hours Phone: (858) 966-5961
Provider Gender: Female
License number: NP22923
NPI: 1316571367
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

PRUETT, ZHIKE
Provider ID: 76608
Board Certified Specialty: No
BALBOA NEPHROLOGY MED
GRP INC
4060 4TH AVE STE 220
SAN DIEGO, CA 92103-2120
Phone: (619) 299-2350
Fax:
After Hours Phone: (619)
299-2350
Provider Gender: Female
License number: NP22373
NPI: 1295086262
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):

No
♿ Accessibility: P, IB, E
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings
Medical Group-Sd

QUICENO, MICHAEL
Provider ID: 279964
Board Certified Specialty: No
HEALTH EXCEL IPA INC
10251 VISTA SORRENTO
PKWY STE 280
SAN DIEGO, CA 92121-3776
Phone: (818) 575-6351
Fax: (289) 236-3022
After Hours Phone: (818)
575-6351
Provider Gender: Male
License number: NP95011137
NPI: 1720545858
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Eisenhower
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 50/120
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

REINER, GAIL E
Provider ID: 262382
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

8001 FROST ST
SAN DIEGO, CA 92123-2746
Phone: (858) 966-8052
Fax: (858) 966-7789
After Hours Phone: (858)
966-8052
Provider Gender: Female
License number: NP13630
NPI: 1710167853
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Rady Childrens Hospital San
Diego, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network, Ucsd Medical Group

REINER, GAIL E
Provider ID: 284946
Board Certified Specialty: No
UCSD MEDICAL GROUP
4510 EXECUTIVE DR STE 325
SAN DIEGO, CA 92121-3069
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: NP13630
NPI: 1710167853
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Ctr, Rady Childrens Hospital San Diego, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network, Ucsd Medical Group

REINER, GAIL E

Provider ID: 82165
 Board Certified Specialty: No
 RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 3020 CHILDRENS WAY # 5008 MC
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-5818
 Fax:
 After Hours Phone: (858) 966-5818
 Provider Gender: Female
 License number: NP13630
 NPI: 1710167853
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Rady Childrens Hospital San Diego, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:

Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network, Ucsd Medical Group
RENZAS, JENNIFER
 Provider ID: 282094
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105-1608
 Phone: (619) 255-9155
 Fax: (619) 795-9849
 After Hours Phone: (619) 255-9155

Provider Gender: Female
 License number: NP95016776
 NPI: 1225512759
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL): No
 ♿ Accessibility: P, EB, IB, E
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Health Excel Ipa Inc

RENZAS, JENNIFER

Provider ID: 282096
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 4171 FAIRMOUNT AVE
 SAN DIEGO, CA 92105-1609
 Phone: (619) 269-1269
 Fax: (619) 269-1271
 After Hours Phone: (619) 269-1269
 Provider Gender: Female
 License number: NP95016776

NPI: 1225512759
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Health Excel Ipa Inc

REUTER, GIANA D

Provider ID: 105705
 Board Certified Specialty: No
 RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 3030 CHILDRENS WAY FL 3
 SAN DIEGO, CA 92123-4232
 Phone: (858) 966-6789
 Fax:
 After Hours Phone: (858) 966-6789
 Provider Gender: Female
 License number: NP16763
 NPI: 1437483914
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

IPA: Rady Childrens Health Network

REUTER, GIANA D

Provider ID: 262437
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 4 NORTH
SAN DIEGO, CA 92123-4232
Phone: (858) 966-4032
Fax: (858) 966-6227
After Hours Phone: (858) 966-4032
Provider Gender: Female
License number: NP16763
NPI: 1437483914
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

RICHARDS, LISA M

Provider ID: 84582
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST FL 2
SAN DIEGO, CA 92103-2030
Phone: (619) 543-5415
Fax:
After Hours Phone: (619) 543-5415

Provider Gender: Female
License number: NP8458
NPI: 1720247612
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

RIEGO, SUZANNE N

Provider ID: 214477
Board Certified Specialty: No
UCSD MEDICAL GROUP
3750 CONVOY ST STE 312
SAN DIEGO, CA 92111-3741
Phone: (858) 292-7200
Fax:
After Hours Phone: (858) 292-7200
Provider Gender: Female
License number: NP18212
NPI: 1144453754
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Ucsd Medical Group

RIPP, CHERYL L

Provider ID: 264955
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
8001 FROST ST
SAN DIEGO, CA 92123-2746
Phone: (858) 966-8052
Fax: (858) 966-7789
After Hours Phone: (858) 966-8052
Provider Gender: Female
License number: NP95000092
NPI: 1376972174
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

RIPP, CHERYL L

Provider ID: 97416
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
8001 FROST ST
SAN DIEGO, CA 92123-2746

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 966-5855
Fax:
After Hours Phone: (858) 966-5855
Provider Gender: Female
License number: NP95000092
NPI: 1376972174
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

RIVIELLO, GABRIELA

Provider ID: 84587
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: NP13576
NPI: 1871758508
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:
RODRIGUEZ, NATALY E
Provider ID: 275649
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8801
Fax: (858) 966-7508
After Hours Phone: (858) 966-8801
Provider Gender: Female
License number: NP95010299
NPI: 1558839837
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/25
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

ROH, DONGYON

Provider ID: 259622
Board Certified Specialty: No
HEALTH EXCEL IPA INC
5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123-1338

Phone: (858) 571-3630
Fax: (858) 430-3146
After Hours Phone: (858) 571-3630
Provider Gender: Female
License number: NP95004887
NPI: 1043760069
Provider English Spoken: Yes
Provider Language(s) Spoken: Korean
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/100
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

SAVILLE, EDITH F

Provider ID: 109941
Board Certified Specialty: No
LOGAN HEIGHTS FAMILY HEALTH CENTER
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619) 515-2545
Provider Gender: Female
License number: NP7374
NPI: 1730567678
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SCOTT, ILEANA E

Provider ID: 264608
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123-4232
Phone: (858) 966-4032
Fax: (858) 966-6227
After Hours Phone: (858) 966-4032
Provider Gender: Female
License number: NP14157
NPI: 1821142803
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

SCOTT, MARYLOU

Provider ID: 262838
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY STE
410

SAN DIEGO, CA 92123-4228
Phone: (858) 966-6789
Fax: (858) 966-6706
After Hours Phone: (858)
966-6789
Provider Gender: Female
License number: NP10261
NPI: 1023223252
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

SCOTT, MARYLOU

Provider ID: 262839
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
7910 FROST ST STE 190
SAN DIEGO, CA 92123-2731
Phone: (858) 966-9360
Fax: (858) 966-8519
After Hours Phone: (858)
966-9360
Provider Gender: Female
License number: NP10261
NPI: 1023223252
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No

Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

SCOTT, MARYLOU

Provider ID: 262840
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5999
Fax: (858) 576-8412
After Hours Phone: (858)
966-5999
Provider Gender: Female
License number: NP10261
NPI: 1023223252
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

SEARS-WILEY, ELIZABETH

Provider ID: 276851
Board Certified Specialty: No

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D. Directorio de proveedores de atención especializada

UCSD MEDICAL GROUP
350 DICKINSON ST
SAN DIEGO, CA 92103-1913
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NP95007257
NPI: 1215394382
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SEBRING, JAN A
Provider ID: 101721
Board Certified Specialty: No
LOGAN HEIGHTS FAMILY HEALTH CENTER
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Provider Gender: Female
License number: NP10906
NPI: 1295750339
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SEBRING, JAN A
Provider ID: 101721
Board Certified Specialty: No
LOGAN HEIGHTS FAMILY HEALTH CENTER
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Provider Gender: Female
License number: RN486421
NPI: 1295750339
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SELBY, BLAKE A
Provider ID: 246423
Board Certified Specialty: No
UCSD MEDICAL GROUP
4510 EXECUTIVE DR

SAN DIEGO, CA 92121-3021
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NP18112
NPI: 1417194358
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: University Of California Irvine Med Ctr, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SELBY, BLAKE A
Provider ID: 256646
Board Certified Specialty: No
UCSD MEDICAL GROUP
4520 EXECUTIVE DR
SAN DIEGO, CA 92121-3018
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NP18112
NPI: 1417194358
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: University Of California Irvine Med Ctr, Ucsd La Jolla John Sally Thornton,

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D. Directorio de proveedores de atención especializada

Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SHACKELFORD, JENNIFER L

Provider ID: 116986
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Female
License number: NP95004457
NPI: 1518202944
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SHATSWELL, BRENNAC

Provider ID: 279957
Board Certified Specialty: No

HEALTH EXCEL IPA INC
10251 VISTA SORRENTO
PKWY STE 280
SAN DIEGO, CA 92121-3776
Phone: (818) 575-6351
Fax: (289) 236-3022
After Hours Phone: (818)
575-6351
Provider Gender: Female
License number: NP95009161
NPI: 1568953560
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 50/120
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

SHELDON, ELIZABETH P

Provider ID: 105742
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FN D TN
3010 CHILDRENS WAY # 2W
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5811
Fax:
After Hours Phone: (858)
966-5811
Provider Gender: Female
License number: NP95003217
NPI: 1336511831
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

SHELDON, ELIZABETH P

Provider ID: 262747
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3010 CHILDRENS WAY #
2-WEST
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858)
966-5811
Provider Gender: Female
License number: NP95003217
NPI: 1336511831
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

SHUMAKOVA, ALINA

Provider ID: 263136

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D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

7910 FROST ST STE 120
SAN DIEGO, CA 92123-2776

Phone: (858) 966-8574

Fax: (858) 966-7930

After Hours Phone: (858)
966-8574

Provider Gender: Female

License number: NP95008524

NPI: 1083116321

Provider English Spoken: Yes

Provider Language(s) Spoken:
Russian

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

SHUMAKOVA, ALINA

Provider ID: 270583

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 966-8574

Fax: (858) 966-7930

After Hours Phone: (858)
966-8574

Provider Gender: Female

License number: NP95008524

NPI: 1083116321

Provider English Spoken: Yes

Provider Language(s) Spoken:
Russian

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

SILVA, MICHELLE L

Provider ID: 264529

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123-4232

Phone: (858) 966-4032

Fax: (858) 966-6227

After Hours Phone: (858)

966-4032

Provider Gender: Female

License number: NP22781

NPI: 1891036448

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

SILVA, MICHELLE L

Provider ID: 92079

Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN

3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123-4232

Phone: (858) 966-4003

Fax:

After Hours Phone: (858)
966-4003

Provider Gender: Female

License number: NP22781

NPI: 1891036448

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

SILVESTRO, ELISA S

Provider ID: 118690

Board Certified Specialty: No
LOGAN HEIGHTS FAMILY
HEALTH CENTER

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 515-2545
Fax:
After Hours Phone: (619)
515-2545
Provider Gender: Female
License number: NP95005103
NPI: 1548302011
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SMITH, ELIZABETH W

Provider ID: 263751
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY STE
300
SAN DIEGO, CA 92123-4228
Phone: (858) 966-8974
Fax: (858) 966-6721
After Hours Phone: (858)
966-8974
Provider Gender: Female
License number: NP95006872
NPI: 1568953172
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

SMITH, HEIDI A

Provider ID: 84817
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Female
License number: NP8236
NPI: 1992950539
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SOTO, ROBIN J

Provider ID: 110448
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST FL 2
SAN DIEGO, CA 92103-2030

Phone: (619) 543-5415
Fax:
After Hours Phone: (619)
543-5415
Provider Gender: Female
License number: NP11778
NPI: 1487688099
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SOTO, ROBIN J

Provider ID: 80434
Board Certified Specialty: No
SHERMAN HEIGHTS FAMILY
HLTH CTRS INC
2391 ISLAND AVE
SAN DIEGO, CA 92102-2941
Phone: (619) 515-2435
Fax:
After Hours Phone: (619)
515-2435
Provider Gender: Female
License number: NP11778
NPI: 1487688099
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

No ♿ <i>Accessibility:</i> P, EB, IB, E, R, T, ME <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> Sherman Heights Family Hlth Ctrs Inc <i>IPA:</i>	SOX, REBECCA L <i>Provider ID:</i> 263650 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 4168 FRONT ST SAN DIEGO, CA 92103-2030 <i>Phone:</i> (619) 543-7869 <i>Fax:</i> (619) 543-7543 <i>After Hours Phone:</i> (619) 543-7869 <i>Provider Gender:</i> Female <i>License number:</i> NP14589 <i>NPI:</i> 1053519850 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	<i>Provider Gender:</i> Female <i>License number:</i> NP14589 <i>NPI:</i> 1053519850 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network
SOX, REBECCA L <i>Provider ID:</i> 102397 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3665 KEARNY VILLA RD STE 400 SAN DIEGO, CA 92123-1955 <i>Phone:</i> (858) 966-8801 <i>Fax:</i> <i>After Hours Phone:</i> (858) 966-8801 <i>Provider Gender:</i> Female <i>License number:</i> NP14589 <i>NPI:</i> 1053519850 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	SOX, REBECCA L <i>Provider ID:</i> 263651 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3665 KEARNY VILLA RD SAN DIEGO, CA 92123-1953 <i>Phone:</i> (858) 966-5382 <i>Fax:</i> (858) 966-6733 <i>After Hours Phone:</i> (858) 966-5382	SOX, REBECCA L <i>Provider ID:</i> 88214 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 4168 FRONT ST SAN DIEGO, CA 92103-2030 <i>Phone:</i> (619) 543-7869 <i>Fax:</i> <i>After Hours Phone:</i> (619) 543-7869 <i>Provider Gender:</i> Female <i>License number:</i> NP14589 <i>NPI:</i> 1053519850 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SPIES, JEANIE M

Provider ID: 263928
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3010 CHILDRENS WAY # 2W
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858) 966-5811
Provider Gender: Female
License number: NP4891
NPI: 1861688756
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No

Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SPIES, JEANIE M

Provider ID: 85883
Board Certified Specialty: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
3020 CHILDRENS WAY # 5008 MC
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5818
Fax:
After Hours Phone: (858) 966-5818
Provider Gender: Female
License number: NP4891
NPI: 1861688756

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

STANGL, LISA

Provider ID: 84903
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 400
SAN DIEGO, CA 92103-2108
Phone: (619) 543-8089
Fax:
After Hours Phone: (619) 543-8089
Provider Gender: Female
License number: NP5599
NPI: 1902864580
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

STEARNS, PHILIP H

Provider ID: 265077
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY STE 410
SAN DIEGO, CA 92123-4228
Phone: (858) 966-6789
Fax: (858) 966-6706
After Hours Phone: (858) 966-6789
Provider Gender: Male
License number: NP11899
NPI: 1609900810
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/99
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

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D. Directorio de proveedores de atención especializada

STEARNS, PHILIP H

Provider ID: 265078
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
7910 FROST ST STE 190
SAN DIEGO, CA 92123-2731
Phone: (858) 966-9360
Fax: (858) 966-8519
After Hours Phone: (858) 966-9360
Provider Gender: Male
License number: NP11899
NPI: 1609900810
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/99
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

STEARNS, PHILIP H

Provider ID: 265079
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5999
Fax: (858) 576-8412
After Hours Phone: (858) 966-5999
Provider Gender: Male
License number: NP11899

NPI: 1609900810
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/99
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

STEPHENSON, CARA LEE

Provider ID: 265236
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
7910 FROST ST STE 120
SAN DIEGO, CA 92123-2776
Phone: (858) 966-8574
Fax: (858) 966-7930
After Hours Phone: (858) 966-8574
Provider Gender: Female
License number: NP16262
NPI: 1245416296

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/99
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Rady Childrens Health Network

STEPHENSON, CARA LEE

Provider ID: 80610
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
7910 FROST ST STE 430
SAN DIEGO, CA 92123-2795
Phone: (858) 966-6710
Fax:

After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: NP16262
NPI: 1245416296
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SWARTZ, ERIN

Provider ID: 255787
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST
SAN DIEGO, CA 92103-2108

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 657-8530

Fax:

After Hours Phone: (858)
657-8530

Provider Gender: Female

License number: NP95011666

NPI: 1639571292

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

SWEENEY, ZSA ZSA A

Provider ID: 282121

Board Certified Specialty: No

HEALTH EXCEL IPA INC

4060 FAIRMOUNT AVE

SAN DIEGO, CA 92105-1608

Phone: (619) 564-8765

Fax: (619) 564-8786

After Hours Phone: (619)

564-8765

Provider Gender: Female

License number: NP95007730

NPI: 1003159344

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

TAING, JENNIFER S

Provider ID: 201573

Board Certified Specialty: No

UCSD MEDICAL GROUP

4168 FRONT ST

SAN DIEGO, CA 92103-2030

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)
926-8273

Provider Gender: Female

License number: NP22002

NPI: 1649528357

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: University Of

California Irvine Med Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

TALBOT, ADRIANNE V

Provider ID: 278183

Board Certified Specialty: No

UCSD MEDICAL GROUP

4168 FRONT ST # 1A

SAN DIEGO, CA 92103-2030

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: NP17553

NPI: 1992048557

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

TANGTUMNU, RUNGFA

Provider ID: 84922

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222

Fax:

After Hours Phone: (619)
543-6222

Provider Gender: Female

License number: NP17451

NPI: 1689828741

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

TAYLOR, KAYLA L Provider ID: 124031 Board Certified Specialty: No FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE 1550 BROADWAY # 2 SAN DIEGO, CA 92101-5713 Phone: (619) 515-2525 Fax: After Hours Phone: (619) 515-2525 Provider Gender: Female License number: NP95006792 NPI: 1730604414 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM Website: www.fhcsd.org Email: Medical Group(s): Family Hlth Ctr San Diego- City College IPA:	NPI: 1629487285 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:	Medical Group(s): IPA: TOPEROFF, WILL E Provider ID: 84926 Board Certified Specialty: No UCSD MEDICAL GROUP 4168 FRONT ST SAN DIEGO, CA 92103-2030 Phone: (619) 543-3995 Fax: After Hours Phone: (619) 543-3995 Provider Gender: Male License number: NP14178 NPI: 1013103472 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:
THOMPSON, COURTNEY J Provider ID: 112483 Board Certified Specialty: No UCSD MEDICAL GROUP 4168 FRONT ST SAN DIEGO, CA 92103-2030 Phone: (619) 543-3995 Fax: After Hours Phone: (619) 543-3995 Provider Gender: Female License number: NP95001073	THRASHER, JULIA A Provider ID: 121886 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 Phone: (619) 543-6222 Fax: After Hours Phone: (619) 543-6222 Provider Gender: Female License number: NP95007258 NPI: 1073031993 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email:	TOPPEN, LAURA Provider ID: 215477 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 Phone: (800) 926-8273 Fax: After Hours Phone: (800) 926-8273 Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

License number: NP95010163
NPI: 1326563495
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

TOROK, ELIZABETH M

Provider ID: 265129
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3010 CHILDRENS WAY #
2-WEST
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858)
966-5811
Provider Gender: Female
License number: NP21326
NPI: 1386901700
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/99
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Rady Childrens Health Network
TURNER, ELIZABETH A
Provider ID: 255601
Board Certified Specialty: No
UCSD MEDICAL GROUP
4510 EXECUTIVE DR STE 315
SAN DIEGO, CA 92121-3029
Phone: (858) 534-8019
Fax:
After Hours Phone: (858)
534-8019
Provider Gender: Female
License number: NP95009547
NPI: 1326570045
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

VALENCIANO, MARCI J

Provider ID: 263001
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858)
966-8800
Provider Gender: Female

License number: NP20033
NPI: 1093780421
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

VALLES, ELIZABETH A

Provider ID: 108406
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED
FNDRN
3665 KEARNY VILLA RD STE
400
SAN DIEGO, CA 92123-1955
Phone: (858) 966-8801
Fax:
After Hours Phone: (858)
966-8801
Provider Gender: Female
License number: NP95002921
NPI: 1609235589
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

VALLES, ELIZABETH A

Provider ID: 263033

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3665 KEARNY VILLA RD STE 400

SAN DIEGO, CA 92123-1955

Phone: (858) 966-8801

Fax: (858) 966-8528

After Hours Phone: (858)

966-8801

Provider Gender: Female

License number: NP95002921

NPI: 1609235589

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: 0/18

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

VEGA, TERESA

Provider ID: 95372

Board Certified Specialty: No
LOGAN HEIGHTS FAMILY HEALTH CENTER
1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Provider Gender: Female

License number: NP95001705

NPI: 1912304569

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

VIBAL-POASTER, MARIA K

Provider ID: 205651

Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: NP95008661

NPI: 1376046680

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

VILLANUEVA DE GUTIE, BERENICE

Provider ID: 279150

Board Certified Specialty: No
HEALTH EXCEL IPA INC

4060 FAIRMOUNT AVE

SAN DIEGO, CA 92105-1608

Phone: (619) 255-9155

Fax: (619) 795-9849

After Hours Phone: (619)

255-9155

Provider Gender: Female

License number: NP95002188

NPI: 1952795536

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):

No

Accessibility: P, EB, IB, E

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

WATSON, CHRISTINE M

Provider ID: 270000

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

995 GATEWAY CENTER WAY
STE 202

SAN DIEGO, CA 92102-4545

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 264-3107
Fax: (619) 264-6927
After Hours Phone: (619) 264-3107
Provider Gender: Female
License number: NP95006319
NPI: 1508307364
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

WILLEY, MARTI L , NPA
Provider ID: 256421
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
16918 DOVE CANYON RD STE 103
SAN DIEGO, CA 92127-3455
Phone: (858) 649-5100
Fax: (858) 649-5099
After Hours Phone: (858) 649-5100
Provider Gender: Female
License number: NP22548
NPI: 1144574062
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 18/120
American Sign Language (ASL):

No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

WILLEY, MARTI L
Provider ID: 280140
Board Certified Specialty: No
HEALTH EXCEL IPA INC
16918 DOVE CANYON RD STE 103
SAN DIEGO, CA 92127-3455
Phone: (858) 649-5100
Fax: (858) 649-5099
After Hours Phone: (858) 649-5100
Provider Gender: Female
License number: NP22548
NPI: 1144574062
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 17/120
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

WILLIAMS, BREAHA A
Provider ID: 115124
Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC INC

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608
Phone: (619) 255-9155
Fax:
After Hours Phone: (619) 255-9155
Provider Gender: Female
License number: NP95001840
NPI: 1063884864
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website: www.lamaestra.org
Email:
Medical Group(s): La Maestra Family Clinic Inc
IPA:

WOUDSTRA, JOCELYN
Provider ID: 283535
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8574
Fax: (858) 966-7930
After Hours Phone: (858) 966-8574
Provider Gender: Female
License number: NP95017397
NPI: 1609261965
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

YARTSEVA, YULIYA

Provider ID: 213715
Board Certified Specialty: No
HEALTH EXCEL IPA INC
3737 MORAGA AVE STE B103
SAN DIEGO, CA 92117-5352
Phone: (858) 554-1212
Fax: (858) 795-1195
After Hours Phone: (858)
554-1212
Provider Gender: Female
License number: NP95007558
NPI: 1750881843
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

YEH-NAYRE, LANIPUA A

Provider ID: 262455
Board Certified Specialty: No
RADY CHILDRENS HEALTH

NETWORK
3010 CHILDRENS WAY BLDG 2
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858)
966-5811
Provider Gender: Female
License number: NP17336
NPI: 1417157819
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/99
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

YEH-NAYRE, LANIPUA A

Provider ID: 82992
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FN D T N
3010 CHILDRENS WAY # 2W
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5811
Fax:
After Hours Phone: (858)
966-5811
Provider Gender: Female
License number: NP17336
NPI: 1417157819
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

ZENDEJAS, CATHERINE T

Provider ID: 279271
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
6475 ALVARADO RD STE 120
SAN DIEGO, CA 92120-5007
Phone: (619) 583-6133
Fax: (619) 583-0321
After Hours Phone: (619)
583-6133
Provider Gender: Female
License number: NP95016516
NPI: 1639590326
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

CERTIFIED REGISTERED

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NURSE MIDWIFE		
<p>BOSTON, LAURA H <i>Provider ID:</i> 25671 <i>Board Certified Specialty:</i> No LOGAN HEIGHTS FAMILY HEALTH CENTER 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> (619) 269-0053 <i>After Hours Phone:</i> (619) 515-2300 <i>Provider Gender:</i> Female <i>License number:</i> NM792 <i>NPI:</i> 1174553259 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>	<p><i>NPI:</i> 1477644417 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>	<p><i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group</p> <p>EKHOLM, JANNA L <i>Provider ID:</i> 122017 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 4168 FRONT ST SAN DIEGO, CA 92103-2030 <i>Phone:</i> (619) 543-7878 <i>Fax:</i> <i>After Hours Phone:</i> (619) 543-7878 <i>Provider Gender:</i> Female <i>License number:</i> NM1894 <i>NPI:</i> 1588977151 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>
<p>COOPER, ANNE S <i>Provider ID:</i> 83306 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 4168 FRONT ST SAN DIEGO, CA 92103-2030 <i>Phone:</i> (619) 543-7878 <i>Fax:</i> (619) 543-6792 <i>After Hours Phone:</i> (619) 543-7878 <i>Provider Gender:</i> Female <i>License number:</i> NM1689</p>	<p>DOLLAND, STEVEN C <i>Provider ID:</i> 280552 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Male <i>License number:</i> NA95000632 <i>NPI:</i> 1982059044 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Kern Medical Center, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i></p>	<p>GARRETT BROWN, REBECCA C <i>Provider ID:</i> 83460 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 4168 FRONT ST SAN DIEGO, CA 92103-2030 <i>Phone:</i> (619) 543-7878 <i>Fax:</i> (619) 543-6792 <i>After Hours Phone:</i> (619) 543-7878 <i>Provider Gender:</i> Female <i>License number:</i> NMW862</p>

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D. Directorio de proveedores de atención especializada

NPI: 1659344224
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

GEPSHTEIN, YANA

Provider ID: 52244
 Board Certified Specialty: No
 LOGAN HEIGHTS FAMILY
 HEALTH CENTER
 3690 MISSION BLVD
 SAN DIEGO, CA 92109-7368
 Phone: (619) 876-4420
 Fax: (619) 269-0053
 After Hours Phone: (619)
 876-4420
 Provider Gender: Female
 License number: NM1662
 NPI: 1396956512
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Hebrew
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):

IPA:
GOODWIN, RACHEL K
 Provider ID: 210018
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 License number: NM1908
 NPI: 1518274919
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

GOODWIN, RACHEL K
 Provider ID: 210019
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 16950 VIA TAZON
 SAN DIEGO, CA 92127-1607
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 License number: NM1908

NPI: 1518274919
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

GREAR MANN, MELISSA P

Provider ID: 210052
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 License number: NMW1830
 NPI: 1255384475
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):

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D. Directorio de proveedores de atención especializada

IPA: Ucsd Medical Group

GREAR MANN, MELISSA P

Provider ID: 210053

Board Certified Specialty: No

UCSD MEDICAL GROUP

16950 VIA TAZON

SAN DIEGO, CA 92127-1607

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: NMW1830

NPI: 1255384475

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

GUNTHER, HOPE R

Provider ID: 210041

Board Certified Specialty: No

UCSD MEDICAL GROUP

16950 VIA TAZON

SAN DIEGO, CA 92127-1607

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: NM1421

NPI: 1285667741

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

GUNTHER, HOPE R

Provider ID: 83523

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (888) 309-8273

Fax:

After Hours Phone: (888)

309-8273

Provider Gender: Female

License number: NM1421

NPI: 1285667741

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

HIRSCH, JENNIFER S

Provider ID: 210054

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-7878

Fax:

After Hours Phone: (619)

543-7878

Provider Gender: Female

License number: NMW970

NPI: 1891752069

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

HIRSCH, JENNIFER S

Provider ID: 210055

Board Certified Specialty: No

UCSD MEDICAL GROUP

4168 FRONT ST

SAN DIEGO, CA 92103-2030

Phone: (619) 543-7878

Fax:

After Hours Phone: (619)

543-7878

Provider Gender: Female

License number: NMW970

NPI: 1891752069

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

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D. Directorio de proveedores de atención especializada

American Sign Language (ASL): Phone: (888) 309-8273

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

HIRSCH, JENNIFER S

Provider ID: 210058

Board Certified Specialty: No

UCSD MEDICAL GROUP

16950 VIA TAZON

SAN DIEGO, CA 92127-1607

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: NMW970

NPI: 1891752069

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

HIRSCH, JENNIFER S

Provider ID: 83593

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Fax:

After Hours Phone: (888)

309-8273

Provider Gender: Female

License number: NMW970

NPI: 1891752069

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

HIRSCH, JENNIFER S

Provider ID: 83595

Board Certified Specialty: No

UCSD MEDICAL GROUP

4168 FRONT ST

SAN DIEGO, CA 92103-2030

Phone: (619) 543-7878

Fax: (619) 543-6792

After Hours Phone: (619)

543-7878

Provider Gender: Female

License number: NMW970

NPI: 1891752069

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

PERDION, KAREN L

Provider ID: 210134

Board Certified Specialty: No

UCSD MEDICAL GROUP

4168 FRONT ST

SAN DIEGO, CA 92103-2030

Phone: (619) 543-7878

Fax: (619) 543-2366

After Hours Phone: (619)

543-7878

Provider Gender: Female

License number: NM1061

NPI: 1518916857

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

PERDION, KAREN L

Provider ID: 210137

Board Certified Specialty: No

UCSD MEDICAL GROUP

16950 VIA TAZON

SAN DIEGO, CA 92127-1607

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D. Directorio de proveedores de atención especializada

Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NM1061
NPI: 1518916857
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

PERDION, KAREN L

Provider ID: 84323
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (619) 543-7878
Fax: (619) 543-2366
After Hours Phone: (619) 543-7878
Provider Gender: Female
License number: NM1061
NPI: 1518916857
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

STRAUSS, JOANNA E C
Provider ID: 279162
Board Certified Specialty: No
HEALTH EXCEL IPA INC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608
Phone: (619) 255-9155
Fax: (619) 795-9849
After Hours Phone: (619) 255-9155
Provider Gender: Female
License number: NM1920
NPI: 1790104313
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 12/999
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

TIMPE, BETH K

Provider ID: 84924
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (619) 543-6790
Fax:
After Hours Phone: (619) 543-6790

Provider Gender: Female
License number: NM1598
NPI: 1336209428
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

VU, ERICA T

Provider ID: 84942
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-2366
Fax: (619) 543-2366
After Hours Phone: (619) 543-2366
Provider Gender: Female
License number: NM1848
NPI: 1578890737
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<i>Website:</i>	<i>Phone:</i> (619) 692-3211	<i>American Sign Language (ASL):</i>
<i>Email:</i>	<i>Fax:</i> (619) 640-3211	No
<i>Medical Group(s):</i>	<i>After Hours Phone:</i> (619)	<i>♿ Accessibility:</i>
<i>IPA:</i>	692-3211	<i>Hours:</i> M-SA 9AM-5PM
VU, ERICA T	<i>Provider Gender:</i> Female	<i>Website:</i>
<i>Provider ID:</i> 84942	<i>License number:</i> DC31634	<i>Email:</i>
<i>Board Certified Specialty:</i> No	<i>NPI:</i> 1780901264	<i>Medical Group(s):</i>
UCSD MEDICAL GROUP	<i>Provider English Spoken:</i> Yes	<i>IPA:</i> Imperial Health Holdings
200 W ARBOR DR	<i>Provider Language(s) Spoken:</i>	Medical Group-Sd
SAN DIEGO, CA 92103-1911	Vietnamese	
<i>Phone:</i> (619) 543-2366	<i>Cultural Competency:</i> No	
<i>Fax:</i> (619) 543-2366	<i>Hospital Affiliation:</i>	
<i>After Hours Phone:</i> (619)	<i>Medi-Cal Open Panel:</i> Yes	
543-2366	<i>Min/Max Age:</i> None	
<i>Provider Gender:</i> Female	<i>American Sign Language (ASL):</i>	
<i>License number:</i> NP18891	No	
<i>NPI:</i> 1578890737	<i>♿ Accessibility:</i>	
<i>Provider English Spoken:</i> Yes	<i>Hours:</i> M-SA 9AM-5PM	
<i>Provider Language(s) Spoken:</i>	<i>Website:</i>	
Spanish	<i>Email:</i>	
<i>Cultural Competency:</i> No	<i>Medical Group(s):</i>	
<i>Hospital Affiliation:</i>	<i>IPA:</i> Imperial Health Holdings	
<i>Medi-Cal Open Panel:</i> No	Medical Group-Sd	
<i>Min/Max Age:</i> None		
<i>American Sign Language (ASL):</i>	BUI, MAI T	
No	<i>Provider ID:</i> 217595	
<i>♿ Accessibility:</i> W	<i>Board Certified Specialty:</i> No	
<i>Hours:</i> M-SA 9AM-5PM	IMPERIAL HEALTH HOLDINGS	
<i>Website:</i>	MEDICAL GROUP-SD	
<i>Email:</i>	10717 CAMINO RUIZ STE 238	
<i>Medical Group(s):</i>	SAN DIEGO, CA 92126-2364	
<i>IPA:</i>	<i>Phone:</i> (619) 692-3211	

CHIROPRACTOR

BUI, MAI T	<i>Provider ID:</i> 125052	<i>Provider Gender:</i> Female	KAMSI, ALEX
<i>Board Certified Specialty:</i> No	IMPERIAL HEALTH HOLDINGS	<i>License number:</i> DC31634	<i>Provider ID:</i> 279978
MEDICAL GROUP-SD	5354 UNIVERSITY AVE # 3	<i>NPI:</i> 1780901264	<i>Board Certified Specialty:</i> No
SAN DIEGO, CA 92105-2204	<i>Provider English Spoken:</i> Yes	<i>Provider Language(s) Spoken:</i>	HEALTH EXCEL IPA INC
	Vietnamese	<i>Cultural Competency:</i> No	4060 FAIRMOUNT AVE
	<i>Hospital Affiliation:</i>	<i>Hospital Affiliation:</i>	SAN DIEGO, CA 92105-1608
	<i>Medi-Cal Open Panel:</i> Yes	<i>Medi-Cal Open Panel:</i> Yes	<i>Phone:</i> (619) 798-3947
	<i>Min/Max Age:</i> 0/999	<i>Min/Max Age:</i> 0/999	<i>Fax:</i> (619) 269-1302
		<i>American Sign Language (ASL):</i>	<i>After Hours Phone:</i> (619)
		No	798-3947
		<i>♿ Accessibility:</i> P, EB, IB, E	<i>Provider Gender:</i> Male
		<i>Hours:</i> M-SA 9AM-5PM	<i>License number:</i> DC28966
		<i>Website:</i>	<i>NPI:</i> 1851405955
		<i>Email:</i>	<i>Provider English Spoken:</i> Yes
		<i>Medical Group(s):</i>	<i>Provider Language(s) Spoken:</i>
		<i>IPA:</i> Health Excel Ipa Inc	Farsi, Spanish
			<i>Cultural Competency:</i> No
			<i>Hospital Affiliation:</i>
			<i>Medi-Cal Open Panel:</i> Yes
			<i>Min/Max Age:</i> 0/999
			<i>American Sign Language (ASL):</i>
			No
			<i>♿ Accessibility:</i> P, EB, IB, E
			<i>Hours:</i> M-SA 9AM-5PM
			<i>Website:</i>
			<i>Email:</i>
			<i>Medical Group(s):</i>
			<i>IPA:</i> Health Excel Ipa Inc
			LUU, DANIEL Q
			<i>Provider ID:</i> 269883
			<i>Board Certified Specialty:</i> No
			COMMUNITY CARE IPA LLC
			4419 EUCLID AVE STE 105
			SAN DIEGO, CA 92115-4564

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D. Directorio de proveedores de atención especializada

Phone: (619) 287-1235
Fax: (619) 255-6406
After Hours Phone: (619) 287-1235
Provider Gender: Male
License number: DC26096
NPI: 1225108269
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

ROJAS, RICHARD J
Provider ID: 109528
Board Certified Specialty: No
FAMILY HLTH CTR SD
HILLCREST
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619) 515-2545
Provider Gender: Male
License number: DC31024
NPI: 1538318811
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No

♿ Accessibility:
Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Family Hlth Ctr Sd Hillcrest
IPA:

DERMATOLOGY

BARRIO, VICTORIA R
Provider ID: 242321
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123-4232
Phone: (858) 966-6795
Fax: (858) 966-7479
After Hours Phone: (858) 966-6795
Provider Gender: Female
License number: A91617
NPI: 1598836355
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

BARRIO, VICTORIA R
Provider ID: 253507

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-6795
Fax: (858) 966-7479
After Hours Phone: (858) 966-6795
Provider Gender: Female
License number: A91617
NPI: 1598836355
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

BOEN, MONICA
Provider ID: 129041
Board Certified Specialty: No
WEST DERMATOLOGY AND SURG MED GRP
9339 GENESEE AVE # 350A
SAN DIEGO, CA 92121-2119
Phone: (858) 454-4300
Fax:
After Hours Phone: (858) 454-4300
Provider Gender: Female
License number: A149554
NPI: 1508203563
Provider English Spoken: Yes

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D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken:
French, Polish, Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website: westdermatology.com
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

BOEN, MONICA

Provider ID: 207594
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9339 GENESEE AVE STE 350
SAN DIEGO, CA 92121-2150
Phone: (858) 454-4300
Fax: (858) 454-5088
After Hours Phone: (858)
454-4300
Provider Gender: Female
License number: A149554
NPI: 1508203563
Provider English Spoken: Yes
Provider Language(s) Spoken:
French, Polish, Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

BOEN, MONICA, MD

Provider ID: 269740
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9339 GENESEE AVE STE 350
SAN DIEGO, CA 92121-2150
Phone: (858) 454-4300
Fax: (858) 454-5088
After Hours Phone: (858)
454-4300
Provider Gender: Female
License number: A149554
NPI: 1508203563
Provider English Spoken: Yes
Provider Language(s) Spoken:
French, Polish, Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

BOEN, MONICA, MD

Provider ID: 269741
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4060 4TH AVE STE 415
SAN DIEGO, CA 92103-2121
Phone: (619) 298-9809
Fax: (619) 298-9823
After Hours Phone: (619)
298-9809
Provider Gender: Female
License number: A149554
NPI: 1508203563
Provider English Spoken: Yes

Provider Language(s) Spoken:
French, Polish, Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

BOIKO, SUSAN

Provider ID: 242304
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123-4232
Phone: (858) 966-6795
Fax:
After Hours Phone: (858)
966-6795
Provider Gender: Female
License number: G41069
NPI: 1053488981
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health

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D. Directorio de proveedores de atención especializada

Network

BROUHA, BROOK L

Provider ID: 115451

Board Certified Specialty: No
WEST DERMATOLOGY AND
SURG MED GRP

9339 GENESEE AVE # 350A
SAN DIEGO, CA 92121-2119
Phone: (858) 263-0571

Fax:

After Hours Phone: (858)

263-0571

Provider Gender: Male

License number: A97902

NPI: 1114173937

Provider English Spoken: Yes

Provider Language(s) Spoken:

French

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Scripps

Mercy Hospital, Scripps Mercy

Hospital Chula Vista

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website: westdermatology.com

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc

BROUHA, BROOK L

Provider ID: 257317

Board Certified Specialty: No
HEALTH EXCEL IPA INC

9339 GENESEE AVE STE 350
SAN DIEGO, CA 92121-2150

Phone: (858) 263-0571

Fax: (858) 454-5088

After Hours Phone: (858)

263-0571

Provider Gender: Male

License number: A97902

NPI: 1114173937

Provider English Spoken: Yes

Provider Language(s) Spoken:

French

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Scripps

Mercy Hospital, Scripps Mercy

Hospital Chula Vista

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc

BROUHA, BROOK L , MD

Provider ID: 267943

Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC

9339 GENESEE AVE STE 350
SAN DIEGO, CA 92121-2150

Phone: (858) 454-4300

Fax: (858) 454-5088

After Hours Phone: (858)

454-4300

Provider Gender: Male

License number: A97902

NPI: 1114173937

Provider English Spoken: Yes

Provider Language(s) Spoken:

French

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Scripps

Mercy Hospital, Scripps Mercy

Hospital Chula Vista

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc

CALAME, ANTOANELLA

Provider ID: 109337

Board Certified Specialty: No
COMPASS

DERMATOPATHOLOGY INC

6605 NANCY RIDGE DR

SAN DIEGO, CA 92121-2253

Phone: (858) 750-2983

Fax:

After Hours Phone: (858)

750-2983

Provider Gender: Female

License number: A84455

NPI: 1285817569

Provider English Spoken: Yes

Provider Language(s) Spoken:

Romanian

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Scripps

Mercy Hospital, Scripps Mercy

Hospital Chula Vista

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, R,
T, W

Hours: M-SA 9AM-5PM

Website:

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D. Directorio de proveedores de atención especializada

<i>Email:</i>	<i>Phone:</i> (858) 966-6795	German, Spanish
<i>Medical Group(s):</i>	<i>Fax:</i>	<i>Cultural Competency:</i> No
<i>IPA:</i> Health Excel Ipa Inc	<i>After Hours Phone:</i> (858) 966-6795	<i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Sharp Memorial Hospital, Sharp Mary Birch Hosp For Women And Newborns
DINARDO, ANNA	<i>Provider Gender:</i> Female	<i>Medi-Cal Open Panel:</i> Yes
<i>Provider ID:</i> 83359	<i>License number:</i> A86265	<i>Min/Max Age:</i> 0/18
<i>Board Certified Specialty:</i> No	<i>NPI:</i> 1528139383	<i>American Sign Language (ASL):</i> No
UCSD MEDICAL GROUP	<i>Provider English Spoken:</i> Yes	<i>Accessibility:</i>
8899 UNIVERSITY CENTER LN	<i>Provider Language(s) Spoken:</i> German, Spanish	<i>Hours:</i> M-SA 9AM-5PM
STE 350	<i>Cultural Competency:</i> No	<i>Website:</i>
SAN DIEGO, CA 92122-1010	<i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Sharp Memorial Hospital, Sharp Mary Birch Hosp For Women And Newborns	<i>Email:</i>
<i>Phone:</i> (858) 657-8322	<i>Medi-Cal Open Panel:</i> Yes	<i>Medical Group(s):</i>
<i>Fax:</i>	<i>Min/Max Age:</i> 0/18	<i>IPA:</i> Rady Childrens Health Network
<i>After Hours Phone:</i> (858) 657-8322	<i>American Sign Language (ASL):</i> No	DORSCHNER, ROBERT A
<i>Provider Gender:</i> Female	<i>Accessibility:</i>	<i>Provider ID:</i> 116640
<i>License number:</i> A104854	<i>Hours:</i> M-SA 9AM-5PM	<i>Board Certified Specialty:</i> No
<i>NPI:</i> 1992873673	<i>Website:</i>	UCSD MEDICAL GROUP
<i>Provider English Spoken:</i> Yes	<i>Email:</i>	8899 UNIVERSITY CENTER LN
<i>Provider Language(s) Spoken:</i> Italian	<i>Medical Group(s):</i>	STE 350
<i>Cultural Competency:</i> No	<i>IPA:</i> Rady Childrens Health Network	SAN DIEGO, CA 92122-1010
<i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr	DOHIL, MAGDALENE A	<i>Phone:</i> (858) 657-8322
<i>Medi-Cal Open Panel:</i> No	<i>Provider ID:</i> 277244	<i>Fax:</i>
<i>Min/Max Age:</i> None	<i>Board Certified Specialty:</i> No	<i>After Hours Phone:</i> (858) 657-8322
<i>American Sign Language (ASL):</i> No	RADY CHILDRENS HEALTH NETWORK	<i>Provider Gender:</i> Male
<i>Accessibility:</i>	3020 CHILDRENS WAY	<i>License number:</i> A128567
<i>Hours:</i> M-SA 9AM-5PM	SAN DIEGO, CA 92123-4223	<i>NPI:</i> 1306103924
<i>Website:</i>	<i>Phone:</i> (858) 966-6795	<i>Provider English Spoken:</i> Yes
<i>Email:</i>	<i>Fax:</i> (858) 966-7479	<i>Provider Language(s) Spoken:</i>
<i>Medical Group(s):</i>	<i>After Hours Phone:</i> (858) 966-6795	<i>Cultural Competency:</i> No
<i>IPA:</i>	<i>Provider Gender:</i> Female	<i>Hospital Affiliation:</i>
DOHIL, MAGDALENE A	<i>License number:</i> A86265	<i>Medi-Cal Open Panel:</i> No
<i>Provider ID:</i> 242290	<i>NPI:</i> 1528139383	<i>Min/Max Age:</i> None
<i>Board Certified Specialty:</i> No	<i>Provider English Spoken:</i> Yes	<i>American Sign Language (ASL):</i> No
RADY CHILDRENS HEALTH NETWORK	<i>Provider Language(s) Spoken:</i>	<i>Accessibility:</i>
3030 CHILDRENS WAY FL 4		<i>Hours:</i> M-SA 9AM-5PM
SAN DIEGO, CA 92123-4232		<i>Website:</i>

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D. Directorio de proveedores de atención especializada

<i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group	<i>License number:</i> A150792 <i>NPI:</i> 1295198091 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	<i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network
DORSCHNER, ROBERT A <i>Provider ID:</i> 272945 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 8899 UNIVERSITY CENTER LN STE 350 SAN DIEGO, CA 92122-1010 <i>Phone:</i> (858) 657-8322 <i>Fax:</i> <i>After Hours Phone:</i> (858) 657-8322 <i>Provider Gender:</i> Male <i>License number:</i> A128567 <i>NPI:</i> 1306103924 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group	EICHENFIELD, LAWRENCE F <i>Provider ID:</i> 242242 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3030 CHILDRENS WAY FL 4 SAN DIEGO, CA 92123-4232 <i>Phone:</i> (858) 966-6795 <i>Fax:</i> <i>After Hours Phone:</i> (858) 966-6795 <i>Provider Gender:</i> Male <i>License number:</i> G69132 <i>NPI:</i> 1477624138 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Ucsd Medical Ctr, Childrens Hospital Of Orange County, Childrens Hosp And Resrch Ctr At Oakland <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health	EICHENFIELD, LAWRENCE F <i>Provider ID:</i> 51947 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 8010 FROST ST STE 602 SAN DIEGO, CA 92123-4204 <i>Phone:</i> (858) 966-6795 <i>Fax:</i> <i>After Hours Phone:</i> (858) 966-6795 <i>Provider Gender:</i> Male <i>License number:</i> G69132 <i>NPI:</i> 1477624138 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Ucsd Medical Ctr, Childrens Hospital Of Orange County, Childrens Hosp And Resrch Ctr At Oakland <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health
EICHENFIELD, DAWN Z <i>Provider ID:</i> 283142 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-6795 <i>Fax:</i> (858) 966-7479 <i>After Hours Phone:</i> (858) 966-6795 <i>Provider Gender:</i> Female	EICHENFIELD, LAWRENCE F <i>Provider ID:</i> 242242 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3030 CHILDRENS WAY FL 4 SAN DIEGO, CA 92123-4232 <i>Phone:</i> (858) 966-6795 <i>Fax:</i> <i>After Hours Phone:</i> (858) 966-6795 <i>Provider Gender:</i> Male <i>License number:</i> G69132 <i>NPI:</i> 1477624138 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Ucsd Medical Ctr, Childrens Hospital Of Orange County, Childrens Hosp And Resrch Ctr At Oakland <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18	EICHENFIELD, LAWRENCE F <i>Provider ID:</i> 51947 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 8010 FROST ST STE 602 SAN DIEGO, CA 92123-4204 <i>Phone:</i> (858) 966-6795 <i>Fax:</i> <i>After Hours Phone:</i> (858) 966-6795 <i>Provider Gender:</i> Male <i>License number:</i> G69132 <i>NPI:</i> 1477624138 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Ucsd Medical Ctr, Childrens Hospital Of Orange County, Childrens Hosp And Resrch Ctr At Oakland <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Network

ELSENSOHN, ASHLEY N

Provider ID: 272777
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8899 UNIVERSITY CENTER LN
 STE 350
 SAN DIEGO, CA 92122-1010
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
 926-8273
Provider Gender: Female
License number: A148423
NPI: 1467847905
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

FABRIKANT, JORDAN S

Provider ID: 262275
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 4060 4TH AVE STE 415
 SAN DIEGO, CA 92103-2121
Phone: (619) 298-9809
Fax: (619) 298-9823
After Hours Phone: (619)
 298-9809
Provider Gender: Male
License number: 20A13142
NPI: 1649585753

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings
 Medical Group-Sd

GERSTENFELD, ERIC S

Provider ID: 26531
Board Certified Specialty: Yes
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 4060 4TH AVE STE 415
 SAN DIEGO, CA 92103-2121
Phone: (619) 298-9809
Fax:
After Hours Phone: (619)
 298-9809
Provider Gender: Male
License number: G70325
NPI: 1114979754
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital Chula Vista, Corona
 Regional Med Ctr, Scripps Mercy
 Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):
IPA: Imperial Health Holdings
 Medical Group-Sd

GRAY, JAYLA B

Provider ID: 279378
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 4765 CARMEL MOUNTAIN RD
 STE 201
 SAN DIEGO, CA 92130-6657
Phone: (858) 369-7546
Fax: (760) 738-7616
After Hours Phone: (858)
 369-7546
Provider Gender: Female
License number: A169832
NPI: 1053706911
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

HAMMAN, MICHAEL S

Provider ID: 115453
Board Certified Specialty: Yes
 WEST DERMATOLOGY AND
 SURG MED GRP
 9339 GENESEE AVE # 350A
 SAN DIEGO, CA 92121-2119

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 454-4300
Fax:
After Hours Phone: (858) 454-4300
Provider Gender: Male
License number: A97551
NPI: 1538346911
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website: westdermatology.com
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

HAMMAN, MICHAEL S
Provider ID: 208085
Board Certified Specialty: No
HEALTH EXCEL IPA INC
4060 4TH AVE STE 415
SAN DIEGO, CA 92103-2121
Phone: (619) 298-9809
Fax: (619) 298-9823
After Hours Phone: (619) 298-9809
Provider Gender: Male
License number: A97551
NPI: 1538346911
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):

No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

HAMMAN, MICHAEL S , MD
Provider ID: 241043
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4060 4TH AVE STE 415
SAN DIEGO, CA 92103-2121
Phone: (619) 298-9809
Fax: (619) 298-9823
After Hours Phone: (619) 298-9809
Provider Gender: Male
License number: A97551
NPI: 1538346911
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

HAMMAN, MICHAEL S , MD
Provider ID: 241044
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9339 GENESEE AVE STE 350
SAN DIEGO, CA 92121-2150

Phone: (858) 454-4300
Fax: (858) 454-5088
After Hours Phone: (858) 454-4300
Provider Gender: Male
License number: A97551
NPI: 1538346911
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

HAMMAN, MICHAEL S
Provider ID: 284179
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9339 GENESEE AVE STE 350
SAN DIEGO, CA 92121-2150
Phone: (858) 454-4300
Fax: (858) 454-5088
After Hours Phone: (858) 454-4300
Provider Gender: Male
License number: A97551
NPI: 1538346911
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc	4060 4TH AVE STE 415 SAN DIEGO, CA 92103-2121 <i>Phone:</i> (619) 298-9809 <i>Fax:</i> (619) 298-9823 <i>After Hours Phone:</i> (619) 298-9809 <i>Provider Gender:</i> Male <i>License number:</i> 20A14658 <i>NPI:</i> 1013277045 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc	<i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc
HEMPERLY, STEPHEN E <i>Provider ID:</i> 115398 <i>Board Certified Specialty:</i> No WEST DERMATOLOGY AND SURG MED GRP 4060 4TH AVE STE 415 SAN DIEGO, CA 92103-2121 <i>Phone:</i> (619) 298-9809 <i>Fax:</i> <i>After Hours Phone:</i> (619) 298-9809 <i>Provider Gender:</i> Male <i>License number:</i> 20A14658 <i>NPI:</i> 1013277045 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM <i>Website:</i> westdermatology.com <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc	HEMPERLY, STEPHEN E <i>Provider ID:</i> 243726 <i>Board Certified Specialty:</i> Yes COMMUNITY CARE IPA LLC 4060 4TH AVE STE 415 SAN DIEGO, CA 92103-2121 <i>Phone:</i> (619) 298-9809 <i>Fax:</i> (619) 298-9823 <i>After Hours Phone:</i> (619) 298-9809 <i>Provider Gender:</i> Male <i>License number:</i> 20A14658 <i>NPI:</i> 1013277045 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes	HIGHTOWER, GEORGE K <i>Provider ID:</i> 245756 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3030 CHILDRENS WAY FL 4 SAN DIEGO, CA 92123-4232 <i>Phone:</i> (858) 966-6795 <i>Fax:</i> <i>After Hours Phone:</i> (858) 966-6795 <i>Provider Gender:</i> Male <i>License number:</i> A156244 <i>NPI:</i> 1881014652 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network, Ucsd Medical Group
HEMPERLY, STEPHEN E <i>Provider ID:</i> 208070 <i>Board Certified Specialty:</i> Yes HEALTH EXCEL IPA INC	HEMPERLY, STEPHEN E <i>Provider ID:</i> 243726 <i>Board Certified Specialty:</i> Yes COMMUNITY CARE IPA LLC 4060 4TH AVE STE 415 SAN DIEGO, CA 92103-2121 <i>Phone:</i> (619) 298-9809 <i>Fax:</i> (619) 298-9823 <i>After Hours Phone:</i> (619) 298-9809 <i>Provider Gender:</i> Male <i>License number:</i> 20A14658 <i>NPI:</i> 1013277045 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes	HIGHTOWER, GEORGE K

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D. Directorio de proveedores de atención especializada

Provider ID: 285643
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A156244
NPI: 1881014652
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd La Jolla John Sally
Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network, Ucsd Medical Group

JIANG, SHANG I

Provider ID: 83638
Board Certified Specialty: No
UCSD MEDICAL GROUP
8899 UNIVERSITY CENTER LN
STE 350
SAN DIEGO, CA 92122-1010
Phone: (858) 657-8322
Fax: (858) 657-1291
After Hours Phone: (858) 657-8322
Provider Gender: Male
License number: A87333
NPI: 1801835996

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KASSAB, GHADA K

Provider ID: 245637
Board Certified Specialty: No
HEALTH EXCEL IPA INC
3737 MORAGA AVE STE A206
SAN DIEGO, CA 92117-5493
Phone: (858) 273-2726
Fax: (858) 273-2725
After Hours Phone: (858) 273-2726
Provider Gender: Female
License number: A114457
NPI: 1023278504
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

Health Excel Ipa Inc
KASSAB, GHADA K , MD
Provider ID: 245638
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
3737 MORAGA AVE STE A206
SAN DIEGO, CA 92117-5493
Phone: (858) 273-2726
Fax: (858) 273-2725
After Hours Phone: (858) 273-2726
Provider Gender: Female
License number: A114457
NPI: 1023278504
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

KAUNITZ, GENEVIEVE J

Provider ID: 285011
Board Certified Specialty: No
UCSD MEDICAL GROUP
8899 UNIVERSITY CENTER LN
STE 350
SAN DIEGO, CA 92122-1010
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: A172778
NPI: 1053734905
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KEEL, DOUGLAS M

Provider ID: 127852
Board Certified Specialty: Yes
HEALTH EXCEL IPA INC
8899 UNIVERSITY CENTER LN
STE 150
SAN DIEGO, CA 92122-1035
Phone: (858) 535-1400
Fax: (858) 535-1900
After Hours Phone: (858)
535-1400
Provider Gender: Male
License number: 20A7081
NPI: 1154320075
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Health Excel Ipa Inc
KOZMA, BONITA D
Provider ID: 269301
Board Certified Specialty: No
UCSD MEDICAL GROUP
8899 UNIVERSITY CENTER LN
STE 350
SAN DIEGO, CA 92122-1010
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A137074
NPI: 1659654598
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Providence
Saint Johns Health Center, Santa
Monica Ucla Med Ctr, Ronald
Reagan Ucla Med Ctr, Ucsd
Medical Ctr, Ucsd La Jolla John
Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KEEL, DOUGLAS M
Provider ID: 127852
Board Certified Specialty: Yes
HEALTH EXCEL IPA INC
8899 UNIVERSITY CENTER LN
STE 150
SAN DIEGO, CA 92122-1035
Phone: (858) 535-1400
Fax: (858) 535-1900
After Hours Phone: (858)
535-1400
Provider Gender: Male
License number: 20A7081
NPI: 1154320075
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:

Medical Group(s):
IPA: Ucsd Medical Group

LEVIN, JACQUELINE M

Provider ID: 102457
Board Certified Specialty: No
WEST DERMATOLOGY AND
SURG MED GRP
4060 4TH AVE STE 415
SAN DIEGO, CA 92103-2121

Phone: (619) 298-9809
Fax: (619) 298-9823
After Hours Phone: (619)
298-9809
Provider Gender: Female
License number: 20A12190
NPI: 1164653093
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

LEVIN, JACQUELINE M

Provider ID: 242685
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4060 4TH AVE STE 415
SAN DIEGO, CA 92103-2121
Phone: (619) 298-9809
Fax: (619) 298-9823
After Hours Phone: (619)
298-9809
Provider Gender: Female
License number: 20A12190
NPI: 1164653093
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p><i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd</p>	<p>COMMUNITY CARE IPA LLC 7695 CARDINAL CT STE 200 SAN DIEGO, CA 92123-3357 <i>Phone:</i> (858) 278-8835 <i>Fax:</i> (858) 386-4776 <i>After Hours Phone:</i> (858) 278-8835 <i>Provider Gender:</i> Male <i>License number:</i> A78569 <i>NPI:</i> 1467447284 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Korean, Spanish, Tagalog <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Alvarado Hospital Llc <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc</p>	<p><i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA:</p>
<p>NAHM, WALTER K <i>Provider ID:</i> 241922 <i>Board Certified Specialty:</i> Yes HEALTH EXCEL IPA INC 7695 CARDINAL CT STE 200 SAN DIEGO, CA 92123-3357 <i>Phone:</i> (858) 278-8835 <i>Fax:</i> (858) 386-4776 <i>After Hours Phone:</i> (858) 278-8835 <i>Provider Gender:</i> Male <i>License number:</i> A78569 <i>NPI:</i> 1467447284 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Korean, Spanish, Tagalog <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Alvarado Hospital Llc <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc</p>	<p>ORME, CHARISSE <i>Provider ID:</i> 110331 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 8899 UNIVERSITY CENTER LN STE 350 SAN DIEGO, CA 92122-1010 <i>Phone:</i> (858) 657-8322 <i>Fax:</i> <i>After Hours Phone:</i> (858) 657-8322 <i>Provider Gender:</i> Female <i>License number:</i> A141036 <i>NPI:</i> 1861767097 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No</p>	<p>ORTIZ, ARISA E <i>Provider ID:</i> 84317 <i>Board Certified Specialty:</i> Yes UCSD MEDICAL GROUP 8899 UNIVERSITY CENTER LN STE 350 SAN DIEGO, CA 92122-1010 <i>Phone:</i> (858) 657-8322 <i>Fax:</i> <i>After Hours Phone:</i> (858) 657-8322 <i>Provider Gender:</i> Female <i>License number:</i> A101163 <i>NPI:</i> 1659556165 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA:</p>
<p>NAHM, WALTER K , MD <i>Provider ID:</i> 69317 <i>Board Certified Specialty:</i> Yes</p>	<p>REED, KELLY L <i>Provider ID:</i> 117321 <i>Board Certified Specialty:</i> Yes</p>	

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D. Directorio de proveedores de atención especializada

WEST DERMATOLOGY AND
SURG MED GRP

4060 4TH AVE STE 415
SAN DIEGO, CA 92103-2121

Phone: (619) 298-9809

Fax:

After Hours Phone: (619)
298-9809

Provider Gender: Female

License number: 20A15550

NPI: 1053666370

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA
9AM-5PM

Website: westdermatology.com

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

REED, KELLY L

Provider ID: 117322

Board Certified Specialty: Yes

WEST DERMATOLOGY AND
SURG MED GRP

9339 GENESEE AVE # 350A
SAN DIEGO, CA 92121-2119

Phone: (858) 454-4300

Fax:

After Hours Phone: (858)
454-4300

Provider Gender: Female

License number: 20A15550

NPI: 1053666370

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website: westdermatology.com

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

REED, KELLY L

Provider ID: 242598

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

4060 4TH AVE STE 415
SAN DIEGO, CA 92103-2121

Phone: (619) 298-9809

Fax: (619) 298-9823

After Hours Phone: (619)

298-9809

Provider Gender: Female

License number: 20A15550

NPI: 1053666370

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

REED, KELLY L

Provider ID: 242599

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

9339 GENESEE AVE STE 350
SAN DIEGO, CA 92121-2150

Phone: (858) 454-4300

Fax: (858) 484-5088

After Hours Phone: (858)
454-4300

Provider Gender: Female

License number: 20A15550

NPI: 1053666370

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

RUTH, NADINE H

Provider ID: 281019

Board Certified Specialty: No

HEALTH EXCEL IPA INC

6605 NANCY RIDGE DR # A
SAN DIEGO, CA 92121-2253

Phone: (858) 900-2747

Fax: (858) 900-2779

After Hours Phone: (858)

900-2747

Provider Gender: Female

License number: A159592

NPI: 1407097942

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

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D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

SCHAIRER, DAVID O

Provider ID: 242313
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123-4232
Phone: (858) 966-6795
Fax: (858) 966-7479
After Hours Phone: (858) 966-6795
Provider Gender: Male
License number: A148597
NPI: 1619311164
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Childrens Hospital Of Orange
County
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

SCHAIRER, DAVID O

Provider ID: 264683
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223
Phone: (858) 966-6795
Fax: (858) 966-7479
After Hours Phone: (858) 966-6795
Provider Gender: Male
License number: A148597
NPI: 1619311164
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Childrens Hospital Of Orange
County
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

SCHNEIDER, JEREMY A

Provider ID: 110359
Board Certified Specialty: No
UCSD MEDICAL GROUP
8899 UNIVERSITY CENTER LN
STE 350
SAN DIEGO, CA 92122-1010
Phone: (858) 657-8322
Fax:
After Hours Phone: (858) 657-8322
Provider Gender: Male
License number: A124232
NPI: 1265762520
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SHAHAN, FRED F , MD

Provider ID: 65605
Board Certified Specialty: No
SAN DIEGO DERMATOLOGY
AND COSMETIC SURGERY
6367 ALVARADO CT STE 107
SAN DIEGO, CA 92120-4914
Phone: (619) 287-1882
Fax: (619) 287-4121
After Hours Phone: (619) 287-1882
Provider Gender: Male
License number: G83901
NPI: 1811913221
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Alvarado
Hospital Llc, Scripps Memorial
Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SHIELL, RONALD D

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider ID: 207624
Board Certified Specialty: No
HEALTH EXCEL IPA INC
4060 4TH AVE STE 415
SAN DIEGO, CA 92103-2121
Phone: (619) 289-9809
Fax: (619) 289-9823
After Hours Phone: (619)
289-9809
Provider Gender: Male
License number: G70359
NPI: 1285687384
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc, Imperial
 Health Holdings Medical
 Group-Sd

SHIELL, RONALD D , MD
Provider ID: 242596
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4060 4TH AVE STE 415
SAN DIEGO, CA 92103-2121
Phone: (619) 289-9809
Fax: (619) 289-9823
After Hours Phone: (619)
289-9809
Provider Gender: Male
License number: G70359
NPI: 1285687384
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc, Imperial
 Health Holdings Medical
 Group-Sd

SHIELL, RONALD D
Provider ID: 41094
Board Certified Specialty: No
WEST DERMATOLOGY AND
SURG MED GRP
4060 4TH AVE STE 415
SAN DIEGO, CA 92103-2121
Phone: (619) 289-9809
Fax: (619) 289-9823
After Hours Phone: (619)
289-9809
Provider Gender: Male
License number: G70359
NPI: 1285687384
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc, Imperial

Health Holdings Medical
Group-Sd
SHI, VERONICA J
Provider ID: 271713
Board Certified Specialty: No
UCSD MEDICAL GROUP
8899 UNIVERSITY CENTER LN
STE 350
SAN DIEGO, CA 92122-1010
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A152990
NPI: 1366897464
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SIMZAR, SOHEIL, MD
Provider ID: 242621
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4060 4TH AVE STE 415
SAN DIEGO, CA 92103-2121
Phone: (619) 298-9809
Fax: (619) 298-9823
After Hours Phone: (619)
298-9809
Provider Gender: Male

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D. Directorio de proveedores de atención especializada

License number: A97769
NPI: 1780881797
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Los Angeles
County Harbor Ucla Medical
Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

SIMZAR, SOHEIL

Provider ID: 98869
Board Certified Specialty: No
WEST DERMATOLOGY AND
SURG MED GRP
4060 4TH AVE STE 415
SAN DIEGO, CA 92103-2121
Phone: (619) 298-9809
Fax: (619) 298-9823
After Hours Phone: (619)
298-9809
Provider Gender: Male
License number: A97769
NPI: 1780881797
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Los Angeles
County Harbor Ucla Medical
Center
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

SINGH, GAURAV

Provider ID: 272612
Board Certified Specialty: No
UCSD MEDICAL GROUP
8899 UNIVERSITY CENTER LN
STE 350
SAN DIEGO, CA 92122-1010
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A168460
NPI: 1184073801
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SOHN, GRACE K

Provider ID: 218330
Board Certified Specialty: No
UCSD MEDICAL GROUP

8899 UNIVERSITY CENTER LN
STE 350
SAN DIEGO, CA 92122-1010
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A144607
NPI: 1023405727
Provider English Spoken: Yes
Provider Language(s) Spoken:
Korean
Cultural Competency: No
Hospital Affiliation: John Muir
Medical Center Concord
Campus, John Muir Medical
Center Walnut Creek Campus
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SPRAGUE, JESSICA M

Provider ID: 127460
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN
8010 FROST ST STE 602
SAN DIEGO, CA 92123-4204
Phone: (858) 966-6795
Fax:
After Hours Phone: (858)
966-6795
Provider Gender: Female
License number: A134345
NPI: 1437594884
Provider English Spoken: Yes

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D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SPRAGUE, JESSICA M

Provider ID: 242318
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123-4232
Phone: (858) 966-6795
Fax:
After Hours Phone: (858) 966-6795
Provider Gender: Female
License number: A134345
NPI: 1437594884
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Rady Childrens Health Network
STEIN, ALEXANDER D , MD
Provider ID: 268621
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
6280 JACKSON DR STE 8
SAN DIEGO, CA 92119-3436
Phone: (619) 303-3062
Fax: (760) 687-2825
After Hours Phone: (619) 303-3062
Provider Gender: Male
License number: A106295
NPI: 1760431654

Provider English Spoken: Yes
Provider Language(s) Spoken: French, Romanian
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

SUN, BRYAN K

Provider ID: 109550
Board Certified Specialty: No
UCSD MEDICAL GROUP
8899 UNIVERSITY CENTER LN
STE 350
SAN DIEGO, CA 92122-1010
Phone: (858) 657-8322
Fax:
After Hours Phone: (858) 657-8322

Provider Gender: Male
License number: A109152
NPI: 1275787673
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Stanford Health Care, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

TOMPKINS, STACY D

Provider ID: 115608
Board Certified Specialty: No
WEST DERMATOLOGY AND SURG MED GRP
9339 GENESEE AVE # 350A
SAN DIEGO, CA 92121-2119
Phone: (858) 454-4300
Fax:
After Hours Phone: (858) 454-4300
Provider Gender: Female
License number: A52958
NPI: 1255418265
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website: westdermatology.com
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

TOMPKINS, STACY D

Provider ID: 207967
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9339 GENESEE AVE STE 350
SAN DIEGO, CA 92121-2150
Phone: (858) 454-4300
Fax: (858) 454-5088
After Hours Phone: (858)
454-4300
Provider Gender: Female
License number: A52958
NPI: 1255418265
Provider English Spoken: Yes
Provider Language(s) Spoken:
French, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

TOMPKINS, STACY D , MD

Provider ID: 246364
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9333 GENESEE AVE # 350A

SAN DIEGO, CA 92121-2111
Phone: (858) 454-4300
Fax: (858) 454-5088
After Hours Phone: (858)
454-4300
Provider Gender: Female
License number: A52958
NPI: 1255418265
Provider English Spoken: Yes
Provider Language(s) Spoken:
French, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

TOM, WYNNIS L

Provider ID: 242311
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123-4232
Phone: (858) 966-6795
Fax: (858) 966-7479
After Hours Phone: (858)
966-6795
Provider Gender: Female
License number: A99290
NPI: 1922215045
Provider English Spoken: Yes
Provider Language(s) Spoken:
Chinese, Mandarin, Spanish,
Yue Chinese

Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital, Ucsd
Medical Ctr, Childrens Hosp And
Resrch Ctr At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/99
American Sign Language (ASL):
No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

TOM, WYNNIS L

Provider ID: 64659
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (619) 543-6248
Fax: (858) 966-7479
After Hours Phone: (619)
543-6248
Provider Gender: Female
License number: A99290
NPI: 1922215045
Provider English Spoken: Yes
Provider Language(s) Spoken:
Chinese, Mandarin, Spanish,
Yue Chinese
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Rady Childrens Hospital San
Diego, Sharp Memorial Hospital,
Childrens Hosp And Resrch Ctr
At Oakland
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

♿ *Accessibility:* W

Hours: M-F 8AM-5PM, SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

TOM, WYNNIS L

Provider ID: 84925

Board Certified Specialty: No

UCSD MEDICAL GROUP

8899 UNIVERSITY CENTER LN STE 230

SAN DIEGO, CA 92122-1010

Phone: (858) 657-7726

Fax:

After Hours Phone: (858) 657-7726

Provider Gender: Female

License number: A99290

NPI: 1922215045

Provider English Spoken: Yes

Provider Language(s) Spoken:

Chinese, Mandarin, Spanish, Yue Chinese

Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr, Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Childrens Hosp And Resrch Ctr At Oakland

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL): No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

TSE, YARDY

Provider ID: 280330

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

4765 CARMEL MOUNTAIN RD STE 201

SAN DIEGO, CA 92130-6657

Phone: (858) 369-7546

Fax: (858) 369-7547

After Hours Phone: (858)

369-7546

Provider Gender: Female

License number: G82156

NPI: 1881608321

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Scripps

Mercy Hospital Chula Vista,

Scripps Memorial Hospital

Encinitas

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

UEBELHOER, NATHAN S

Provider ID: 128021

Board Certified Specialty: No

HEALTH EXCEL IPA INC

6605 NANCY RIDGE DR

SAN DIEGO, CA 92121-2253

Phone: (858) 900-2700

Fax: (858) 900-2778

After Hours Phone: (858)

900-2700

Provider Gender: Male

License number: 20A9328

NPI: 1659344513

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Naval Medical Ctr Sd Rbe

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

♿ *Accessibility:* P, EB, IB, E, R, T

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc, Imperial

Health Holdings Medical

Group-Sd

ZALESKI LARSEN, LISA A

Provider ID: 109712

Board Certified Specialty: No

WEST DERMATOLOGY AND

SURG MED GRP

4060 4TH AVE STE 415

SAN DIEGO, CA 92103-2121

Phone: (619) 298-9809

Fax: (619) 298-9823

After Hours Phone: (619)

298-9809

Provider Gender: Female

License number: 20A13774

NPI: 1336296912

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

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

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

9AM-5PM

Website: westdermatology.com

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

ZALESKI LARSEN, LISA A

Provider ID: 208273

Board Certified Specialty: No

HEALTH EXCEL IPA INC

4060 4TH AVE STE 415

SAN DIEGO, CA 92103-2121

Phone: (619) 298-9809

Fax: (619) 298-9823

After Hours Phone: (619)

298-9809

Provider Gender: Female

License number: 20A13774

NPI: 1336296912

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

ZALESKI LARSEN, LISA A , MD

Provider ID: 242549

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

4060 4TH AVE STE 415

SAN DIEGO, CA 92103-2121

Phone: (619) 298-9809

Fax: (619) 298-9823

After Hours Phone: (619)

298-9809

Provider Gender: Female

License number: 20A13774

NPI: 1336296912

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

DEVELOPMENTAL BEHAVIORAL PEDIATRICS

GIST, LAUREN

Provider ID: 214805

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

7910 FROST ST STE 360

SAN DIEGO, CA 92123-2776

Phone: (858) 246-0794

Fax:

After Hours Phone: (858)

246-0794

Provider Gender: Female

License number: A81381

NPI: 1023105335

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Ucsd Medical Ctr, Ucsd La Jolla

John Sally Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network, Ucsd Medical Group

GIST, LAUREN

Provider ID: 214806

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

11752 EL CAMINO REAL # 2100

SAN DIEGO, CA 92130-2050

Phone: (858) 793-9591

Fax:

After Hours Phone: (858)

793-9591

Provider Gender: Female

License number: A81381

NPI: 1023105335

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Ucsd Medical Ctr, Ucsd La Jolla

John Sally Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Rady Childrens Health Network, Ucsd Medical Group

GIST, LAUREN

Provider ID: 246932
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123-4232
Phone: (858) 966-4032
Fax: (858) 966-6227
After Hours Phone: (858) 966-4032
Provider Gender: Female
License number: A81381
NPI: 1023105335
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network, Ucsd Medical Group

GIST, LAUREN

Provider ID: 246933
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
11752 EL CAMINO REAL # 100
SAN DIEGO, CA 92130-2050

Phone: (858) 793-9591
Fax: (858) 793-1153
After Hours Phone: (858) 793-9591
Provider Gender: Female
License number: A81381
NPI: 1023105335
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network, Ucsd Medical Group

GIST, LAUREN

Provider ID: 246934
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3665 KEARNY VILLA RD # 410
SAN DIEGO, CA 92123-1953
Phone: (858) 966-5990
Fax: (858) 966-7508
After Hours Phone: (858) 966-5990
Provider Gender: Female
License number: A81381
NPI: 1023105335
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network, Ucsd Medical Group

RHODUS, CECILIA M

Provider ID: 284951
Board Certified Specialty: No
UCSD MEDICAL GROUP
7910 FROST ST STE 230
SAN DIEGO, CA 92123-2776
Phone: (858) 246-0053
Fax: (858) 496-9257
After Hours Phone: (858) 246-0053
Provider Gender: Female
License number: A137260
NPI: 1699161059
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Northern Inyo Hosp, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health

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D. Directorio de proveedores de atención especializada

Network, Ucsd Medical Group

EMERGENCY MEDICINE

ABE, NAOMI

Provider ID: 205684
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-8800
 Fax: (858) 966-7433
 After Hours Phone: (858) 966-8800
 Provider Gender: Female
 License number: A137946
 NPI: 1821387572
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

AMANN, CHRISTOPHER J

Provider ID: 270913
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273

Provider Gender: Male
 License number: C132360
 NPI: 1134326895
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

BARRY, JEFFREY R

Provider ID: 271129
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4520 EXECUTIVE DR STE P2
 SAN DIEGO, CA 92121-3028
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 License number: A149215
 NPI: 1801207006
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM

Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

BARRY, JEFFREY R

Provider ID: 271130
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 License number: A149215
 NPI: 1801207006
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

BARRY, JEFFREY R

Provider ID: 271132
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Male
License number: A149215
NPI: 1801207006
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BELLINGHAUSEN, AMY

Provider ID: 270333
Board Certified Specialty: No
UCSD MEDICAL GROUP
4520 EXECUTIVE DR STE P2
SAN DIEGO, CA 92121-3028
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A143164
NPI: 1801206354
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Coronado Hosp And Healthcare Ctr, Sharp Memorial Hospital, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group
BELLINGHAUSEN, AMY
Provider ID: 270334
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A143164
NPI: 1801206354
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Coronado Hosp And Healthcare Ctr, Sharp Memorial Hospital, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group
BELLINGHAUSEN, AMY
Provider ID: 270336
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BELLINGHAUSEN, AMY
Provider ID: 270336
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A143164
NPI: 1801206354
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Coronado Hosp And Healthcare Ctr, Sharp Memorial Hospital, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BELLOMO, THOMAS N

Provider ID: 205601
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105-1690
Phone: (619) 280-2905
Fax: (619) 283-1614
After Hours Phone: (619) 280-2905
Provider Gender: Male
License number: G69193
NPI: 1700926698
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Rady
Childrens Hospital San Diego,
Childrens Hosp And Resrch Ctr
At Oakland

Medi-Cal Open Panel: Yes

Min/Max Age: 0/25

American Sign Language (ASL):
No

♿ *Accessibility:* P, EB, IB, E

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

BRYL, AMY W

Provider ID: 205967

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 966-8800

Fax: (858) 966-7433

After Hours Phone: (858)
966-8800

Provider Gender: Female

License number: A115044

NPI: 1497079487

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Southwest
Healthcare System Wildomar,
Childrens Hosp And Resrch Ctr
At Oakland, Southwest
Healthcare System Murrieta,
Rady Childrens Hospital San
Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/25

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

BUITENHUYS, CASEY W

Provider ID: 206072

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 966-8800

Fax:

After Hours Phone: (858)
966-8800

Provider Gender: Female

License number: A101203

NPI: 1578761409

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Good
Samaritan Hospital, Regional
Medical Ctr Of San Jose,
Palomar Health Downtown
Campus, Rady Childrens
Hospital San Diego, Palomar
Medical Center, Pomerado
Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

CHOW, BYRON C

Provider ID: 206094

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 966-8800

Fax: (858) 966-7433

After Hours Phone: (858)
966-8800

Provider Gender: Male

License number: A78116

NPI: 1619907607

Provider English Spoken: Yes

Provider Language(s) Spoken:
French, Spanish

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

CHOW, BYRON C

Provider ID: 206095

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105-1690

Phone: (619) 280-2905

Fax: (619) 283-1614

After Hours Phone: (619)
280-2905

Provider Gender: Male

License number: A78116

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>NPI: 1619907607 Provider English Spoken: Yes Provider Language(s) Spoken: French, Spanish Cultural Competency: No Hospital Affiliation: Rady Childrens Hospital San Diego Medi-Cal Open Panel: Yes Min/Max Age: 0/18 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network</p>	<p>Website: Email: Medical Group(s): IPA: Rady Childrens Health Network</p> <p>KEARNEY, LAUREN K Provider ID: 206219 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 Phone: (858) 966-8800 Fax: (858) 966-7433 After Hours Phone: (858) 966-8800 Provider Gender: Female License number: G83666 NPI: 1740296268 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Rady Childrens Hospital San Diego, Palomar Health Downtown Campus, Palomar Medical Center Medi-Cal Open Panel: Yes Min/Max Age: 0/18 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network</p>	<p>4305 UNIVERSITY AVE STE 150 SAN DIEGO, CA 92105-1690 Phone: (619) 280-2905 Fax: (619) 283-1614 After Hours Phone: (619) 280-2905 Provider Gender: Female License number: G83666 NPI: 1740296268 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Rady Childrens Hospital San Diego, Palomar Health Downtown Campus, Palomar Medical Center Medi-Cal Open Panel: Yes Min/Max Age: 0/18 American Sign Language (ASL): No ♿ Accessibility: P, EB, IB, E Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network</p>
<p>KANTHARIA, TINA H Provider ID: 206412 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 3030 CHILDRENS WAY STE 402 SAN DIEGO, CA 92123-4228 Phone: (858) 309-7701 Fax: (858) 966-8038 After Hours Phone: (858) 309-7701 Provider Gender: Female License number: A126911 NPI: 1659632362 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Rady Childrens Hospital San Diego Medi-Cal Open Panel: Yes Min/Max Age: 0/18 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM</p>	<p>KEARNEY, LAUREN K Provider ID: 206221 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK</p>	<p>LI, JINGHONG Provider ID: 255939 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 Phone: (858) 657-7125 Fax: (858) 657-7107 After Hours Phone: (858) 657-7125 Provider Gender: Female License number: A107000 NPI: 1619014479 Provider English Spoken: Yes Provider Language(s) Spoken:</p>

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D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton

Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Ucsd Medical Group

LOVEJOY, AMY E

Provider ID: 206107
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105-1690
Phone: (619) 280-2905

Fax: (619) 283-1614
After Hours Phone: (619) 280-2905

Provider Gender: Female
License number: A75176
NPI: 1790856557
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hospital Of Orange County

Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Rady Childrens Health Network

MINKA, GENEVIEVE M

Provider ID: 205334
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800

Fax:
After Hours Phone: (858) 966-8800

Provider Gender: Female
License number: A77841
NPI: 1689646689
Provider English Spoken: Yes
Provider Language(s) Spoken: French

Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Rady Childrens Health Network

MINKA, GENEVIEVE M

Provider ID: 205336
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105-1690

Phone: (619) 280-2905
Fax: (619) 283-1614
After Hours Phone: (619) 280-2905

Provider Gender: Female
License number: A77841
NPI: 1689646689
Provider English Spoken: Yes
Provider Language(s) Spoken: French

Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18

American Sign Language (ASL): No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MISHRA-OCCHINO, SEEMA S

Provider ID: 205404
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 576-1700
Fax: (858) 966-7433

After Hours Phone: (858) 576-1700
Provider Gender: Female

License number: A100307
NPI: 1689612830
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

NGUYEN, MARGARET B

Provider ID: 270705
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858) 966-8800
Provider Gender: Female
License number: A131847
NPI: 1942485248
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PADDOCK, DIANA L

Provider ID: 267967
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: PA52175
NPI: 1447657804
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

PARIKH, PAYAL

Provider ID: 205870
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858) 966-8800
Provider Gender: Female
License number: 20A10898
NPI: 1871757989
Provider English Spoken: Yes

Provider Language(s) Spoken:
Gujarati, Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Kaiser Foundation Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PARIKH, PAYAL

Provider ID: 205871
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105-1690
Phone: (619) 280-2905
Fax: (619) 283-1614
After Hours Phone: (619) 280-2905
Provider Gender: Female
License number: 20A10898
NPI: 1871757989
Provider English Spoken: Yes
Provider Language(s) Spoken:
Gujarati, Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Kaiser Foundation Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	<i>Provider ID:</i> 205928 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-8800 <i>Fax:</i> (858) 966-7433 <i>After Hours Phone:</i> (858) 966-8800 <i>Provider Gender:</i> Male <i>License number:</i> A148761 <i>NPI:</i> 1992125520 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	<i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network
PARKER, SHERINE B <i>Provider ID:</i> 205784 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-8800 <i>Fax:</i> (858) 966-7433 <i>After Hours Phone:</i> (858) 966-8800 <i>Provider Gender:</i> Female <i>License number:</i> G81658 <i>NPI:</i> 1477626513 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Glendale Adventist Med Ctr, Glendale Memorial Hosp And Health Ctr, Tri City Medical Ctr, Rady Childrens Hospital San Diego, Valley Childrens Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	PARKER, SHERINE B <i>Provider ID:</i> 205784 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-8800 <i>Fax:</i> (858) 966-7433 <i>After Hours Phone:</i> (858) 966-8800 <i>Provider Gender:</i> Female <i>License number:</i> G81658 <i>NPI:</i> 1477626513 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Glendale Adventist Med Ctr, Glendale Memorial Hosp And Health Ctr, Tri City Medical Ctr, Rady Childrens Hospital San Diego, Valley Childrens Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	PARKER, SHERINE B <i>Provider ID:</i> 205784 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-8800 <i>Fax:</i> (858) 966-7433 <i>After Hours Phone:</i> (858) 966-8800 <i>Provider Gender:</i> Female <i>License number:</i> G81658 <i>NPI:</i> 1477626513 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Glendale Adventist Med Ctr, Glendale Memorial Hosp And Health Ctr, Tri City Medical Ctr, Rady Childrens Hospital San Diego, Valley Childrens Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network
PIERCE, MATTHEW A <i>Provider ID:</i> 205930 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 4305 UNIVERSITY AVE STE 150 SAN DIEGO, CA 92105-1690 <i>Phone:</i> (619) 280-2905 <i>Fax:</i> (619) 283-1614 <i>After Hours Phone:</i> (619) 280-2905 <i>Provider Gender:</i> Male <i>License number:</i> A148761 <i>NPI:</i> 1992125520	PIERCE, MATTHEW A <i>Provider ID:</i> 205930 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 4305 UNIVERSITY AVE STE 150 SAN DIEGO, CA 92105-1690 <i>Phone:</i> (619) 280-2905 <i>Fax:</i> (619) 283-1614 <i>After Hours Phone:</i> (619) 280-2905 <i>Provider Gender:</i> Male <i>License number:</i> A148761 <i>NPI:</i> 1992125520	PIERCE, MATTHEW A <i>Provider ID:</i> 205930 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 4305 UNIVERSITY AVE STE 150 SAN DIEGO, CA 92105-1690 <i>Phone:</i> (619) 280-2905 <i>Fax:</i> (619) 283-1614 <i>After Hours Phone:</i> (619) 280-2905 <i>Provider Gender:</i> Male <i>License number:</i> A148761 <i>NPI:</i> 1992125520
RILEY-HAGAN, MARGARET <i>Provider ID:</i> 205988 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-8800 <i>Fax:</i> (858) 966-7433 <i>After Hours Phone:</i> (858) 966-8800 <i>Provider Gender:</i> Female <i>License number:</i> A49609 <i>NPI:</i> 1548352388 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> French, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Palomar Medical Center, Palomar Health Downtown Campus, Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM	RILEY-HAGAN, MARGARET <i>Provider ID:</i> 205988 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-8800 <i>Fax:</i> (858) 966-7433 <i>After Hours Phone:</i> (858) 966-8800 <i>Provider Gender:</i> Female <i>License number:</i> A49609 <i>NPI:</i> 1548352388 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> French, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Palomar Medical Center, Palomar Health Downtown Campus, Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM	RILEY-HAGAN, MARGARET <i>Provider ID:</i> 205988 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-8800 <i>Fax:</i> (858) 966-7433 <i>After Hours Phone:</i> (858) 966-8800 <i>Provider Gender:</i> Female <i>License number:</i> A49609 <i>NPI:</i> 1548352388 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> French, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Palomar Medical Center, Palomar Health Downtown Campus, Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM

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D. Directorio de proveedores de atención especializada

Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

RILEY-HAGAN, MARGARET

Provider ID: 205989
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105-1690
Phone: (619) 280-2905
Fax: (619) 283-1614
After Hours Phone: (619) 280-2905
Provider Gender: Female
License number: A49609
NPI: 1548352388
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish
Cultural Competency: No
Hospital Affiliation: Palomar Medical Center, Palomar Health Downtown Campus, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

ROSE, OLGA D

Provider ID: 205952
Board Certified Specialty: No
RADY CHILDRENS HEALTH

NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858) 966-8800
Provider Gender: Female
License number: A143536
NPI: 1740560044
Provider English Spoken: Yes
Provider Language(s) Spoken: Russian
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas, Ucsd Medical Ctr, Rady Childrens Hospital San Diego, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

ROSE, OLGA D

Provider ID: 205954
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105-1690
Phone: (619) 280-2905
Fax: (619) 283-1614
After Hours Phone: (619) 280-2905
Provider Gender: Female

License number: A143536
NPI: 1740560044
Provider English Spoken: Yes
Provider Language(s) Spoken: Russian
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network


SIEW, RUTH

Provider ID: 244692
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123-4232
Phone: (858) 966-5846
Fax: (858) 966-8457
After Hours Phone: (858) 966-5846
Provider Gender: Female
License number: A132946
NPI: 1255674479
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

American Sign Language (ASL): No
Accessibility: 
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

VAIDYA, KAMALA

Provider ID: 205809
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858) 966-8800
Provider Gender: Female
License number: A124814
NPI: 1083840920
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18

American Sign Language (ASL): No
Accessibility: 
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

ENDOCRINOLOGY


METABOLISM DIABETES

BOEDER, SCHAFFER C

Provider ID: 117049
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (619) 543-6303
Fax:
After Hours Phone: (619) 543-6303
Provider Gender: Male
License number: A129134
NPI: 1477808285
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BOEDER, SCHAFFER C

Provider ID: 255611
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A129134
NPI: 1477808285
Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: 
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CHI, NAI WEN

Provider ID: 64548
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (619) 543-6303
Fax: (619) 543-7352
After Hours Phone: (619) 543-6303
Provider Gender: Male
License number: A56485
NPI: 1710945621
Provider English Spoken: Yes
Provider Language(s) Spoken: Mandarin, Taiwanese
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p><i>IPA:</i></p> <p>CHUNG, JOYCE <i>Provider ID:</i> 64551 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 4168 FRONT ST # 1A SAN DIEGO, CA 92103-2030 <i>Phone:</i> (619) 543-6303 <i>Fax:</i> <i>After Hours Phone:</i> (619) 543-6303 <i>Provider Gender:</i> Female <i>License number:</i> A50122 <i>NPI:</i> 1477561504 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Chinese, Mandarin <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Sharp Memorial Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p> <p>CHU, NEELIMA V <i>Provider ID:</i> 64550 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 4168 FRONT ST # 1A SAN DIEGO, CA 92103-2030 <i>Phone:</i> (619) 543-6303 <i>Fax:</i> <i>After Hours Phone:</i> (619) 543-6303 <i>Provider Gender:</i> Female <i>License number:</i> A65536 <i>NPI:</i> 1154407443</p>	<p><i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Telugu <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Ucsd Medical Ctr, Sharp Memorial Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p> <p>DEMETERCO BERGGREN, CARLA <i>Provider ID:</i> 121812 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3030 CHILDRENS WAY FL 2 SAN DIEGO, CA 92123-4232 <i>Phone:</i> (858) 966-4003 <i>Fax:</i> <i>After Hours Phone:</i> (858) 966-4003 <i>Provider Gender:</i> Female <i>License number:</i> A98629 <i>NPI:</i> 1619130655 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i></p>	<p>No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network</p> <p>EKANAYAKE, PREETHIKA S <i>Provider ID:</i> 284812 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female <i>License number:</i> A126503 <i>NPI:</i> 1083922462 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Sinhala, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group</p> <p>EKANAYAKE, PREETHIKA S <i>Provider ID:</i> 284813 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 4168 FRONT ST</p>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A126503
NPI: 1083922462
Provider English Spoken: Yes
Provider Language(s) Spoken: Sinhala, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

FEIGENBAUM, ANNETTE S
Provider ID: 104983
Board Certified Specialty: No
 RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 3030 CHILDRENS WAY FL 2
 SAN DIEGO, CA 92123-4232
Phone: (858) 966-4003
Fax:
After Hours Phone: (858) 966-4003
Provider Gender: Female
License number: C54803
NPI: 1902187859
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady

Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

GUERIN, CHRIS K
Provider ID: 284646
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: G47081
NPI: 1275648875
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HARRIS, SAMANTHA R

Provider ID: 122893
Board Certified Specialty: No
 LOGAN HEIGHTS FAMILY HEALTH CENTER
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Provider Gender: Female
License number: A120043
NPI: 1720305436
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Logan Heights Family Health Center
IPA:

JUANG, PATRICIA S
Provider ID: 255605
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax: (858) 657-7298
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A110217
NPI: 1265695795

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Mandarin
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

JUANG, PATRICIA S

Provider ID: 83642
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (858) 657-1636
Fax: (858) 657-7298
After Hours Phone: (858) 657-1636
Provider Gender: Female
License number: A110217
NPI: 1265695795
Provider English Spoken: Yes
Provider Language(s) Spoken:
Mandarin
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KIM, JANE J

Provider ID: 52051
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN
3030 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123-4232
Phone: (858) 966-6789
Fax:
After Hours Phone: (858) 966-6789
Provider Gender: Female
License number: C51620
NPI: 1235200098
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Medical Ctr At Ucsf
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

KULASA, KRISTEN M

Provider ID: 255622
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030

Phone: (800) 926-8273
Fax: (619) 543-6500
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A96293
NPI: 1932324175
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KULASA, KRISTEN M

Provider ID: 64591
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST # 1A
SAN DIEGO, CA 92103-2030
Phone: (619) 543-6303
Fax:
After Hours Phone: (619) 543-6303
Provider Gender: Female
License number: A96293
NPI: 1932324175
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

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D. Directorio de proveedores de atención especializada

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LEVINE, MATTHEW J

Provider ID: 64600
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (619) 543-6248
Fax: (858) 764-3360
After Hours Phone: (619)
543-6248
Provider Gender: Male
License number: A77126
NPI: 1801994231
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Green Hospital, Scripps
Memorial Hospital, Ucsd Medical
Ctr

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MARINKOVIC, MAJA

Provider ID: 52053
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED

FNDTN
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123-4232
Phone: (858) 966-4003
Fax:
After Hours Phone: (858)
966-4003
Provider Gender: Female
License number: A95251
NPI: 1053469767
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Childrens Hosp And Resrch Ctr
At Oakland
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

MARX, CHRISTOPHER W

Provider ID: 25723
Board Certified Specialty: No
LOGAN HEIGHTS FAMILY
HEALTH CENTER
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Provider Gender: Male
License number: G58195
NPI: 1811958929
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Scripps
Green Hospital, Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No

♿ *Accessibility:* ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Logan Heights
Family Health Center
IPA:

MCCALLUM, JAMES D

Provider ID: 25724
Board Certified Specialty: No
LOGAN HEIGHTS FAMILY
HEALTH CENTER
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:

After Hours Phone: (619)
515-2300
Provider Gender: Male
License number: A55708
NPI: 1609838994
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Rady
Childrens Hospital San Diego,
Scripps Green Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No

♿ *Accessibility:* ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:

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D. Directorio de proveedores de atención especializada

Medical Group(s): Logan Heights Family Health Center
IPA:

MCCALLUM, JAMES D

Provider ID: 64610
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (619) 543-6248
Fax:
After Hours Phone: (619) 543-6248
Provider Gender: Male
License number: A55708
NPI: 1609838994
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Rady Childrens Hospital San Diego, Scripps Green Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

NYHAN, WILLIAM L

Provider ID: 205654
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 4 NORTH
SAN DIEGO, CA 92123-4232

Phone: (858) 966-5840
Fax: (858) 966-7942
After Hours Phone: (858) 966-5840
Provider Gender: Male
License number: C30911
NPI: 1710041462
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PHILIS-TSIMIKAS, ATHENA

Provider ID: 109606
Board Certified Specialty: No
LOGAN HEIGHTS FAMILY HEALTH CENTER
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Provider Gender: Female
License number: A50477
NPI: 1922105964
Provider English Spoken: Yes
Provider Language(s) Spoken: Greek
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Scripps

Memorial Hospital Encinitas, Scripps Green Hospital, Scripps Memorial Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Logan Heights Family Health Center
IPA:

RIVERA-VEGA, MICHELLE Y

Provider ID: 259111
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123-4232
Phone: (858) 966-4032
Fax: (858) 966-6227
After Hours Phone: (858) 966-4032
Provider Gender: Female
License number: C167414
NPI: 1992992432
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Network

SANTOS CAVAIOLA, TRICIA

Provider ID: 256091
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
 Phone: (800) 926-8273
 Fax: (858) 657-7298
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A108282
 NPI: 1518163799
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

VARGAS TRUJILLO, MARCELA

Provider ID: 102679
 Board Certified Specialty: No
 RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 3030 CHILDRENS WAY FL 2
 SAN DIEGO, CA 92123-4232
 Phone: (858) 966-4003
 Fax:
 After Hours Phone: (858) 966-4003
 Provider Gender: Female

License number: A139213
 NPI: 1952534091
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

YU, JOSEPH J

Provider ID: 64668
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
 Phone: (619) 543-6303
 Fax: (619) 543-7352
 After Hours Phone: (619) 543-6303
 Provider Gender: Male
 License number: A56057
 NPI: 1669464103
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Palomar Health Downtown Campus, Ucsd Medical Ctr, Palomar Medical Center
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W

Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

FAMILY PRACTICE GERIATRIC MEDICINE

MILLER, SCOTT B , MD

Provider ID: 271539
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 9878 CARMEL MOUNTAIN RD STE B
 SAN DIEGO, CA 92129-2893
 Phone: (858) 312-1440
 Fax: (858) 484-3474
 After Hours Phone: (858) 312-1440
 Provider Gender: Male
 License number: G129295
 NPI: 1104845536
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

FAMILY PRACTICE SPORTS MEDICINE

ACHAR, SURAJ A

Provider ID: 255632
 Board Certified Specialty: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123-4232
Phone: (858) 966-9360
Fax:
After Hours Phone: (858) 966-9360
Provider Gender: Male
License number: G80093
NPI: 1235167321
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Rady Childrens Hospital San Diego, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

KAUFMAN, ELIZABETH A
Provider ID: 285905
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123-4232
Phone: (858) 966-6789
Fax: (858) 966-6706
After Hours Phone: (858) 966-6789
Provider Gender: Female
License number: A135037
NPI: 1942644679

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Scripps Green Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SPRING, JASON E
Provider ID: 271551
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
16918 DOVE CANYON RD
SAN DIEGO, CA 92127-3445
Phone: (858) 924-1900
Fax: (858) 924-1949
After Hours Phone: (858) 924-1900
Provider Gender: Male
License number: 20A9497
NPI: 1114011459
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Community Care Ipa Llc

FAMILY PRACTICE

ACHAR, SURAJ A
Provider ID: 65095
Board Certified Specialty: No
UCSD MEDICAL GROUP
9333 GENESEE AVE STE 200
SAN DIEGO, CA 92121-2113
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: G80093
NPI: 1235167321
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Rady Childrens Hospital San Diego, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

ARRIETA, NOEMI J
Provider ID: 109765
Board Certified Specialty: No
LOGAN HEIGHTS FAMILY HEALTH CENTER
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)
515-2300

Provider Gender: Female

License number: 20A11153

NPI: 1912223496

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Logan Heights

Family Health Center

IPA:

BOWER, KIMBERLY A

Provider ID: 80008

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED
FNDTN

3030 CHILDRENS WAY FL 2

SAN DIEGO, CA 92123-4232

Phone: (858) 966-8022

Fax: (858) 966-8457

After Hours Phone: (858)

966-8022

Provider Gender: Female

License number: A83280

NPI: 1114005741

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Scripps Green Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

BRADY, PATRICIA H

Provider ID: 118664

Board Certified Specialty: No

IHP ST VINCENT DE PAUL

VILLAGE

1501 IMPERIAL AVE

SAN DIEGO, CA 92101-7638

Phone: (619) 233-8500

Fax:

After Hours Phone: (619)

233-8500

Provider Gender: Female

License number: C53121

NPI: 1952390437

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

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

9AM-5PM

Website:

Email:

Medical Group(s): St Vincent De
Paul Village Family Health

Center

IPA:

BRODSKY, MARK E

Provider ID: 109475

Board Certified Specialty: No

FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2444

Fax:

After Hours Phone: (619)

515-2444

Provider Gender: Male

License number: C53623

NPI: 1346337904

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

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

TH 9AM-6PM, SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Family Hlth Ctr

San Diego-Beach Area

IPA:

BROWNELL, KRISTIN J

Provider ID: 65875

Board Certified Specialty: No

CITY HEIGHTS FAMILY

HEALTH CENTERS INC

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2400

Fax: (619) 795-2756

After Hours Phone: (619)

515-2400

Provider Gender: Female

License number: A80154

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1134232259
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): City Heights Family Health Centers Inc
IPA:

BROWN, BRANDON S

Provider ID: 127600
Board Certified Specialty: No
FAMILY HLTH CTR SD
HILLCREST
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619) 515-2545
Provider Gender: Male
License number: A148499
NPI: 1013399559
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM

Website: www.fhcsd.org
Email:
Medical Group(s): Family Hlth Ctr Sd Hillcrest
IPA:
BROWN, BRANDON S
Provider ID: 127602
Board Certified Specialty: No
LOGAN HEIGHTS FAMILY HEALTH CENTER
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:

After Hours Phone: (619) 515-2300
Provider Gender: Male
License number: A148499
NPI: 1013399559
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Logan Heights Family Health Center
IPA:

BUCKHOLZ, GARY T

Provider ID: 83248
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222
Fax: (858) 822-6227
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A82836
NPI: 1174601702
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CARSON, COREY M

Provider ID: 109587
Board Certified Specialty: No
FAMILY HLTH CTR SD
HILLCREST
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619) 515-2545
Provider Gender: Female
License number: A136616
NPI: 1245599778
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>No ♿ <i>Accessibility:</i> <i>Hours:</i> M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medical Group(s):</i> Family Hlth Ctr Sd Hillcrest <i>IPA:</i></p>	<p>HEALTH CENTER 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Provider Gender:</i> Female <i>License number:</i> A136616 <i>NPI:</i> 1245599778 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medical Group(s):</i> Logan Heights Family Health Center <i>IPA:</i></p>	<p>Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc</p>
<p>CARSON, COREY M <i>Provider ID:</i> 110217 <i>Board Certified Specialty:</i> No CITY HEIGHTS FAMILY HEALTH CENTERS INC 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 <i>Phone:</i> (619) 515-2400 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2400 <i>Provider Gender:</i> Female <i>License number:</i> A136616 <i>NPI:</i> 1245599778 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medical Group(s):</i> City Heights Family Health Centers Inc <i>IPA:</i></p>	<p>CHENG, TERRI L <i>Provider ID:</i> 269914 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 2017 1ST AVE STE 100 SAN DIEGO, CA 92101-9001 <i>Phone:</i> (619) 881-4516 <i>Fax:</i> <i>After Hours Phone:</i> (619) 881-4516 <i>Provider Gender:</i> Female <i>License number:</i> A151346 <i>NPI:</i> 1942644976 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd</p>	<p>CHEN, ALICE I <i>Provider ID:</i> 207163 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9333 GENESEE AVE STE 200 SAN DIEGO, CA 92121-2113 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female <i>License number:</i> 20A16077 <i>NPI:</i> 1265810337 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Chinese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group</p>
<p>CARSON, COREY M <i>Provider ID:</i> 110221 <i>Board Certified Specialty:</i> No LOGAN HEIGHTS FAMILY</p>	<p>CHEN, ALICE I <i>Provider ID:</i> 207164</p>	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST
SAN DIEGO, CA 92103-2108
Phone: (800) 926-8273

Fax:

After Hours Phone: (800)
926-8273

Provider Gender: Female

License number: 20A16077

NPI: 1265810337

Provider English Spoken: Yes

Provider Language(s) Spoken:
Chinese

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

CHEN, ALICE I

Provider ID: 207167

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: 20A16077

NPI: 1265810337

Provider English Spoken: Yes

Provider Language(s) Spoken:

Chinese

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

CORMAN, DANIEL M

Provider ID: 114951

Board Certified Specialty: No

CITY HEIGHTS FAMILY

HEALTH CENTERS INC

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2400

Fax:

After Hours Phone: (619)

515-2400

Provider Gender: Male

License number: 20A13060

NPI: 1629339593

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): City Heights

Family Health Centers Inc

IPA:

CORMAN, DANIEL M

Provider ID: 128274

Board Certified Specialty: No

FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2444

Fax:

After Hours Phone: (619)

515-2444

Provider Gender: Male

License number: 20A13060

NPI: 1629339593

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

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

TH 9AM-6PM, SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Family Hlth Ctr

San Diego-Beach Area

IPA:

COULSON, LAURA E

Provider ID: 108550

Board Certified Specialty: No

CITY HEIGHTS FAMILY

HEALTH CENTERS INC

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2400

Fax:

After Hours Phone: (619)

515-2400

Provider Gender: Female

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D. Directorio de proveedores de atención especializada

License number: A76301
NPI: 1447308424
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): City Heights
Family Health Centers Inc
IPA:

EDMONDS, KYLE P

Provider ID: 83397
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax: (858) 822-6227
After Hours Phone: (619)
543-6222
Provider Gender: Male
License number: A121683
NPI: 1003044728
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA:
GREEN, BRENDA
Provider ID: 109906
Board Certified Specialty: No
CITY HEIGHTS FAMILY
HEALTH CENTERS INC
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619)
515-2400
Provider Gender: Female
License number: A134406
NPI: 1508125410
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): City Heights
Family Health Centers Inc
IPA:

GRIFFITHS, KENNETH J

Provider ID: 106937
Board Certified Specialty: No
FAMILY HLTH CTR SD
HILLCREST
4094 4TH AVE
SAN DIEGO, CA 92103-2143

Phone: (619) 515-2545
Fax:
After Hours Phone: (619)
515-2545
Provider Gender: Male
License number: C52451
NPI: 1760563068
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-TH 8AM-9PM, F
8AM-5PM, SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Family Hlth Ctr
Sd Hillcrest
IPA:

HALBEISEN, ANNA M

Provider ID: 128973
Board Certified Specialty: No
UCSD MEDICAL GROUP
9333 GENESEE AVE STE 200
SAN DIEGO, CA 92121-2113
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: 20A12902
NPI: 1801044862
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HALBEISEN, ANNA M

Provider ID: 128974
Board Certified Specialty: No
UCSD MEDICAL GROUP
9909 MIRA MESA BLVD STE
200
SAN DIEGO, CA 92131-1061
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: 20A12902
NPI: 1801044862
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HALBEISEN, ANNA M

Provider ID: 201238

Board Certified Specialty: No
UCSD MEDICAL GROUP
9333 GENESEE AVE STE 200
SAN DIEGO, CA 92121-2113
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: 20A12902
NPI: 1801044862
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HALBEISEN, ANNA M

Provider ID: 201239
Board Certified Specialty: No
UCSD MEDICAL GROUP
9909 MIRA MESA BLVD STE
200
SAN DIEGO, CA 92131-1061
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: 20A12902
NPI: 1801044862
Provider English Spoken: Yes
Provider Language(s) Spoken:

Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HALBEISEN, ANNA M

Provider ID: 201240
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST
SAN DIEGO, CA 92103-2108
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: 20A12902
NPI: 1801044862
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

IPA: Ucsd Medical Group

HALBEISEN, ANNA M

Provider ID: 201241

Board Certified Specialty: No

UCSD MEDICAL GROUP

4520 EXECUTIVE DR # 1

SAN DIEGO, CA 92121-3018

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: 20A12902

NPI: 1801044862

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

HAMILTON, LISA MARIE S

Provider ID: 110638

Board Certified Specialty: No

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: (619) 515-2560

Fax:

After Hours Phone: (619)

515-2560

Provider Gender: Female

License number: 20A14772

NPI: 1235576059

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Diamond

Neighborhoods Family Hlth Ctrs

Inc

IPA:

HAMILTON, LISA MARIE S

Provider ID: 110642

Board Certified Specialty: No

FAMILY HEALTH CTR SAN

DIEGO-OAK PARK

5160 FEDERAL BLVD

SAN DIEGO, CA 92105-5429

Phone: (619) 515-2454

Fax:

After Hours Phone: (619)

515-2454

Provider Gender: Female

License number: 20A14772

NPI: 1235576059

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

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

9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Family Health

Ctr San Diego-Oak Park

IPA:

KAUFHOLD, ANNE D

Provider ID: 37791

Board Certified Specialty: No

COMPREHENSIVE HEALTH

CENTER METRO

3177 OCEAN VIEW BLVD

SAN DIEGO, CA 92113-1432

Phone: (619) 662-4100

Fax: (619) 858-1003

After Hours Phone: (619)

662-4100

Provider Gender: Female

License number: A88893

NPI: 1164508073

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital Chula Vista

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

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

9AM-5PM

Website: www.ihpsocal.org

Email:

Medical Group(s): San Ysidro

Health Chc - Ocean View

IPA:

KAUFMAN, JENNIFER CHILYN

L

Provider ID: 120073

Board Certified Specialty: No

CITY HEIGHTS FAMILY

HEALTH CENTERS INC

5454 EL CAJON BLVD

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619) 515-2400
Provider Gender: Female
License number: G149974
NPI: 1407818768
Provider English Spoken: Yes
Provider Language(s) Spoken: Mandarin
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): City Heights Family Health Centers Inc
IPA:

KAUFMAN, JENNIFER CHILYN L
Provider ID: 120074
Board Certified Specialty: No
FAMILY HEALTH CTR IBARRA
4874 POLK AVE
SAN DIEGO, CA 92105-2026
Phone: (619) 515-2426
Fax:
After Hours Phone: (619) 515-2426
Provider Gender: Female
License number: G149974
NPI: 1407818768
Provider English Spoken: Yes
Provider Language(s) Spoken: Mandarin
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes

Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Family Health Ctr Ibarra
IPA:

KEFLEZIGHI, BAHGHI R
Provider ID: 80429
Board Certified Specialty: No
DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2560
Fax: (619) 263-2499
After Hours Phone: (619) 515-2560
Provider Gender: Female
License number: A100391
NPI: 1124210844
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Diamond Neighborhoods Family Hlth Ctrs Inc

IPA:
LAUZON, VANESSA L
Provider ID: 110179
Board Certified Specialty: No
UCSD MEDICAL GROUP
350 DICKINSON ST
SAN DIEGO, CA 92103-1913
Phone: (619) 543-6222
Fax: (619) 543-3738
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: A112525
NPI: 1457507709
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LINDEMAN, KURTIS P
Provider ID: 64347
Board Certified Specialty: Yes
UCSD MEDICAL GROUP
330 LEWIS ST # 400
SAN DIEGO, CA 92103-2108
Phone: (619) 471-9260
Fax:
After Hours Phone: (619) 471-9260
Provider Gender: Male
License number: A104052
NPI: 1124155791

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>	9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> St Vincent De Paul Village Family Health Center <i>IPA:</i>	SAN DIEGO, CA 92108-3538 <i>Phone:</i> (805) 739-8450 <i>Fax:</i> <i>After Hours Phone:</i> (805) 739-8450 <i>Provider Gender:</i> Female <i>License number:</i> 20A11056 <i>NPI:</i> 1356551220 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc
LINDEMAN, KURTIS P <i>Provider ID:</i> 78875 <i>Board Certified Specialty:</i> No IHP ST VINCENT DE PAUL VILLAGE 1501 IMPERIAL AVE SAN DIEGO, CA 92101-7638 <i>Phone:</i> (619) 233-8500 <i>Fax:</i> <i>After Hours Phone:</i> (619) 233-8500 <i>Provider Gender:</i> Male <i>License number:</i> A104052 <i>NPI:</i> 1124155791 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-F 8AM-5:30PM, SA	LU, JULIE P <i>Provider ID:</i> 127485 <i>Board Certified Specialty:</i> No FAMILY HEALTH CTR SAN DIEGO-OAK PARK 5160 FEDERAL BLVD SAN DIEGO, CA 92105-5429 <i>Phone:</i> (619) 515-2454 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2454 <i>Provider Gender:</i> Female <i>License number:</i> 20A14804 <i>NPI:</i> 1619210614 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-F 8:30AM-5:30PM, SA 9AM-5PM <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medical Group(s):</i> Family Health Ctr San Diego-Oak Park <i>IPA:</i>	NOVOTNY, RICHARD W <i>Provider ID:</i> 110220 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 330 LEWIS ST # 400 SAN DIEGO, CA 92103-2108 <i>Phone:</i> (619) 471-9260 <i>Fax:</i> <i>After Hours Phone:</i> (619) 471-9260 <i>Provider Gender:</i> Male <i>License number:</i> A143811 <i>NPI:</i> 1588002877 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i>
LYNCH, SHAUNA M <i>Provider ID:</i> 269894 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 1075 CAMINO DEL RIO S		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>	SAN DIEGO, CA 92121-2113 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female <i>License number:</i> A157793 <i>NPI:</i> 1972034890 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>	<i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Health Excel Ipa Inc
NUQUI, JOSIE C <i>Provider ID:</i> 129962 <i>Board Certified Specialty:</i> No OPERATION SAMAHAN - MIRA MESA 9855 ERMA RD STE 105 SAN DIEGO, CA 92131-1007 <i>Phone:</i> (844) 200-2426 <i>Fax:</i> <i>After Hours Phone:</i> (844) 200-2426 <i>Provider Gender:</i> Female <i>License number:</i> A71544 <i>NPI:</i> 1184773673 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Tagalog <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> www.operationsamahan.org <i>Email:</i> <i>Medical Group(s):</i> Operation Samahan - Mira Mesa <i>IPA:</i>	RIM, CHOON S <i>Provider ID:</i> 126693 <i>Board Certified Specialty:</i> Yes HEALTH EXCEL IPA INC 7825 ENGINEER RD STE 101 SAN DIEGO, CA 92111-1929 <i>Phone:</i> (858) 277-7111 <i>Fax:</i> (858) 277-7667 <i>After Hours Phone:</i> (858) 277-7111 <i>Provider Gender:</i> Male <i>License number:</i> C50815 <i>NPI:</i> 1083827273 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Korean, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None	ROSENBLUM, ELIZABETH <i>Provider ID:</i> 64380 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 330 LEWIS ST # 400 SAN DIEGO, CA 92103-2108 <i>Phone:</i> (619) 471-9260 <i>Fax:</i> <i>After Hours Phone:</i> (619) 471-9260 <i>Provider Gender:</i> Female <i>License number:</i> C52654 <i>NPI:</i> 1669497939 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>
NUR, LAIKA M <i>Provider ID:</i> 272686 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9333 GENESEE AVE STE 200	<i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None	SANNIDHI, DEEPA V <i>Provider ID:</i> 117559 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 330 LEWIS ST SAN DIEGO, CA 92103-2108

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D. Directorio de proveedores de atención especializada

Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A136286
NPI: 1083007397
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SHAHTAJI, ALAN P

Provider ID: 69095
Board Certified Specialty: No
UCSD MEDICAL GROUP
9333 GENESEE AVE STE 200
SAN DIEGO, CA 92121-2113
Phone: (858) 657-8600
Fax:
After Hours Phone: (858) 657-8600
Provider Gender: Male
License number: 20A11087
NPI: 1972751089
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None

American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SHAHTAJI, ALAN P

Provider ID: 84780
Board Certified Specialty: No
UCSD MEDICAL GROUP
9909 MIRA MESA BLVD STE 200
SAN DIEGO, CA 92131-1061
Phone: (858) 657-7750
Fax:
After Hours Phone: (858) 657-7750
Provider Gender: Male
License number: 20A11087
NPI: 1972751089
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SMOOT, CHARLES B

Provider ID: 39265
Board Certified Specialty: No
LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Provider Gender: Male
License number: A97036
NPI: 1245490358
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Logan Heights Family Health Center
IPA:

TAYLOR, KENNETH S

Provider ID: 65106
Board Certified Specialty: No
UCSD MEDICAL GROUP
9333 GENESEE AVE STE 200
SAN DIEGO, CA 92121-2113
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A55037
NPI: 1265458269
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Rady Childrens Hospital San

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D. Directorio de proveedores de atención especializada

Diego, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

THOMAS, ZACHARY S

Provider ID: 123029
Board Certified Specialty: No
CITY HEIGHTS FAMILY
HEALTH CENTERS INC
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619)
515-2400
Provider Gender: Male
License number: A145023
NPI: 1326453119
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): City Heights
Family Health Centers Inc
IPA:

TRAN, UYEN THAO P

Provider ID: 25643

Board Certified Specialty: No
LOGAN HEIGHTS FAMILY
HEALTH CENTER
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax: (619) 795-2756
After Hours Phone: (619)
515-2300
Provider Gender: Female
License number: A76709
NPI: 1891720355
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Vietnamese
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Logan Heights
Family Health Center
IPA:

TRAN, UYEN THAO P

Provider ID: 65771
Board Certified Specialty: No
CITY HEIGHTS FAMILY
HEALTH CENTERS INC
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619)
515-2400
Provider Gender: Female
License number: A76709
NPI: 1891720355

Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Vietnamese
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): City Heights
Family Health Centers Inc
IPA:

YEUNG, HEIDI N

Provider ID: 84253
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Female
License number: A103222
NPI: 1316125198
Provider English Spoken: Yes
Provider Language(s) Spoken:
French
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>Email: Medical Group(s): IPA:</p> <hr/> <p>FEMALE PELVIC MED AND RECONSTRUCTIVE SURG</p> <hr/> <p>LUKACZ, EMILY S Provider ID: 256955 Board Certified Specialty: No UCSD MEDICAL GROUP 4168 FRONT ST SAN DIEGO, CA 92103-2030 Phone: (800) 926-8273 Fax: After Hours Phone: (800) 926-8273 Provider Gender: Female License number: A63540 NPI: 1750339446 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr Medi-Cal Open Panel: Yes Min/Max Age: 16/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group</p> <p>LUKACZ, EMILY S Provider ID: 256956 Board Certified Specialty: No UCSD MEDICAL GROUP 4520 EXECUTIVE DR STE 360 SAN DIEGO, CA 92121-3020</p>	<p>Phone: (800) 926-8273 Fax: After Hours Phone: (800) 926-8273 Provider Gender: Female License number: A63540 NPI: 1750339446 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr Medi-Cal Open Panel: Yes Min/Max Age: 16/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group</p> <hr/> <p>GASTROENTEROLOGY</p> <hr/> <p>AJMERA, VEERAL H Provider ID: 116559 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 Phone: (619) 543-6222 Fax: After Hours Phone: (619) 543-6222 Provider Gender: Male License number: A124545 NPI: 1932429842 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: No Min/Max Age: None</p>	<p>American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:</p> <p>ANAND, GOBIND S Provider ID: 272837 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 Phone: (619) 543-2347 Fax: (858) 657-7259 After Hours Phone: (619) 543-2347 Provider Gender: Male License number: A120739 NPI: 1861626814 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group</p> <p>BAUMAN, LAURA E Provider ID: 260041 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 3030 CHILDRENS WAY FL 2 SAN DIEGO, CA 92123-4232</p>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 966-4003
Fax: (858) 560-6798
After Hours Phone: (858) 966-4003
Provider Gender: Female
License number: A157981
NPI: 1255697850
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/99
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

BORTNIKER, ETHAN I

Provider ID: 238774
Board Certified Specialty: No
UCSD MEDICAL GROUP
16950 VIA TAZON
SAN DIEGO, CA 92127-1607
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A155188
NPI: 1396905576
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CHOI, LILLIAN J

Provider ID: 206042
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY FL 2
SOUTH
SAN DIEGO, CA 92123-4232
Phone: (858) 966-4003
Fax: (858) 560-6798
After Hours Phone: (858) 966-4003
Provider Gender: Female
License number: A90646
NPI: 1831350453
Provider English Spoken: Yes
Provider Language(s) Spoken:
Korean
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

COPUR DAHI, NEDRET

Provider ID: 63862

Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax: (619) 543-7731
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: A99701
NPI: 1932290145
Provider English Spoken: Yes
Provider Language(s) Spoken:
Turkish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CUBAS, IVAN P

Provider ID: 262292
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
292 EUCLID AVE STE 115
SAN DIEGO, CA 92114-3629
Phone: (619) 266-3332
Fax: (619) 266-6000
After Hours Phone: (619) 266-3332
Provider Gender: Male
License number: C55825
NPI: 1447464912
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Portuguese, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Sharp Chula Vista Med Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> P, EB, IB, E, R, T <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Imperial Health Holdings Medical Group-Sd	No ☯ <i>Accessibility:</i> P, EB, IB, E, R, T, W <i>Hours:</i> M-F 9AM-5PM, SA 9AM-5PM <i>Website:</i> www.3dcinc.com <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Imperial Health Holdings Medical Group-Sd	SAN DIEGO, CA 92114-3629 <i>Phone:</i> (619) 266-3332 <i>Fax:</i> (619) 266-6006 <i>After Hours Phone:</i> (619) 266-3332 <i>Provider Gender:</i> Male <i>License number:</i> A49164 <i>NPI:</i> 1346326246 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Amharic, Arabic, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Paradise Valley Hospital, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> P, EB, IB, E, R, T, W <i>Hours:</i> M-F 9AM-5PM, SA 9AM-5PM <i>Website:</i> www.3dcinc.com <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Imperial Health Holdings Medical Group-Sd
CUBAS, IVAN P <i>Provider ID:</i> 88139 <i>Board Certified Specialty:</i> No DIGESTIVE DISEASE ASSOCS INC 292 EUCLID AVE STE 115 SAN DIEGO, CA 92114-3629 <i>Phone:</i> (619) 266-3332 <i>Fax:</i> (619) 266-6000 <i>After Hours Phone:</i> (619) 266-3332 <i>Provider Gender:</i> Male <i>License number:</i> C55825 <i>NPI:</i> 1447464912 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Portuguese, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Sharp Chula Vista Med Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i>	DAVE, SHRAVAN S <i>Provider ID:</i> 270450 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 4510 EXECUTIVE DR # 7 SAN DIEGO, CA 92121-3021 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Male <i>License number:</i> A139385 <i>NPI:</i> 1588081814 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 18/999 <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group	DESTA, TADDESE T <i>Provider ID:</i> 26477 <i>Board Certified Specialty:</i> No DIGESTIVE DISEASE ASSOCS INC 292 EUCLID AVE STE 115 SAN DIEGO, CA 92114-3629 <i>Phone:</i> (619) 266-3332 <i>Fax:</i> (619) 266-6000 <i>After Hours Phone:</i> (619) 266-3332 <i>Provider Gender:</i> Male <i>License number:</i> A49164 <i>NPI:</i> 1346326246
DESTA, TADDESE T <i>Provider ID:</i> 26477 <i>Board Certified Specialty:</i> No DIGESTIVE DISEASE ASSOCS INC 292 EUCLID AVE STE 115 <i>Phone:</i> (619) 266-3332 <i>Fax:</i> (619) 266-6000 <i>After Hours Phone:</i> (619) 266-3332 <i>Provider Gender:</i> Male <i>License number:</i> A49164 <i>NPI:</i> 1346326246		

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D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken: Amharic, Arabic, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Paradise Valley Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T, W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings Medical Group-Sd

DEVER, JOHN B

Provider ID: 110435
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A114858
NPI: 1093918724
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:
FELDSTEIN, ARIEL E
Provider ID: 79848
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123-4232
Phone: (858) 966-4003
Fax:
After Hours Phone: (858) 966-4003
Provider Gender: Male
License number: C54991
NPI: 1174587281
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

GARCIA, MARY ABIGAIL S

Provider ID: 205694
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 2
SOUTH
SAN DIEGO, CA 92123-4232
Phone: (858) 966-4003
Fax: (858) 560-6798
After Hours Phone: (858) 966-4003
Provider Gender: Female
License number: A89980
NPI: 1386805877
Provider English Spoken: Yes
Provider Language(s) Spoken: Tagalog
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

GISH, ROBERT G

Provider ID: 279965
Board Certified Specialty: No
HEALTH EXCEL IPA INC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608
Phone: (619) 255-9155
Fax: (619) 795-9849
After Hours Phone: (888) 216-8982
Provider Gender: Male
License number: G45632
NPI: 1548281322
Provider English Spoken: Yes
Provider Language(s) Spoken: Dutch, French, Spanish, Vietnamese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Providence Santa Rosa Memorial Hospital, Ucsd Medical Ctr, Stanford Health Care, California Pacific Med Ctr, Selma Community Hospital, Adventist Medical Center, Adventist Med Ctr Reedley, Loma Linda University Comm Med Ctr, Regional Medical Ctr Of San Jose
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:* P, EB, IB, E
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

GISH, ROBERT G

Provider ID: 279966
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 4171 FAIRMOUNT AVE
 SAN DIEGO, CA 92105-1609
Phone: (619) 255-9155
Fax: (619) 795-9849
After Hours Phone: (888) 216-8982
Provider Gender: Male
License number: G45632
NPI: 1548281322
Provider English Spoken: Yes
Provider Language(s) Spoken: Dutch, French, Spanish, Vietnamese
Cultural Competency: No
Hospital Affiliation: Providence Santa Rosa Memorial Hospital, Ucsd Medical Ctr, Stanford Health Care, California Pacific Med Ctr, Selma Community

Hospital, Adventist Medical Center, Adventist Med Ctr Reedley, Loma Linda University Comm Med Ctr, Regional Medical Ctr Of San Jose
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

HASSANEIN, TAREK I , MD

Provider ID: 269557
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 995 GATEWAY CENTER WAY
 STE 105
 SAN DIEGO, CA 92102-4544
Phone: (619) 264-1934
Fax: (619) 264-1937
After Hours Phone: (619) 264-1934
Provider Gender: Male
License number: A54452
NPI: 1801854450
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, French, German, Spanish, Urdu
Cultural Competency: No
Hospital Affiliation: Parkview Community Hospital Medical Center, Sharp Coronado Hosp And Healthcare Ctr, Sharp Chula Vista Med Ctr, Saddleback Memorial Med Ctr, Scripps Mercy Hospital Chula Vista, Riverside Community Hosp, Childrens Hospital At Mission, Grossmont Hospital, Hoag Hospital Irvine,

Doctors Hosp Of West Covina Inc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

HEMPERLY, AMY V

Provider ID: 244166
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY FL 2
 SAN DIEGO, CA 92123-4232
Phone: (858) 966-4003
Fax: (858) 560-6798
After Hours Phone: (858) 966-4003
Provider Gender: Female
License number: 20A14741
NPI: 1881960888
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Network, Ucsd Medical Group

HEMPERLY, AMY V

Provider ID: 259013

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 966-4003

Fax: (858) 560-6798

After Hours Phone: (858)

966-4003

Provider Gender: Female

License number: 20A14741

NPI: 1881960888

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton, Rady Childrens

Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/25

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network, Ucsd Medical Group

HILDRETH, AMBER N

Provider ID: 280464

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123-4232

Phone: (858) 966-4003

Fax: (858) 560-6798

After Hours Phone: (858)

966-4003

Provider Gender: Female

License number: 20A14177

NPI: 1548521511

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/99

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

HOM, XENIA B

Provider ID: 206024

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 2
SOUTH

SAN DIEGO, CA 92123-4232

Phone: (858) 966-4003

Fax: (858) 560-6798

After Hours Phone: (858)

576-1700

Provider Gender: Female

License number: G86642

NPI: 1982775748

Provider English Spoken: Yes

Provider Language(s) Spoken:

Chinese (Family), Mandarin,

Spanish

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

HUANG, JEANNIE S

Provider ID: 205939

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 2
SOUTH

SAN DIEGO, CA 92123-4232

Phone: (858) 966-4003

Fax: (858) 560-6798

After Hours Phone: (858)

966-1700

Provider Gender: Female

License number: A61762

NPI: 1013088871

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Ucsd Medical Ctr, Naval Medical

Ctr Sd Rbe

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Network

KALMAZ, DENISE

Provider ID: 63987
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-2347
Fax: (619) 543-7731
After Hours Phone: (619) 543-2347
Provider Gender: Female
License number: A87252
NPI: 1275700973
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KLAPHEKE, ROBERT W

Provider ID: 283346
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A154916
NPI: 1891113288

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KONO, YUKO

Provider ID: 64589
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
Phone: (619) 543-6248
Fax:
After Hours Phone: (619) 543-6248
Provider Gender: Female
License number: A111039
NPI: 1982628665
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Japanese
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA:

KONO, YUKO

Provider ID: 83663
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax: (619) 471-9473
After Hours Phone: (619) 543-2218
Provider Gender: Female
License number: A111039
NPI: 1982628665
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Japanese
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KONO, YUKO

Provider ID: 83664
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240
Fax:
After Hours Phone: (619) 471-9240

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Female
License number: A111039
NPI: 1982628665
Provider English Spoken: Yes
Provider Language(s) Spoken: Japanese
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KUMAR, SOMA

Provider ID: 205377
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 2 SOUTH
SAN DIEGO, CA 92123-4232
Phone: (858) 966-4003
Fax: (858) 560-6798
After Hours Phone: (858) 966-4003
Provider Gender: Female
License number: A140223
NPI: 1356502520
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MENDLER, MICHEL H

Provider ID: 210291
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR FL 2
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A78316
NPI: 1134232051
Provider English Spoken: Yes
Provider Language(s) Spoken: French
Cultural Competency: No
Hospital Affiliation: Keck Hospital Of Usc, Ucsd Medical Ctr, Usc Kenneth Norris Jr Cancer Hospital, Lac Usc Medical Center, Lac Rancho Los Amigos National Rehab Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MENDLER, MICHEL H

Provider ID: 210293
Board Certified Specialty: No

UCSD MEDICAL GROUP
4510 EXECUTIVE DR # 7
SAN DIEGO, CA 92121-3021
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A78316
NPI: 1134232051
Provider English Spoken: Yes
Provider Language(s) Spoken: French
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Lac Usc Medical Center, Lac Rancho Los Amigos National Rehab Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MENDLER, MICHEL H

Provider ID: 64079
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax: (909) 558-6415
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A78316
NPI: 1134232051
Provider English Spoken: Yes
Provider Language(s) Spoken: French

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr, Lac Usc Medical Center, Lac Rancho Los Amigos National Rehab Center

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL): No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

PATEL, DEREK R

Provider ID: 64130

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103-1911

Phone: (619) 543-2347

Fax:

After Hours Phone: (619)
543-2347

Provider Gender: Male

License number: A69111

NPI: 1073538385

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL): No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

PATTON, HEATHER M

Provider ID: 64627

Board Certified Specialty: No
UCSD MEDICAL GROUP

4168 FRONT ST FL 2
SAN DIEGO, CA 92103-2030

Phone: (619) 543-5415

Fax:

After Hours Phone: (619)
543-5415

Provider Gender: Female

License number: A75284

NPI: 1396796124

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Palomar Health Downtown Campus, Ucsd Medical Ctr, Palomar Medical Center

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL): No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

POLK, DAVID B

Provider ID: 275449

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123-4232

Phone: (760) 294-9260

Fax: (760) 294-9274

After Hours Phone: (760)
294-9260

Provider Gender: Male

License number: A43654

NPI: 1427140839

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hosp Of Los Angeles

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

REDDY, ANANTHRAM P

Provider ID: 34354

Board Certified Specialty: Yes
SUMANA AND ANANTHRAM REDDY MD INC

6699 ALVARADO RD STE 2301
SAN DIEGO, CA 92120-5241

Phone: (619) 229-1005

Fax: (619) 588-4004

After Hours Phone: (619)
229-1005

Provider Gender: Male

License number: C52423

NPI: 1124014923

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cambodian, Hindi, Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont Hospital, Alvarado Hospital Llc

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p><i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd</p> <p>REDDY, ANANTHRAM P , MD <i>Provider ID:</i> 34354 <i>Board Certified Specialty:</i> Yes SUMANA AND ANANTHRAM REDDY MD INC 6699 ALVARADO RD STE 2301 SAN DIEGO, CA 92120-5241 <i>Phone:</i> (619) 229-1005 <i>Fax:</i> (619) 588-4004 <i>After Hours Phone:</i> (619) 229-1005 <i>Provider Gender:</i> Male <i>License number:</i> C52423 <i>NPI:</i> 1124014923 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cambodian, Hindi, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Alvarado Hospital Llc <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd</p> <p>REDDY, ANANTHRAM P <i>Provider ID:</i> 34354 <i>Board Certified Specialty:</i> No SUMANA AND ANANTHRAM REDDY MD INC</p>	<p>6699 ALVARADO RD STE 2301 SAN DIEGO, CA 92120-5241 <i>Phone:</i> (619) 299-1005 <i>Fax:</i> (619) 326-0380 <i>After Hours Phone:</i> (619) 299-1005 <i>Provider Gender:</i> Male <i>License number:</i> C52423 <i>NPI:</i> 1124014923 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cambodian, Hindi, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Alvarado Hospital Llc <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd</p> <p>REDDY, JOSEPH B <i>Provider ID:</i> 27748 <i>Board Certified Specialty:</i> Yes ADVANCED ENDOSCOPY CONSULTANTS INC 6699 ALVARADO RD STE 2301 SAN DIEGO, CA 92120-5241 <i>Phone:</i> (619) 270-5665 <i>Fax:</i> (619) 588-4004 <i>After Hours Phone:</i> (619) 270-5665 <i>Provider Gender:</i> Male <i>License number:</i> A46472 <i>NPI:</i> 1245215391 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Hindi, Spanish, Telugu</p>	<p><i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Alvarado Hospital Llc <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Imperial Health Holdings Medical Group-Sd</p> <p>REDDY, JOSEPH B <i>Provider ID:</i> 27748 <i>Board Certified Specialty:</i> No ADVANCED ENDOSCOPY CONSULTANTS INC 6699 ALVARADO RD STE 2301 SAN DIEGO, CA 92120-5241 <i>Phone:</i> (619) 588-4074 <i>Fax:</i> (619) 588-4004 <i>After Hours Phone:</i> (619) 588-4074 <i>Provider Gender:</i> Male <i>License number:</i> A46472 <i>NPI:</i> 1245215391 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Hindi, Spanish, Telugu <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Alvarado Hospital Llc <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-W 8AM-5PM, TH,F 8AM-3PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i></p>
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D. Directorio de proveedores de atención especializada

IPA: Imperial Health Holdings
Medical Group-Sd

SCHAEFFER, CYNTHIA L

Provider ID: 26694
Board Certified Specialty: No
DIGESTIVE DISEASE ASSOCS
INC
292 EUCLID AVE STE 115
SAN DIEGO, CA 92114-3629
Phone: (619) 266-3332
Fax: (619) 266-6000
After Hours Phone: (619)
266-3332
Provider Gender: Female
License number: A91771
NPI: 1740352293
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Paradise
Valley Hospital, Scripps Mercy
Hospital Chula Vista, Sharp
Chula Vista Med Ctr, Scripps
Memorial Hospital, Scripps
Mercy Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
T, W
Hours: M-F 9AM-5PM, SA
9AM-5PM
Website: www.3dcinc.com
Email:
Medical Group(s):
IPA: Imperial Health Holdings
Medical Group-Sd

SCHAEFFER, CYNTHIA L

Provider ID: 26694
Board Certified Specialty: No
DIGESTIVE DISEASE ASSOCS

INC
292 EUCLID AVE STE 115
SAN DIEGO, CA 92114-3629
Phone: (619) 266-3332
Fax: (619) 266-6000
After Hours Phone: (619)
266-3332
Provider Gender: Female
License number: A91771
NPI: 1740352293
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Paradise
Valley Hospital, Scripps Mercy
Hospital Chula Vista, Sharp
Chula Vista Med Ctr, Scripps
Memorial Hospital, Scripps
Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings
Medical Group-Sd

SHAH, SHAILJA C

Provider ID: 283896
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A125800
NPI: 1073803243

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

THOMAS, CARLTON W

Provider ID: 125014
Board Certified Specialty: Yes
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
292 EUCLID AVE STE 115
SAN DIEGO, CA 92114-3629
Phone: (619) 266-3332
Fax: (619) 266-6006
After Hours Phone: (619)
266-3332
Provider Gender: Male
License number: A88112
NPI: 1205881398
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Paradise
Valley Hospital, Scripps Mercy
Hospital Chula Vista, Sharp
Chula Vista Med Ctr, Scripps
Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R, T

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D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Imperial Health Holdings
Medical Group-Sd

THOMAS, CARLTON W

Provider ID: 54337

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD

1855 1ST AVE STE 200B
SAN DIEGO, CA 92101-2650

Phone: (619) 266-3332

Fax: (619) 266-6000

After Hours Phone: (619)
266-3332

Provider Gender: Male

License number: A88112

NPI: 1205881398

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Paradise
Valley Hospital, Scripps Mercy
Hospital Chula Vista, Sharp
Chula Vista Med Ctr, Scripps
Mercy Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Imperial Health Holdings
Medical Group-Sd

THOMAS, CARLTON W

Provider ID: 66107

Board Certified Specialty: No

DIGESTIVE DISEASE ASSOCS
INC

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114-3629

Phone: (619) 266-3332

Fax:

After Hours Phone: (619)
266-3332

Provider Gender: Male

License number: A88112

NPI: 1205881398

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Paradise
Valley Hospital, Scripps Mercy
Hospital Chula Vista, Sharp
Chula Vista Med Ctr, Scripps
Mercy Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,
T, W

Hours: M-F 9AM-5PM, SA
9AM-5PM

Website: www.3dcinc.com

Email:

Medical Group(s):

IPA: Imperial Health Holdings
Medical Group-Sd

WONG, GREGORY K

Provider ID: 279598

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123-4232

Phone: (858) 966-4003

Fax: (858) 560-6798

After Hours Phone: (858)
966-4003

Provider Gender: Male

License number: A124939

NPI: 1386977288

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Childrens
Hospital Of Orange County,
Pomona Valley Hosp Med Ctr,
Providence St Joseph Hospital,
Fountain Valley Regional Hosp
And Med Ctr, Childrens Hospital
At Mission, Rady Childrens
Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

YANG, EDWARD

Provider ID: 283165

Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A154057

NPI: 1437545654

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

GENERAL PRACTICE

BORRERO, MARCOS

Provider ID: 125077

Board Certified Specialty: No

IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD

3490 PALM AVE

SAN DIEGO, CA 92154-1664

Phone: (619) 423-5616

Fax: (619) 423-5686

After Hours Phone: (619)

423-5616

Provider Gender: Male

License number: A38907

NPI: 1952312621

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Chula

Vista Med Ctr, Scripps Mercy

Hospital Chula Vista

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* P, EB, IB, E, R

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Imperial Health Holdings

Medical Group-Sd

HEGYI, EDIT E

Provider ID: 244768

Board Certified Specialty: No

HEALTH EXCEL IPA INC

16769 BERNARDO CENTER DR

K13

SAN DIEGO, CA 92128-2546

Phone: (760) 990-3523

Fax: (858) 524-6204

After Hours Phone: (760)

990-3523

Provider Gender: Female

License number: A89002

NPI: 1396039301

Provider English Spoken: Yes

Provider Language(s) Spoken:

French, Hungarian

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

GENETICS CLINICAL

BIOCHEMICAL

LEVINE, FRED

Provider ID: 206098

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

3030 CHILDRENS WAY FL 4

NORTH

SAN DIEGO, CA 92123-4232

Phone: (858) 966-5840

Fax: (858) 966-7942

After Hours Phone: (858)

966-5840

Provider Gender: Male

License number: G65341

NPI: 1154493476

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

GENETICS CLINICAL

JONES, KENNETH L

Provider ID: 276105

Board Certified Specialty: No

UCSD MEDICAL GROUP

7910 FROST ST STE 230

SAN DIEGO, CA 92123-2776

Phone: (858) 502-1100

Fax: (858) 505-9931

After Hours Phone: (858)

502-1100

Provider Gender: Male

License number: G29045

NPI: 1962550673

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Rady

Childrens Hospital San Diego,

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network, Ucsd Medical Group

GENETICS MEDICAL

BARSHOP, BRUCE A
 Provider ID: 202349
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 212 DICKINSON ST # CTFB213
 SAN DIEGO, CA 92103-2071
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 License number: G58157
 NPI: 1477624237
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr, Rady Childrens Hospital San
 Diego, Ucsd La Jolla John Sally
 Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

BIRD, LYNNE M
 Provider ID: 206065
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 7920 FROST ST STE 200
 SAN DIEGO, CA 92123-4289
 Phone: (858) 966-7484
 Fax: (858) 966-4064
 After Hours Phone: (858)
 966-7484
 Provider Gender: Female
 License number: A45464
 NPI: 1487725230
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Sharp Memorial Hospital, Sharp
 Mary Birch Hosp For Women
 And Newborns
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility: P, EB, IB, E, R, T
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

BIRD, LYNNE M
 Provider ID: 257903
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223

Phone: (858) 966-1700
 Fax: (858) 966-4064
 After Hours Phone: (858)
 966-1700
 Provider Gender: Female
 License number: A45464
 NPI: 1487725230
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Sharp Memorial Hospital, Sharp
 Mary Birch Hosp For Women
 And Newborns
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/25
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

BIRD, LYNNE M
 Provider ID: 52305
 Board Certified Specialty: No
 RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDRN
 7920 FROST ST STE 200
 SAN DIEGO, CA 92123-4289
 Phone: (858) 966-7484
 Fax: (858) 966-4064
 After Hours Phone: (858)
 966-7484
 Provider Gender: Female
 License number: A45464
 NPI: 1487725230
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Sharp Mary Birch Hosp For Women And Newborns
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* P, EB, IB, E, R, T, W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

DEL CAMPO CASANELLES, MIGUEL

Provider ID: 102437
Board Certified Specialty: No
 RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 7920 FROST ST STE 200
 SAN DIEGO, CA 92123-4289
Phone: (858) 966-7484
Fax: (858) 966-4064
After Hours Phone: (858) 966-7484
Provider Gender: Male
License number: SFP30
NPI: 1598141475
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Italian, Portuguese, Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None

American Sign Language (ASL): No
 ☯ *Accessibility:* P, EB, IB, E, R, T, W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

DEL CAMPO CASANELLES, MIGUEL

Provider ID: 102438
Board Certified Specialty: No
 RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 3665 KEARNY VILLA RD # 501
 SAN DIEGO, CA 92123-1953
Phone: (858) 966-5803
Fax:
After Hours Phone: (858) 966-5803
Provider Gender: Male
License number: SFP30
NPI: 1598141475
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Italian, Portuguese, Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Rady Childrens Health Network

DEL CAMPO CASANELLES, MIGUEL

Provider ID: 206013
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 7920 FROST ST STE 200
 SAN DIEGO, CA 92123-4289
Phone: (858) 966-7484
Fax: (858) 966-4064
After Hours Phone: (858) 966-7484
Provider Gender: Male
License number: SFP30
NPI: 1598141475
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Italian, Portuguese, Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

DEL CAMPO CASANELLES, MIGUEL

Provider ID: 206014
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

3665 KEARNY VILLA RD # 501
SAN DIEGO, CA 92123-1953

Phone: (858) 966-5990

Fax: (858) 966-5992

After Hours Phone: (858)
966-5990

Provider Gender: Male

License number: SFP30

NPI: 1598141475

Provider English Spoken: Yes

Provider Language(s) Spoken:

French, Italian, Portuguese,
Spanish

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr, Ucsd La Jolla
John Sally Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

JONES, KENNETH L

Provider ID: 206324

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

7920 FROST ST STE 200
SAN DIEGO, CA 92123-4289

Phone: (858) 966-7484

Fax: (858) 966-4064

After Hours Phone: (858)
966-7484

Provider Gender: Male

License number: G29045

NPI: 1962550673

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network, Ucsd Medical Group

JONES, KENNETH L

Provider ID: 244713

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3665 KEARNY VILLA RD
SAN DIEGO, CA 92123-1953

Phone: (858) 966-5990

Fax:

After Hours Phone: (858)
966-5990

Provider Gender: Male

License number: G29045

NPI: 1962550673

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network, Ucsd Medical Group

JONES, MARILYN C

Provider ID: 202348

Board Certified Specialty: No
UCSD MEDICAL GROUP

4910 DIRECTORS PL STE 200
SAN DIEGO, CA 92121-3814

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

License number: G30850

NPI: 1295806040

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr, Ucsd La Jolla
John Sally Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network, Ucsd Medical Group

JONES, MARILYN C

Provider ID: 206268

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

7920 FROST ST STE 200

SAN DIEGO, CA 92123-4289

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 966-7484
Fax: (858) 966-4064
After Hours Phone: (858) 966-7484
Provider Gender: Female
License number: G30850
NPI: 1295806040
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr, Ucsd La Jolla
John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network, Ucsd Medical Group

JONES, MARILYN C

Provider ID: 243882
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5840
Fax: (858) 966-8550
After Hours Phone: (858)
966-5840
Provider Gender: Female
License number: G30850
NPI: 1295806040
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,

Ucsd Medical Ctr, Ucsd La Jolla
John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network, Ucsd Medical Group

LEVINE, FRED

Provider ID: 52504
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FN D TN
3030 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123-4232
Phone: (858) 966-6789
Fax:
After Hours Phone: (858)
966-6789
Provider Gender: Male
License number: G65341
NPI: 1154493476
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

MARDACH, REBECCA

Provider ID: 241946
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
7920 FROST ST STE 200
SAN DIEGO, CA 92123-4289
Phone: (858) 966-5840
Fax:
After Hours Phone: (858)
966-5840
Provider Gender: Female
License number: A45110
NPI: 1457330607
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ronald
Reagan UCLA Med Ctr, UC Davis
Medical Ctr, Rady Childrens
Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

MARDACH, REBECCA

Provider ID: 241947
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123-4232
Phone: (858) 966-5840
Fax:
After Hours Phone: (858)
966-5840

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D. Directorio de proveedores de atención especializada

Provider Gender: Female
License number: A45110
NPI: 1457330607
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ronald Reagan Ucla Med Ctr, Uc Davis Medical Ctr, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

NIEMI, ANNA-KAISA
Provider ID: 127720
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5841
Fax:
After Hours Phone: (858) 966-5841
Provider Gender: Female
License number: A104907
NPI: 1497941397
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):

No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

NIEMI, ANNA-KAISA
Provider ID: 127721
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
4077 5TH AVE
SAN DIEGO, CA 92103-2105
Phone: (619) 260-7046
Fax:
After Hours Phone: (619) 260-7046
Provider Gender: Female
License number: A104907
NPI: 1497941397
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

WIGBY, KRISTEN M
Provider ID: 206185
Board Certified Specialty: No
RADY CHILDRENS HEALTH

NETWORK
7920 FROST ST STE 200
SAN DIEGO, CA 92123-4289
Phone: (858) 966-7484
Fax: (858) 966-4064
After Hours Phone: (858) 966-7484
Provider Gender: Female
License number: A136240
NPI: 1487920724
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

GYNECOLOGY

WEBER, AKILAH F
Provider ID: 206332
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
7920 FROST ST STE 200
SAN DIEGO, CA 92123-4289
Phone: (858) 966-7484
Fax: (858) 966-4064
After Hours Phone: (858) 966-7484
Provider Gender: Female
License number: C56035
NPI: 1760652713
Provider English Spoken: Yes

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D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☯ *Accessibility:* P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

HEARING AID DEALER / SUPPLIER

ANAYA, MANUEL E
Provider ID: 265704
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 9340 CLAIREMONT MESA BLVD STE D
 SAN DIEGO, CA 92123-1224
Phone: (858) 278-9911
Fax: (858) 565-7324
After Hours Phone: (858) 278-9911
Provider Gender: Male
License number: HA8368
NPI: 1871089474
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc
ANDERSON, ELAINE M
Provider ID: 252907
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 6367 ALVARADO CT
 SAN DIEGO, CA 92120-4904
Phone: (619) 583-7002
Fax: (619) 583-9404
After Hours Phone: (619) 583-7002
Provider Gender: Female
License number: HA7100
NPI: 1063558856

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

ANDERSON, ELAINE M , MD
Provider ID: 268689
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 6367 ALVARADO CT STE 101
 SAN DIEGO, CA 92120-4914
Phone: (619) 583-7002
Fax: (619) 583-9404
After Hours Phone: (619) 583-7002
Provider Gender: Female

License number: HA7100
NPI: 1063558856
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

ANDERSON, ELAINE M , MD
Provider ID: 268691
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 9340 CLAIREMONT MESA BLVD STE D
 SAN DIEGO, CA 92123-1224
Phone: (858) 278-9911
Fax: (858) 565-7324
After Hours Phone: (858) 278-9911
Provider Gender: Female
License number: HA7100
NPI: 1063558856
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

DANDURAND, JOHN M

Provider ID: 252965
Board Certified Specialty: No
HEALTH EXCEL IPA INC
6367 ALVARADO CT
SAN DIEGO, CA 92120-4904
Phone: (858) 259-4182
Fax: (805) 530-3989
After Hours Phone: (858)
259-4182
Provider Gender: Male
License number: HA2056
NPI: 1497901680

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

DANDURAND, JOHN M , MD

Provider ID: 269781
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
6367 ALVARADO CT
SAN DIEGO, CA 92120-4904
Phone: (858) 259-4182
Fax: (805) 530-3989
After Hours Phone: (858)
259-4182
Provider Gender: Male
License number: HA2056
NPI: 1497901680

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

DAVIS, KELLE L

Provider ID: 253150
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9340 CLAIREMONT MESA
BLVD
SAN DIEGO, CA 92123-1224
Phone: (760) 434-0125
Fax: (760) 434-4531
After Hours Phone: (760)
434-0125
Provider Gender: Female
License number: HA6083
NPI: 1902853344

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

DAVIS, KELLE L , MD

Provider ID: 268652
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
6367 ALVARADO CT STE 101
SAN DIEGO, CA 92120-4914
Phone: (619) 583-7002
Fax: (619) 583-9404
After Hours Phone: (619)
583-7002
Provider Gender: Female
License number: HA6083
NPI: 1902853344
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

DAVIS, KELLE L , MD

Provider ID: 268653
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9340 CLAIREMONT MESA
BLVD STE D
SAN DIEGO, CA 92123-1224
Phone: (858) 278-9911
Fax: (858) 565-7324
After Hours Phone: (858)
278-9911
Provider Gender: Female
License number: HA6083
NPI: 1902853344
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p><i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc</p>	<p><i>Medical Group(s):</i> IPA: Rady Childrens Health Network</p> <p>BESSUDO, ALBERTO, MD <i>Provider ID:</i> 256962 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 16918 DOVE CANYON RD STE 103 SAN DIEGO, CA 92127-3455 <i>Phone:</i> (858) 649-5100 <i>Fax:</i> (858) 649-5099 <i>After Hours Phone:</i> (858) 649-5100 <i>Provider Gender:</i> Male <i>License number:</i> A50309 <i>NPI:</i> 1003888074 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Hebrew, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Palomar Health Downtown Campus, Tri City Medical Ctr, Scripps Memorial Hospital Encinitas <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>	<p>SAN DIEGO, CA 92103-1911 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Male <i>License number:</i> A140495 <i>NPI:</i> 1881006955 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Green Hospital, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Ucsd Medical Group</p>
<p>HEMATOLOGY / ONCOLOGY</p>		
<p>ARISTIZABAL, MARIA P <i>Provider ID:</i> 78395 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3010 CHILDRENS WAY # 2W SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-5811 <i>Fax:</i> <i>After Hours Phone:</i> (858) 966-5811 <i>Provider Gender:</i> Female <i>License number:</i> A127586 <i>NPI:</i> 1154662583 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i></p>	<p>BOTTA, GREGORY P <i>Provider ID:</i> 242347 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR</p>	<p>BRIGGS, BENJAMIN J <i>Provider ID:</i> 274689 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3010 CHILDRENS WAY FL 2 SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-5811 <i>Fax:</i> (858) 966-8035 <i>After Hours Phone:</i> (858) 966-5811 <i>Provider Gender:</i> Male <i>License number:</i> A148562 <i>NPI:</i> 1952695777 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego,</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Naval Medical Ctr Sd Rbe
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

BUSH, KELLY A

Provider ID: 274408
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3010 CHILDRENS WAY # 2
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5811
Fax: (858) 966-5811
After Hours Phone: (858)
966-5811
Provider Gender: Female
License number: A125141
NPI: 1073831079
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

DING, HILDA H

Provider ID: 109323
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FN D T N
3010 CHILDRENS WAY # 2W
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5811
Fax:
After Hours Phone: (858)
966-5811
Provider Gender: Female
License number: A144295
NPI: 1780813923
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

EISENBERG, STEVEN G

Provider ID: 242455
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
16918 DOVE CANYON RD STE
103
SAN DIEGO, CA 92127-3455
Phone: (858) 649-5100
Fax: (858) 649-5099
After Hours Phone: (858)
649-5100
Provider Gender: Male
License number: 20A8293
NPI: 1831162627

Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Palomar
Health Downtown Campus
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

FLORES, EDNA I

Provider ID: 115370
Board Certified Specialty: No
CALIFORNIA CANCER
ASSOCS FOR RESEARCH AND
EXCELL
16918 DOVE CANYON RD STE
103
SAN DIEGO, CA 92127-3455
Phone: (858) 649-5100
Fax:
After Hours Phone: (858)
649-5100
Provider Gender: Female
License number: A114373
NPI: 1396994604
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Pioneers
Memorial Hospital, Scripps
Memorial Hospital Encinitas,
Scripps Memorial Hospital
Medi-Cal Open Panel: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

FRAKES, LAURIE A

Provider ID: 68216

Board Certified Specialty: No
CALIFORNIA CANCER

ASSOCS FOR RESEARCH AND
EXCELL

16918 DOVE CANYON RD STE
103

SAN DIEGO, CA 92127-3455

Phone: (858) 649-5100

Fax:

After Hours Phone: (858)
649-5100

Provider Gender: Female

License number: A52663

NPI: 1174595144

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Tri City

Medical Ctr, Scripps Memorial
Hospital, Scripps Memorial
Hospital Encinitas

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

GLOUDE, NICHOLAS J

Provider ID: 117121

Board Certified Specialty: No
CHILDRENS HOSP SAN DIEGO
CHADWICK CTR

3010 CHILDRENS WAY # 2W
SAN DIEGO, CA 92123-4223

Phone: (858) 966-5811

Fax:

After Hours Phone: (858)
966-5811

Provider Gender: Male

License number: A119146

NPI: 1447527833

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

GOODMAN, AARON M

Provider ID: 216895

Board Certified Specialty: No
UCSD MEDICAL GROUP

8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122-1013

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)
926-8273

Provider Gender: Male

License number: A130400

NPI: 1851603559

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

LAMON, JOEL M , MD

Provider ID: 241036

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
16918 DOVE CANYON RD STE
103

SAN DIEGO, CA 92127-3455

Phone: (858) 649-5100

Fax: (858) 649-5099

After Hours Phone: (858)
649-5100

Provider Gender: Male

License number: G28164

NPI: 1699721035

Provider English Spoken: Yes

Provider Language(s) Spoken:

French, German, Spanish,

Tagalog

Cultural Competency: No

Hospital Affiliation: Palomar

Health Downtown Campus

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p><i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>	<p>LEE, KAREN K <i>Provider ID:</i> 284165 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3010 CHILDRENS WAY FL 2 SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-5811 <i>Fax:</i> (858) 966-8035 <i>After Hours Phone:</i> (858) 966-5811 <i>Provider Gender:</i> Female <i>License number:</i> A154276 <i>NPI:</i> 1518352970 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network</p>	<p><i>License number:</i> A145444 <i>NPI:</i> 1306013610 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>
<p>LAMON, JOEL M <i>Provider ID:</i> 68222 <i>Board Certified Specialty:</i> No CALIFORNIA CANCER ASSOCS FOR RESEARCH AND EXCELL 16918 DOVE CANYON RD STE 103 SAN DIEGO, CA 92127-3455 <i>Phone:</i> (858) 649-5100 <i>Fax:</i> <i>After Hours Phone:</i> (858) 649-5100 <i>Provider Gender:</i> Male <i>License number:</i> G28164 <i>NPI:</i> 1699721035 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> French, German, Spanish, Tagalog <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc, Imperial</p>	<p>MCKAY, RANA R <i>Provider ID:</i> 110729 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 <i>Phone:</i> (858) 822-6100 <i>Fax:</i> <i>After Hours Phone:</i> (858) 822-6100 <i>Provider Gender:</i> Female</p>	<p>PAUL, MEGAN R <i>Provider ID:</i> 274499 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3010 CHILDRENS WAY # 2W SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-5811 <i>Fax:</i> (858) 966-8035 <i>After Hours Phone:</i> (858) 966-5811 <i>Provider Gender:</i> Female <i>License number:</i> A141572 <i>NPI:</i> 1427495894 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i></p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Rady Childrens Health
 Network

VON DRYGALSKI, ANNETTE

Provider ID: 101374
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8929 UNIVERSITY CENTER LN
 STE 201
 SAN DIEGO, CA 92122-1008
Phone: (858) 657-5947

Fax:
After Hours Phone: (858)
 657-5947

Provider Gender: Female
License number: A100681
NPI: 1376607036

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Rady Childrens Hospital San
 Diego

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA:

VU, PETER

Provider ID: 272716
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
 926-8273

Provider Gender: Male
License number: A149741
NPI: 1861810830
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Ucsd Medical Group

ZHOU, JENNY Y

Provider ID: 273188
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9333 GENESEE AVE # 310
 SAN DIEGO, CA 92121-2111
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
 926-8273
Provider Gender: Female
License number: A133845
NPI: 1598007924

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HEPATOLOGY

BARMAN, PRANAB M

Provider ID: 241953
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4510 EXECUTIVE DR STE 315
 SAN DIEGO, CA 92121-3029
Phone: (800) 826-5273

Fax:
After Hours Phone: (800)
 826-5273

Provider Gender: Male
License number: A162554
NPI: 1023301991

Provider English Spoken: Yes
Provider Language(s) Spoken:
 Hindi, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Ucsd Medical Group

KUO, ALEXANDER

Provider ID: 64592
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST FL 2
 SAN DIEGO, CA 92103-2030

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 543-5415

Fax:

After Hours Phone: (619)
543-5415

Provider Gender: Male

License number: A86787

NPI: 1912032764

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

SHARPTON, SUZANNE

Provider ID: 245666

Board Certified Specialty: No
UCSD MEDICAL GROUP

4168 FRONT ST FL 2

SAN DIEGO, CA 92103-2030

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)
926-8273

Provider Gender: Female

License number: A123642

NPI: 1891084257

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

SHARPTON, SUZANNE

Provider ID: 245668

Board Certified Specialty: No
UCSD MEDICAL GROUP

4510 EXECUTIVE DR # 7

SAN DIEGO, CA 92121-3021

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)
926-8273

Provider Gender: Female

License number: A123642

NPI: 1891084257

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

HOSPICE AND PALLIATIVE MEDICINE

BOWER, KIMBERLY A

Provider ID: 260051

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

3030 CHILDRENS WAY # 2
SAN DIEGO, CA 92123-4232

Phone: (858) 966-8022

Fax: (858) 966-8457

After Hours Phone: (858)
966-8022

Provider Gender: Female

License number: A83280

NPI: 1114005741

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego,
Scripps Green Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/99

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

RUBENSIK, TAMARA T

Provider ID: 125355

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)
926-8273

Provider Gender: Female

License number: A119245

NPI: 1811200652

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

RUBENZIK, TAMARA T

Provider ID: 245573
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A119245
NPI: 1811200652
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

RUBENZIK, TAMARA T

Provider ID: 276671
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A119245
NPI: 1811200652
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HOSPITALIST MD/DO

CHILDERS, DIANA J

Provider ID: 275068
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A86157
NPI: 1033128376
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

FIRESTEIN, CATHERINE E

Provider ID: 275387
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A143013
NPI: 1427348382
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

HAMMOND, CHARLES F

Provider ID: 278588
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A169655
NPI: 1033641816
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

PABAND, RASHID

Provider ID: 282915
Board Certified Specialty: No
HEALTH EXCEL IPA INC
6655 ALVARADO RD
SAN DIEGO, CA 92120-5208
Phone: (760) 410-8584
Fax: (619) 768-1087
After Hours Phone: (760) 410-8584
Provider Gender: Male
License number: A120108
NPI: 1407089451
Provider English Spoken: Yes

Provider Language(s) Spoken:
Arabic
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Alvarado Hospital Llc
Medi-Cal Open Panel: No
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SHINDO, YURI

Provider ID: 284743
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A167796
NPI: 1700271939
Provider English Spoken: Yes
Provider Language(s) Spoken:
Japanese
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Ucsd Medical Group

SPILMAN, SAMANTHA L

Provider ID: 272704
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A161231
NPI: 1134651607
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

INFECTIOUS DISEASE

ARNOLD, JOHN C

Provider ID: 260077
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123-4232

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (885) 966-7785
Fax: (858) 966-8658
After Hours Phone: (885) 966-7785
Provider Gender: Male
License number: A70189
NPI: 1023191053
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/99
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

ARONOFF SPENCER, ELIAH S

Provider ID: 83195
Board Certified Specialty: Yes
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (619) 543-6146
Fax: (619) 543-6614
After Hours Phone: (619) 543-6146
Provider Gender: Male
License number: A104748
NPI: 1770737579
Provider English Spoken: Yes
Provider Language(s) Spoken:
French, Portuguese, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No

Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ASLAM, SAIMA

Provider ID: 64526
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST FL 3
SAN DIEGO, CA 92103-2030
Phone: (858) 657-8000
Fax:
After Hours Phone: (858)
657-8000
Provider Gender: Female
License number: A112604
NPI: 1477565257

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BAMFORD, LAURA P

Provider ID: 276546
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST FL 3

SAN DIEGO, CA 92103-2030
Phone: (619) 543-6382
Fax: (888) 539-8781
After Hours Phone: (619)
543-6382
Provider Gender: Female
License number: C169020
NPI: 1750435996
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BHARTI, AJAY R

Provider ID: 64532
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (619) 543-6146
Fax: (619) 543-7841
After Hours Phone: (619)
543-6146
Provider Gender: Male
License number: A85085
NPI: 1902954910
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BLANCHARD, JENNIFER N

Provider ID: 64536
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (619) 543-3995
Fax: (619) 543-7841
After Hours Phone: (619)
543-3995
Provider Gender: Female
License number: A65285
NPI: 1972545077
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Rady Childrens Hospital San
Diego, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BLUMENTHAL, JILL S

Provider ID: 122503

Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST
SAN DIEGO, CA 92103-2108
Phone: (619) 471-9260
Fax:
After Hours Phone: (619)
471-9260
Provider Gender: Female
License number: A117338
NPI: 1336308378
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BLUMENTHAL, JILL S

Provider ID: 88097
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (619) 543-6146
Fax: (619) 543-3511
After Hours Phone: (619)
543-6146
Provider Gender: Female
License number: A117338
NPI: 1336308378
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BURNS, JANE C

Provider ID: 206071
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 246-0157
Fax: (858) 966-8527
After Hours Phone: (858)
246-0157
Provider Gender: Female
License number: G68119
NPI: 1619040953
Provider English Spoken: Yes
Provider Language(s) Spoken:
French, Italian, Spanish
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

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D. Directorio de proveedores de atención especializada

CACHAY, EDWARD R

Provider ID: 64541
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (619) 543-6248
Fax: (619) 543-7841
After Hours Phone: (619)
543-6248
Provider Gender: Male
License number: A84561
NPI: 1336290071
Provider English Spoken: Yes
Provider Language(s) Spoken:
French, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

DAN, JENNIFER M

Provider ID: 110016
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST FL 3
SAN DIEGO, CA 92103-2030
Phone: (619) 543-6146
Fax:
After Hours Phone: (619)
543-6146
Provider Gender: Female
License number: A119193

NPI: 1225343601
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

DEISS, ROBERT G

Provider ID: 258330
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST FL 3
SAN DIEGO, CA 92103-2030
Phone: (619) 543-3995
Fax:
After Hours Phone: (619)
543-3995
Provider Gender: Male
License number: A111310
NPI: 1194977652
Provider English Spoken: Yes
Provider Language(s) Spoken:
Portuguese, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Ucsd Medical Group

FARNAES, LAUGE

Provider ID: 260385
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123-4232
Phone: (885) 966-7785
Fax: (858) 966-8658
After Hours Phone: (885)
966-7785
Provider Gender: Male
License number: A124601
NPI: 1881988749
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

HORTON, LUCY E

Provider ID: 240887
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female

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D. Directorio de proveedores de atención especializada

License number: A137391
NPI: 1427324821
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KATSIVAS, THEODOROS F , MD

Provider ID: 269840
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (619) 543-3000
Fax:
After Hours Phone: (619)
543-3000
Provider Gender: Male
License number: A78543
NPI: 1679526164
Provider English Spoken: Yes
Provider Language(s) Spoken:
German, Greek, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

LATHER, TUYET T

Provider ID: 245064
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST FL 3
SAN DIEGO, CA 92103-2030
Phone: (619) 543-3995
Fax:
After Hours Phone: (619)
543-3995
Provider Gender: Female
License number: 20A9180
NPI: 1467668053
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LAW, NANCY

Provider ID: 117545
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222

Provider Gender: Female
License number: 20A15618
NPI: 1225327349
Provider English Spoken: Yes
Provider Language(s) Spoken:
Mandarin
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LETENDRE, SCOTT L

Provider ID: 64599
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (619) 543-3995
Fax:
After Hours Phone: (619)
543-3995
Provider Gender: Male
License number: A63591
NPI: 1588696660
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hours: M-F 8AM-5PM, SA
9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

LEWINSKI, MARY K

Provider ID: 114987

Board Certified Specialty: No
FAMILY HLTH CTR SD
HILLCREST

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2545

Fax:

After Hours Phone: (619)
515-2545

Provider Gender: Female

License number: A109633

NPI: 1659535094

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-TH 8AM-9PM, F
8AM-5PM, SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Family Hlth Ctr
Sd Hillcrest

IPA:

LITTLE, SUSAN J

Provider ID: 64601

Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST

SAN DIEGO, CA 92103-2030

Phone: (619) 543-6146

Fax: (619) 298-0177

After Hours Phone: (619)
543-6146

Provider Gender: Female

License number: G70574

NPI: 1033134572

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA
9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

LIU, GEORGE Y

Provider ID: 208185

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3030 CHILDRENS WAY FL 2S
SAN DIEGO, CA 92123-4232

Phone: (885) 966-7785

Fax:

After Hours Phone: (885)
966-7785

Provider Gender: Male

License number: A70228

NPI: 1699727321

Provider English Spoken: Yes

Provider Language(s) Spoken:
Chinese

Cultural Competency: No

Hospital Affiliation: Cedars Sinai
Medical Center, Rady Childrens
Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

MARTIN, THOMAS C

Provider ID: 277225

Board Certified Specialty: No
UCSD MEDICAL GROUP

4168 FRONT ST FL 3

SAN DIEGO, CA 92103-2030

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

License number: A155619

NPI: 1093193583

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

MARTIN, THOMAS C

Provider ID: 277226

Board Certified Specialty: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A155619
NPI: 1093193583
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MOODLEY, AMARAN

Provider ID: 208558
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123-4232
Phone: (885) 966-7785
Fax: (858) 966-8658
After Hours Phone: (885)
966-7785
Provider Gender: Male
License number: A108369
NPI: 1104023670
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:

Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

PROMER, KATHERINE E

Provider ID: 258545
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST FL 3
SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A131952
NPI: 1306280607
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

RAJAGOPAL, AMUTHA V

Provider ID: 221088
Board Certified Specialty: No

UCSD MEDICAL GROUP
4168 FRONT ST FL 3
SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A135167
NPI: 1124465745
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

RAMCHANDAR, NANDA

Provider ID: 285942
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123-4232
Phone: (858) 966-7785
Fax: (858) 966-8658
After Hours Phone: (858)
966-7785
Provider Gender: Male
License number: A154225
NPI: 1477998912
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: No
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

RAWLINGS, STEPHEN A

Provider ID: 284363
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A146123
 NPI: 1861888984
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

RAWLINGS, STEPHEN A

Provider ID: 284364
 Board Certified Specialty: No

UCSD MEDICAL GROUP
 4168 FRONT ST FL 3
 SAN DIEGO, CA 92103-2030
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A146123
 NPI: 1861888984
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

REED, SHARON L

Provider ID: 64632
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST FL 3
 SAN DIEGO, CA 92103-2030
 Phone: (619) 543-6146
 Fax:
 After Hours Phone: (619) 543-6146
 Provider Gender: Female
 License number: G40122
 NPI: 1710902044
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr

Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

RITTER, MICHELE L

Provider ID: 64637
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
 Phone: (619) 543-6248
 Fax:
 After Hours Phone: (619) 543-6248
 Provider Gender: Female
 License number: A112536
 NPI: 1225262975
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

SAWYER, MARK H

Provider ID: 206240
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH

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D. Directorio de proveedores de atención especializada

NETWORK

3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123-4232

Phone: (858) 966-7785

Fax: (858) 966-7466

After Hours Phone: (858)

966-7785

Provider Gender: Male

License number: G46156

NPI: 1477624229

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Sharp Memorial Hospital, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

TOVAR PADUA, LEIDY J

Provider ID: 205357

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

3030 CHILDRENS WAY FL 2

SAN DIEGO, CA 92123-4232

Phone: (858) 966-7785

Fax: (858) 966-8658

After Hours Phone: (858)

966-7785

Provider Gender: Female

License number: A130894

NPI: 1033491311

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Childrens Hosp Of Los Angeles,

Long Beach Memorial Med Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/99

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

TOVAR PADUA, LEIDY J

Provider ID: 265093

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-8800

Fax: (858) 966-7433

After Hours Phone: (858)

966-8800

Provider Gender: Female

License number: A130894

NPI: 1033491311

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Childrens Hosp Of Los Angeles,

Long Beach Memorial Med Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/99

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

WAGNER, GABRIEL A

Provider ID: 102090

Board Certified Specialty: No

UCSD MEDICAL GROUP

4168 FRONT ST

SAN DIEGO, CA 92103-2030

Phone: (619) 543-3995

Fax: (619) 543-7841

After Hours Phone: (619)

543-3995

Provider Gender: Male

License number: A108967

NPI: 1992962245

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

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

9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

INTERNAL MEDICINE CRITICAL CARE MEDICINE

BEGOVIC, ADNAN

Provider ID: 210825

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

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D. Directorio de proveedores de atención especializada

SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A79574
NPI: 1093791014
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Scripps Memorial Hospital, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BEGOVIC, ADNAN

Provider ID: 276290
Board Certified Specialty: No
UCSD MEDICAL GROUP
555 WASHINGTON ST
SAN DIEGO, CA 92103-2289
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A79574
NPI: 1093791014
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical

Ctr, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Scripps Memorial Hospital, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BEGOVIC, ADNAN

Provider ID: 276291
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR # 3-313
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A79574
NPI: 1093791014
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Scripps Memorial Hospital, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Ucsd Medical Group

BENCHEQROUN, HASSAN K

Provider ID: 238851
Board Certified Specialty: No
HEALTH EXCEL IPA INC
501 WASHINGTON ST STE 735
SAN DIEGO, CA 92103-2241
Phone: (760) 618-1353
Fax:
After Hours Phone: (760) 618-1353
Provider Gender: Male
License number: A112435
NPI: 1174786594
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, French, Spanish
Cultural Competency: No
Hospital Affiliation: Desert Regional Med Ctr, Alvarado Hospital Llc, Riverside Community Hosp, Parkview Community Hospital Medical Center, Corona Regional Med Ctr, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Vibra Hospital Of San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 18/105
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

BOROK, ZEA

Provider ID: 284704
Board Certified Specialty: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

UCSD MEDICAL GROUP
4520 EXECUTIVE DR STE P2
SAN DIEGO, CA 92121-3028
Phone: (800) 926-5273
Fax: (888) 539-8781
After Hours Phone: (800)
926-5273
Provider Gender: Female
License number: A47911
NPI: 1750317251
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hebrew
Cultural Competency: No
Hospital Affiliation: Ronald
Reagan UCLA Med Ctr, Lac Usc
Medical Center, Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BOROK, ZEA

Provider ID: 284706
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-5273
Fax: (888) 539-8781
After Hours Phone: (800)
926-5273
Provider Gender: Female
License number: A47911
NPI: 1750317251
Provider English Spoken: Yes
Provider Language(s) Spoken:

Hebrew
Cultural Competency: No
Hospital Affiliation: Ronald
Reagan UCLA Med Ctr, Lac Usc
Medical Center, Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BOROK, ZEA

Provider ID: 284706
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (800) 926-5273
Fax: (888) 539-8781
After Hours Phone: (800)
926-5273
Provider Gender: Female
License number: A47911
NPI: 1750317251
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hebrew
Cultural Competency: No
Hospital Affiliation: Ronald
Reagan UCLA Med Ctr, Lac Usc
Medical Center, Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CHRISTMAN, JAMESINA C

Provider ID: 259978
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858)
966-8800
Provider Gender: Female
License number: A93574
NPI: 1538372032
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Childrens
Hosp Of Los Angeles, Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/99
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

CHRISTMAN, JAMESINA C

Provider ID: 259980
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
4305 UNIVERSITY AVE STE
150

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

SAN DIEGO, CA 92105-1690
Phone: (619) 280-2905
Fax: (619) 283-1614
After Hours Phone: (619) 280-2905
Provider Gender: Female
License number: A93574
NPI: 1538372032
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Childrens Hosp Of Los Angeles, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/99
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

ODISH, MAZEN F

Provider ID: 271466
Board Certified Specialty: No
UCSD MEDICAL GROUP
4520 EXECUTIVE DR STE P2
SAN DIEGO, CA 92121-3028
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A133179
NPI: 1992141428
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr

Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

ODISH, MAZEN F

Provider ID: 271467
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A133179
NPI: 1992141428
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

ODISH, MAZEN F

Provider ID: 271469
Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A133179
NPI: 1992141428
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

TRAN, LINH N

Provider ID: 271939
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A122603
NPI: 1851682728
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr, Southwest

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Healthcare System Murrieta
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

Provider ID: 63814
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Male
License number: G50358
NPI: 1669498630

Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Ucsd Medical Group

INTERNAL MEDICINE GERIATRIC MEDICINE

AGNIHOTRI, PARAG

Provider ID: 247292
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: C52218
NPI: 1447351085
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Mercy
General Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Riverside
Community Hosp, Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

YOURMAN, LINDSEY C

Provider ID: 124823
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Female
License number: A122839
NPI: 1174813943
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GUTIERREZ, AIREEN L

Provider ID: 247325
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A77031
NPI: 1306857701
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Tagalog

BOULAND, DANIEL L

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

INTERNAL MEDICINE	<i>Provider Language(s) Spoken:</i>	<i>IPA:</i>
<p>ABDELMALEK, JOSEPH A <i>Provider ID:</i> 63765 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 <i>Phone:</i> (619) 471-9186 <i>Fax:</i> <i>After Hours Phone:</i> (619) 471-9186 <i>Provider Gender:</i> Male <i>License number:</i> A107185 <i>NPI:</i> 1740485531 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☞ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>	<p><i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☞ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>	<p>ALLY, MARYANN T <i>Provider ID:</i> 116564 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 <i>Phone:</i> (619) 471-9186 <i>Fax:</i> <i>After Hours Phone:</i> (619) 471-9186 <i>Provider Gender:</i> Female <i>License number:</i> C146011 <i>NPI:</i> 1316104359 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☞ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>
<p>ABELES, SHIRA R <i>Provider ID:</i> 83076 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 <i>Phone:</i> (619) 543-6222 <i>Fax:</i> <i>After Hours Phone:</i> (619) 543-6222 <i>Provider Gender:</i> Female <i>License number:</i> A103260 <i>NPI:</i> 1720240625 <i>Provider English Spoken:</i> Yes</p>	<p>ALASSIL, SALLY <i>Provider ID:</i> 124640 <i>Board Certified Specialty:</i> No LOGAN HEIGHTS FAMILY HEALTH CENTER 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Provider Gender:</i> Female <i>License number:</i> A122238 <i>NPI:</i> 1982044483 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☞ <i>Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medical Group(s):</i> Logan Heights Family Health Center</p>	<p>AMIRREZVANI, ALI <i>Provider ID:</i> 63781 <i>Board Certified Specialty:</i> No UCSD DEPARTMENT OF MED 200 W ARBOR DR SAN DIEGO, CA 92103-1911 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Male <i>License number:</i> G88284 <i>NPI:</i> 1861485005</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ANTONUCCI, STEPHEN A

Provider ID: 113895
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A143234
NPI: 1124331426
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA:
ARUTYUNOV, BORIS S
Provider ID: 201910
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 471-9186
Fax:
After Hours Phone: (619) 471-9186
Provider Gender: Male
License number: A137892
NPI: 1144562703
Provider English Spoken: Yes
Provider Language(s) Spoken:

Russian
Cultural Competency: No
Hospital Affiliation: Good Samaritan Hospital, Good Samaritan Hospital Los Angeles, Sutter Medical Center Sacramento, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

ASUDANI, DEEPAK G

Provider ID: 63785
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222
Fax: (619) 543-8255
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A100515
NPI: 1548208812
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BAJWA, JASWINDER P

Provider ID: 63791
Board Certified Specialty: Yes
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax: (619) 543-8255
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A118049
NPI: 1306000922
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Punjabi
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BAZICK, JESSICA G

Provider ID: 63801
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A121356
NPI: 1114155082
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BEGOVIC, ADNAN

Provider ID: 63803
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A79574
NPI: 1093791014
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Southwest Healthcare
System Wildomar, Southwest
Healthcare System Murrieta,
Scripps Memorial Hospital, Ucsd
La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BEHREND, TERRY L , MD

Provider ID: 244798
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
7910 FROST ST STE 220
SAN DIEGO, CA 92123-2781
Phone: (858) 637-4700
Fax: (858) 637-4701
After Hours Phone: (858)
637-4700
Provider Gender: Male
License number: A75812
NPI: 1790780484
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital

Medi-Cal Open Panel: Yes
Min/Max Age: 18/120
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

BELL, JOHN F

Provider ID: 63805
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax: (619) 543-8255
After Hours Phone: (619)
543-6222
Provider Gender: Male
License number: A120667
NPI: 1699978445
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BIRGERSDOTTER GREEN, ULRIKA M

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider ID: 64534
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (619) 543-5743
Fax: (619) 543-2917
After Hours Phone: (619) 543-5743
Provider Gender: Female
License number: A49525
NPI: 1851349757
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BLUESTEIN, HARRY G

Provider ID: 64538
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (619) 543-6248
Fax:
After Hours Phone: (619) 543-6248
Provider Gender: Male
License number: G20053
NPI: 1295793024
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BORDIN-WOSK, TALYA S

Provider ID: 273983
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (760) 471-9186
Fax: (619) 543-8255
After Hours Phone: (760) 471-9186
Provider Gender: Female
License number: A123772
NPI: 1801184973
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BROWNE, SARA H

Provider ID: 64540
Board Certified Specialty: No

UCSD MEDICAL GROUP
4168 FRONT ST FL 3
SAN DIEGO, CA 92103-2030
Phone: (858) 657-8000
Fax:
After Hours Phone: (858) 657-8000
Provider Gender: Female
License number: A51877
NPI: 1275571176
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CALDERON MOLINA, JUAN S , MD

Provider ID: 270710
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9610 GRANITE RIDGE DR STE B
SAN DIEGO, CA 92123-2684
Phone: (619) 475-4900
Fax: (619) 475-8373
After Hours Phone: (619) 475-4900
Provider Gender: Male
License number: C143845
NPI: 1366626467
Provider English Spoken: Yes
Provider Language(s) Spoken: German, Spanish, Tagalog
Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Sharp Chula Vista Med Ctr, Paradise Valley Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

CAPERNA, JOSEPH C

Provider ID: 63155

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222

Fax: (858) 822-5362

After Hours Phone: (619)

543-6222

Provider Gender: Male

License number: A49951

NPI: 1720141153

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

CARLIN, AARON F

Provider ID: 83255

Board Certified Specialty: Yes

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 471-9186

Fax:

After Hours Phone: (619)

471-9186

Provider Gender: Male

License number: A115480

NPI: 1760718035

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

CHACE, CONSTANCE R

Provider ID: 117244

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 471-9186

Fax:

After Hours Phone: (619)

471-9186

Provider Gender: Female

License number: A129086

NPI: 1154682953

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

CHANG, JOHN T

Provider ID: 63841

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222

Fax: (858) 822-7652

After Hours Phone: (619)

543-6222

Provider Gender: Male

License number: A110350

NPI: 1265594527

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

CHENG, GEORGE Z

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider ID: 247639
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273

Fax:
After Hours Phone: (800)
926-8273

Provider Gender: Male
License number: A166013
NPI: 1316174568
Provider English Spoken: Yes
Provider Language(s) Spoken:
Chinese

Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CHEN, CHUNG-JIAH J

Provider ID: 272667
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273

Fax: (888) 539-8781
After Hours Phone: (800)
926-8273

Provider Gender: Male
License number: A158441
NPI: 1548792377
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr

Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No

Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Ucsd Medical Group

CHOE, CHARLES H

Provider ID: 64549
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (649) 543-6303

Fax: (619) 543-7352
After Hours Phone: (649)
543-6303

Provider Gender: Male
License number: A77451
NPI: 1891733846
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:

Email:
Medical Group(s):
IPA:

CHONGKRAIRATANAKUL, TEPSIRI

Provider ID: 213779
Board Certified Specialty: Yes
HEALTH EXCEL IPA INC
8010 FROST ST STE 510
SAN DIEGO, CA 92123-4284
Phone: (858) 637-4700

Fax: (858) 637-4701
After Hours Phone: (858)
637-4700

Provider Gender: Male
License number: C157995
NPI: 1982806329
Provider English Spoken: Yes
Provider Language(s) Spoken:
Thai

Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No

Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

CHONGKRAIRATANAKUL, TEPSIRI, MD

Provider ID: 269868
Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC
8010 FROST ST STE 510
SAN DIEGO, CA 92123-4284
Phone: (858) 637-4700

Fax: (858) 637-4701
After Hours Phone: (858)
637-4700

Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: C157995
NPI: 1982806329
Provider English Spoken: Yes
Provider Language(s) Spoken:
Thai
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

CHOUERI, MICHEL B

Provider ID: 113618
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 471-9186
Fax: (619) 543-8255
After Hours Phone: (619)
471-9186
Provider Gender: Male
License number: A117112
NPI: 1780991869
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA:
CLARK, SAMUEL J
Provider ID: 213456
Board Certified Specialty: No
HEALTH EXCEL IPA INC
5471 KEARNY VILLA RD STE
202
SAN DIEGO, CA 92123-1141
Phone: (619) 299-6299
Fax: (619) 299-6222
After Hours Phone: (619)
299-6299
Provider Gender: Male
License number: A52335
NPI: 1689611709
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Sharp
Coronado Hosp And Healthcare
Ctr, Sharp Mary Birch Hosp For
Women And Newborns, Sharp
Chula Vista Med Ctr, Kindred
Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Sharp
Coronado Hosp And Healthcare
Ctr, Sharp Mary Birch Hosp For
Women And Newborns, Sharp
Chula Vista Med Ctr, Kindred
Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

CLAY, BRIAN J

Provider ID: 63856
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR

SAN DIEGO, CA 92103-1911
Phone: (619) 471-9198
Fax:
After Hours Phone: (619)
471-9198
Provider Gender: Male
License number: A83799
NPI: 1831124635
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

DAVIS, JASON T

Provider ID: 214288
Board Certified Specialty: No
HEALTH EXCEL IPA INC
4060 4TH AVE STE 220
SAN DIEGO, CA 92103-2120
Phone: (619) 299-2350
Fax: (619) 297-8379
After Hours Phone: (619)
299-2350
Provider Gender: Male
License number: A100799
NPI: 1295911469
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital Chula Vista, Sharp
Coronado Hosp And Healthcare
Ctr, Sharp Memorial Hospital,
Kindred Hospital San Diego,

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D. Directorio de proveedores de atención especializada

Scripps Mercy Hospital, Vibra
Hospital Of San Diego,
Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/120
American Sign Language (ASL):
No

♿ *Accessibility:* P, IB, E
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

DAVIS, JASON T

Provider ID: 214289
Board Certified Specialty: No
HEALTH EXCEL IPA INC
8010 FROST ST STE 510
SAN DIEGO, CA 92123-4284
Phone: (858) 637-4800
Fax: (858) 637-4801
After Hours Phone: (858)
637-4800
Provider Gender: Male
License number: A100799
NPI: 1295911469
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital Chula Vista, Sharp
Coronado Hosp And Healthcare
Ctr, Sharp Memorial Hospital,
Kindred Hospital San Diego,
Scripps Mercy Hospital, Vibra
Hospital Of San Diego,
Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/120
American Sign Language (ASL):

No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

DAVIS, JASON T , MD

Provider ID: 270967
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
7910 FROST ST STE 250
SAN DIEGO, CA 92123-2752
Phone: (858) 637-4800
Fax: (858) 637-4801
After Hours Phone: (858)
637-4800
Provider Gender: Male
License number: A100799
NPI: 1295911469
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital Chula Vista, Sharp
Coronado Hosp And Healthcare
Ctr, Sharp Memorial Hospital,
Kindred Hospital San Diego,
Scripps Mercy Hospital, Vibra
Hospital Of San Diego,
Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

DAVIS, JASON T , MD

Provider ID: 80404
Board Certified Specialty: No
BALBOA NEPHROLOGY MED
GRP INC
4060 4TH AVE STE 220
SAN DIEGO, CA 92103-2120
Phone: (619) 299-2350
Fax: (619) 297-8379
After Hours Phone: (619)
299-2350
Provider Gender: Male
License number: A100799
NPI: 1295911469
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital Chula Vista, Sharp
Coronado Hosp And Healthcare
Ctr, Sharp Memorial Hospital,
Kindred Hospital San Diego,
Scripps Mercy Hospital, Vibra
Hospital Of San Diego,
Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/120
American Sign Language (ASL):
No
♿ *Accessibility:* P, IB, E
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

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D. Directorio de proveedores de atención especializada

DUGAN, JASON A

Provider ID: 278374
Board Certified Specialty: No
HEALTH EXCEL IPA INC
10251 VISTA SORRENTO
PKWY # 28
SAN DIEGO, CA 92121-3774
Phone: (818) 575-6351
Fax: (289) 236-3022
After Hours Phone: (818)
575-6351
Provider Gender: Male
License number: A120759
NPI: 1750641874
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: 50/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

EISENBERG, STEVEN G

Provider ID: 68214
Board Certified Specialty: No
CALIFORNIA CANCER
ASSOCS FOR RESEARCH AND
EXCELL
16918 DOVE CANYON RD STE
103
SAN DIEGO, CA 92127-3455
Phone: (858) 649-5100
Fax:
After Hours Phone: (858)
649-5100
Provider Gender: Male

License number: 20A8293
NPI: 1831162627
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

EL KAREH, ROBERT E

Provider ID: 63891
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 471-9185
Fax: (619) 543-8255
After Hours Phone: (619)
471-9185
Provider Gender: Male
License number: A112957
NPI: 1497944656
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FARKHONDEHPOUR, MOHAMMAD A

Provider ID: 115440
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Male
License number: A134730
NPI: 1265876890
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FIRESTEIN, CATHERINE E

Provider ID: 110393
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911

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D. Directorio de proveedores de atención especializada

<p>Phone: (619) 543-6222 Fax: After Hours Phone: (619) 543-6222 Provider Gender: Female License number: A143013 NPI: 1427348382 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group</p>	<p>No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:</p>	<p>UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 Phone: (800) 926-8273 Fax: (888) 539-8781 After Hours Phone: (800) 926-8273 Provider Gender: Female License number: A105308 NPI: 1104004258 Provider English Spoken: Yes Provider Language(s) Spoken: Russian Cultural Competency: No Hospital Affiliation: Pomerado Hospital, Palomar Medical Center, Hoag Memorial Hospital Presbyterian, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: Yes Min/Max Age: 18/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group</p>
<p>FREDERICK, WILLIAM J Provider ID: 83441 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 Phone: (619) 471-9186 Fax: (619) 543-8255 After Hours Phone: (619) 471-9186 Provider Gender: Male License number: A123614 NPI: 1841592805 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL):</p>	<p>GANDHI, NIKHIL R Provider ID: 63912 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 Phone: (800) 926-8273 Fax: After Hours Phone: (800) 926-8273 Provider Gender: Male License number: A81799 NPI: 1609934538 Provider English Spoken: Yes Provider Language(s) Spoken: Gujarati, Hindi Cultural Competency: No Hospital Affiliation: Sharp Memorial Hospital, Vibra Hospital Of San Diego, Ucsd Medical Ctr, Alvarado Hospital Llc, Scripps Memorial Hospital, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:</p>	<p>GRUNVALD, EDUARDO L Provider ID: 127696 Board Certified Specialty: No UCSD MEDICAL GROUP 4520 EXECUTIVE DR STE 111 SAN DIEGO, CA 92121-3019 Phone: (800) 926-8273 Fax: After Hours Phone: (800) 926-8273 Provider Gender: Male License number: A65336 NPI: 1497791339 Provider English Spoken: Yes</p>
<p>GELBERG, ANNA Provider ID: 285638 Board Certified Specialty: No</p>	<p>GELBERG, ANNA Provider ID: 285638 Board Certified Specialty: No</p>	

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D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HAMMES, JOHN S

Provider ID: 214243
Board Certified Specialty: No
HEALTH EXCEL IPA INC
4060 4TH AVE STE 220
SAN DIEGO, CA 92103-2120
Phone: (619) 299-2350
Fax: (619) 297-8379
After Hours Phone: (619) 299-2350
Provider Gender: Male
License number: G84351
NPI: 1891766994
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Sharp Coronado Hosp And Healthcare Ctr, Kindred Hospital San Diego, Vibra Hospital Of San Diego, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/120
American Sign Language (ASL): No
♿ Accessibility: P, IB, E
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd
HAZELBAKER, PAUL N
Provider ID: 109909
Board Certified Specialty: No
DOWNTOWN FAMILY CTR AT CONNECTIONS
1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
Phone: (619) 515-2430
Fax:
After Hours Phone: (619) 515-2430
Provider Gender: Male
License number: 20A7147
NPI: 1831106103
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Downtown Family Ctr At Connections
IPA:

HILL, DEANNA L
Provider ID: 64320
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 400
SAN DIEGO, CA 92103-2108
Phone: (619) 471-9260
Fax:
After Hours Phone: (619) 471-9260
Provider Gender: Female
License number: A101349
NPI: 1417194614
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Santa Monica Ucla Med Ctr, Ronald Reagan Ucla

HENDERSON, PHILIP L
Provider ID: 121132
Board Certified Specialty: No
FAMILY HLTH CTR SD
HILLCREST
4094 4TH AVE

SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619) 515-2545
Provider Gender: Male
License number: A140324
NPI: 1447678834
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Family Hlth Ctr Sd Hillcrest
IPA:

HILL, DEANNA L
Provider ID: 64320
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 400
SAN DIEGO, CA 92103-2108
Phone: (619) 471-9260
Fax:
After Hours Phone: (619) 471-9260
Provider Gender: Female
License number: A101349
NPI: 1417194614
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Santa Monica Ucla Med Ctr, Ronald Reagan Ucla

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D. Directorio de proveedores de atención especializada

Med Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HOGARTH, MICHAEL A

Provider ID: 214386
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A51060
NPI: 1225019193
Provider English Spoken: Yes
Provider Language(s) Spoken:
Portuguese, Spanish
Cultural Competency: No
Hospital Affiliation: Uc Davis
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HUANG, BRYAN J

Provider ID: 63970
Board Certified Specialty: No

UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Male
License number: A87875
NPI: 1881652394
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

JABBOUR, MOUSSA

Provider ID: 256659
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A148314
NPI: 1255741633
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd

Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

JASSAL, SIMERJOT K

Provider ID: 103183
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 471-9186
Fax:
After Hours Phone: (619)
471-9186
Provider Gender: Female
License number: A70679
NPI: 1689698052
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

JENKINS, IAN H

Provider ID: 63983
Board Certified Specialty: No
UCSD MEDICAL GROUP

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D. Directorio de proveedores de atención especializada

200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 471-9198
Fax:
After Hours Phone: (619)
471-9198
Provider Gender: Male
License number: A87009
NPI: 1992762520
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KAFI, AARYA

Provider ID: 271608
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A123008
NPI: 1255612339
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Cedars Sinai
Medical Center, Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KAFI, AARYA

Provider ID: 271609
Board Certified Specialty: No
UCSD MEDICAL GROUP
4520 EXECUTIVE DR STE P2
SAN DIEGO, CA 92121-3028
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A123008
NPI: 1255612339

Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Cedars Sinai
Medical Center, Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KAFI, AARYA

Provider ID: 271610

Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A123008
NPI: 1255612339
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Cedars Sinai
Medical Center, Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KAHN, ANDREW M

Provider ID: 63985
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR # 1505
SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619)
543-2218
Provider Gender: Male
License number: A78646
NPI: 1841247384
Provider English Spoken: Yes
Provider Language(s) Spoken:

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D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KAHN, ANDREW M

Provider ID: 64332
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240
Fax:
After Hours Phone: (619) 471-9240
Provider Gender: Male
License number: A78646
NPI: 1841247384
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KALUNIAN, KENNETH C
Provider ID: 64580
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (619) 543-6248
Fax: (619) 543-3511
After Hours Phone: (619) 543-6248
Provider Gender: Male
License number: G43645
NPI: 1346269990
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KARL, BETHANY E
Provider ID: 83646
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 471-9186
Fax: (858) 543-8255
After Hours Phone: (619) 471-9186
Provider Gender: Female
License number: 20A10783
NPI: 1790980472
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KATZ, YISRAEL

Provider ID: 272936
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A158910
NPI: 1730507872
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KHALID, SHAFI M

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider ID: 125346
Board Certified Specialty: No
SAN DIEGO PAIN
CONSULTANTS PROF CORP
5850 OBERLIN DR STE 100
SAN DIEGO, CA 92121-4710
Phone: (858) 485-1523
Fax:
After Hours Phone: (858)
485-1523
Provider Gender: Male
License number: C51093
NPI: 1750343760
Provider English Spoken: Yes
Provider Language(s) Spoken:
Bengali, Farsi, Spanish, Tagalog,
Urdu
Cultural Competency: No
Hospital Affiliation: Pomerado
Hospital, Palomar Medical
Center
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website: www.sdpain.org
Email:
Medical Group(s):
IPA:

KLINE, LAWRENCE E
Provider ID: 118395
Board Certified Specialty: No
UCSD MEDICAL GROUP
4520 EXECUTIVE DR # 1
SAN DIEGO, CA 92121-3018
Phone: (619) 543-6312
Fax:
After Hours Phone: (619)
543-6312
Provider Gender: Male
License number: 20A3294
NPI: 1730140278

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton, Scripps Green
Hospital, Scripps Memorial
Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KOMSOUKANIANTS, ARKADY
Provider ID: 116695
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 471-9186
Fax:
After Hours Phone: (619)
471-9186
Provider Gender: Male
License number: A139258
NPI: 1720498959

Provider English Spoken: Yes
Provider Language(s) Spoken:
Russian
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA:
KOOLA, JEJO D
Provider ID: 111071
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 471-9186
Fax:
After Hours Phone: (619)
471-9186
Provider Gender: Male
License number: A122014
NPI: 1073775532
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KRIJGER, LISA C
Provider ID: 124279
Board Certified Specialty: No
IHP ST VINCENT DE PAUL
VILLAGE
1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638
Phone: (619) 233-8500
Fax:
After Hours Phone: (619)
233-8500
Provider Gender: Female
License number: A67762

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1932278710
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-F 8AM-5:30PM, SA
9AM-5PM
Website:
Email:
Medical Group(s): St Vincent De
Paul Village Family Health
Center
IPA:

KVIATKOVSKY, MILLA J
Provider ID: 274003
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Female
License number: 20A15453
NPI: 1366855355
Provider English Spoken: Yes
Provider Language(s) Spoken:
Finnish, French, Hebrew,
Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KWAK, KEVIN W
Provider ID: 116427
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 471-9186
Fax:
After Hours Phone: (619)
471-9186
Provider Gender: Male
License number: A149375
NPI: 1033538632
Provider English Spoken: Yes
Provider Language(s) Spoken:
Korean
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

**LAGO HERNANDEZ, CARLOS
A**
Provider ID: 238622
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A146029
NPI: 1558756270
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LAM, MICHAEL T
Provider ID: 274410
Board Certified Specialty: No
UCSD MEDICAL GROUP
4520 EXECUTIVE DR STE P2
SAN DIEGO, CA 92121-3028
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A141055
NPI: 1578974259
Provider English Spoken: Yes
Provider Language(s) Spoken:
Mandarin
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>Min/Max Age: 18/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group</p>	<p>SAN DIEGO, CA 92103-2030 Phone: (619) 543-3995 Fax: (619) 543-7841 After Hours Phone: (619) 543-3995 Provider Gender: Male License number: A61630 NPI: 1104876093 Provider English Spoken: Yes Provider Language(s) Spoken: Chinese, Spanish Cultural Competency: No Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-F 8AM-5PM, SA 9AM-5PM Website: Email: Medical Group(s): IPA:</p>	<p>Medical Ctr Medi-Cal Open Panel: Yes Min/Max Age: 18/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group</p>
<p>LAM, MICHAEL T Provider ID: 274411 Board Certified Specialty: No UCSD MEDICAL GROUP 4168 FRONT ST SAN DIEGO, CA 92103-2030 Phone: (800) 926-8273 Fax: (888) 539-8781 After Hours Phone: (800) 926-8273 Provider Gender: Male License number: A141055 NPI: 1578974259 Provider English Spoken: Yes Provider Language(s) Spoken: Mandarin Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr Medi-Cal Open Panel: Yes Min/Max Age: 18/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group</p>	<p>LEVERONE, NICHOLAS A Provider ID: 272692 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 Phone: (800) 926-8273 Fax: (888) 539-8781 After Hours Phone: (800) 926-8273 Provider Gender: Male License number: A159232 NPI: 1407388564 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd</p>	<p>LE, CHARLES N Provider ID: 238373 Board Certified Specialty: No HEALTH EXCEL IPA INC 4440 EUCLID AVE SAN DIEGO, CA 92115-4522 Phone: (619) 521-6812 Fax: (619) 521-6802 After Hours Phone: (619) 521-6812 Provider Gender: Male License number: A124891 NPI: 1821243759 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish, Vietnamese Cultural Competency: No Hospital Affiliation: Sharp Chula Vista Med Ctr, Alvarado Hospital Llc, Paradise Valley Hospital, Vibra Hospital Of San Diego, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Health Excel Ipa Inc</p>
<p>LEE, DANIEL Provider ID: 64596 Board Certified Specialty: No UCSD MEDICAL GROUP 4168 FRONT ST</p>		

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D. Directorio de proveedores de atención especializada

LONERGAN, JOSEPH T

Provider ID: 63158
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (619) 543-3995

Fax:
After Hours Phone: (619)
543-3995

Provider Gender: Male
License number: A55815
NPI: 1962427310

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM

Website:
Email:
Medical Group(s):
IPA:

LOOMBA, ROHIT

Provider ID: 64603
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST FL 2
SAN DIEGO, CA 92103-2030
Phone: (619) 543-5415

Fax:
After Hours Phone: (619)
543-5415

Provider Gender: Male
License number: A98657
NPI: 1578593521

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA:

LUNDE, OTTAR V

Provider ID: 64349
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 400
SAN DIEGO, CA 92103-2108
Phone: (619) 471-9260

Fax:
After Hours Phone: (619)
471-9260

Provider Gender: Male
License number: A97573
NPI: 1932257268

Provider English Spoken: Yes
Provider Language(s) Spoken:
German, Norwegian, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

Accessibility: W
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA:

LUND, GUY L

Provider ID: 214199
Board Certified Specialty: No
HEALTH EXCEL IPA INC
8010 FROST ST STE 510
SAN DIEGO, CA 92123-4284
Phone: (858) 637-4700

Fax: (858) 637-4701
After Hours Phone: (858)
637-4700

Provider Gender: Male
License number: A68839
NPI: 1700859279

Provider English Spoken: Yes
Provider Language(s) Spoken:
Slovak, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital

Medi-Cal Open Panel: Yes
Min/Max Age: 18/120
American Sign Language (ASL):
No

Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

MAJITHIA, AMIT R

Provider ID: 255882
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273

Fax:
After Hours Phone: (800)
926-8273

Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>License number: C158025 NPI: 1801091459 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr Medi-Cal Open Panel: Yes Min/Max Age: 18/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group</p>	<p>American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network</p>	<p>MARTIN, LESLIE M Provider ID: 64065 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 Phone: (619) 543-6222 Fax: After Hours Phone: (619) 543-6222 Provider Gender: Female License number: G79006 NPI: 1306895495 Provider English Spoken: Yes Provider Language(s) Spoken: Yue Chinese Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:</p>
<p>MARC AURELE, KRISHELLE L Provider ID: 118776 Board Certified Specialty: No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 Phone: (858) 966-5841 Fax: After Hours Phone: (858) 966-5841 Provider Gender: Female License number: A99634 NPI: 1952503435 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Tri City Medical Ctr, Scripps Memorial Hospital Medi-Cal Open Panel: No Min/Max Age: None</p>	<p>MARC AURELE, KRISHELLE L Provider ID: 52542 Board Certified Specialty: No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 200 W ARBOR DR SAN DIEGO, CA 92103-1911 Phone: (619) 543-3759 Fax: (619) 543-3812 After Hours Phone: (619) 543-3759 Provider Gender: Female License number: A99634 NPI: 1952503435 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Tri City Medical Ctr, Scripps Memorial Hospital Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network</p>	<p>MCGEHRIN, KEVIN M Provider ID: 256020 Board Certified Specialty: No UCSD MEDICAL GROUP 4520 EXECUTIVE DR SAN DIEGO, CA 92121-3018 Phone: (800) 926-8273 Fax: After Hours Phone: (800) 926-8273 Provider Gender: Male License number: A140783 NPI: 1972913101</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MCGEHRIN, KEVIN M

Provider ID: 256021
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A140783
NPI: 1972913101
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Ucsd Medical Group
MCLNTYRE, JONATHAN S
Provider ID: 117548
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 471-9186
Fax:
After Hours Phone: (619) 471-9186
Provider Gender: Male
License number: A149315
NPI: 1134462211
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MEHDI, HARSHAL S

Provider ID: 117537
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 471-9186
Fax:
After Hours Phone: (619) 471-9186
Provider Gender: Male
License number: A149919
NPI: 1144631359

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MEHTA, GITA

Provider ID: 125321
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 400
SAN DIEGO, CA 92103-2108
Phone: (619) 471-9260
Fax:
After Hours Phone: (619) 471-9260
Provider Gender: Female
License number: A45647
NPI: 1538215264
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Punjabi
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Group(s):

IPA:

MEHTA, HIRSCH S

Provider ID: 82844

Board Certified Specialty: No

SAN DIEGO CARDIAC CTR

MED GRP INC

3131 BERGER AVE STE 200

SAN DIEGO, CA 92123-4203

Phone: (858) 244-6800

Fax: (858) 244-6809

After Hours Phone: (858)

244-6800

Provider Gender: Male

License number: A105910

NPI: 1407099799

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Sharp Chula

Vista Med Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

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

9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

MEHTA, SANJAY R

Provider ID: 64613

Board Certified Specialty: No

UCSD MEDICAL GROUP

4168 FRONT ST FL 3

SAN DIEGO, CA 92103-2030

Phone: (858) 657-8000

Fax:

After Hours Phone: (858)

657-8000

Provider Gender: Male

License number: A89714

NPI: 1437150299

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton, Scripps Memorial

Hospital Encinitas

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

MILLER, RUSSELL J

Provider ID: 122251

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222

Fax:

After Hours Phone: (619)

543-6222

Provider Gender: Male

License number: A108650

NPI: 1619175528

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Green Hospital, Scripps

Memorial Hospital, Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

MIRKARIMI, KAMRON

Provider ID: 212755

Board Certified Specialty: No

HEALTH EXCEL IPA INC

3863 CLAIREMONT DR

SAN DIEGO, CA 92117-5831

Phone: (858) 483-5570

Fax: (858) 626-4604

After Hours Phone: (858)

483-5570

Provider Gender: Male

License number: A105651

NPI: 1497914725

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital, Scripps Mercy Hospital

Chula Vista, Scripps Memorial

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):

No

♿ Accessibility: EB, IB, E

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

MOAZZAM, ALAN A

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider ID: 120032
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 471-9186
Fax:
After Hours Phone: (619)
471-9186
Provider Gender: Male
License number: A121629
NPI: 1811218274
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Huntington
Hospital, Huntington Memorial
Hospital, Ucsd La Jolla John
Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MONTGRAIN, PHILIPPE R
Provider ID: 64096
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Male
License number: A82120
NPI: 1629279997
Provider English Spoken: Yes

Provider Language(s) Spoken:
French
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MOYO, STEVEN C
Provider ID: 110487
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Male
License number: A137142
NPI: 1720354095
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MUNCE, DANIELLE F

Provider ID: 272577
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A152693
NPI: 1740644509
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

NAMAZY, DAVID S
Provider ID: 214330
Board Certified Specialty: No
HEALTH EXCEL IPA INC
6402 EL CAJON BLVD # 102
SAN DIEGO, CA 92115-2645
Phone: (858) 810-8092
Fax: (619) 501-9702
After Hours Phone: (858)
810-8092
Provider Gender: Male
License number: A74630
NPI: 1477558013
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/120

American Sign Language (ASL): No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

NAMAZY, DAVID S , MD

Provider ID: 258027

Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC
7910 FROST ST STE 220
SAN DIEGO, CA 92123-2781

Phone: (858) 637-4700

Fax: (858) 637-4701

After Hours Phone: (858) 637-4700

Provider Gender: Male

License number: A74630

NPI: 1477558013

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 18/120

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

NAMAZY, DAVID S , MD

Provider ID: 258028

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
6402 EL CAJON BLVD # 100
SAN DIEGO, CA 92115-2645

Phone: (619) 582-4490

Fax: (619) 582-4737

After Hours Phone: (619) 582-4490

Provider Gender: Male

License number: A74630

NPI: 1477558013

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 18/120

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

Health Holdings Medical Group-Sd

Health Holdings Medical Group-Sd

Health Holdings Medical Group-Sd

Health Holdings Medical Group-Sd

NGUYEN, KATHERINE H

Provider ID: 279375

Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030

Phone: (619) 250-8300

Fax: (619) 250-8300

After Hours Phone: (619) 250-8300

Provider Gender: Male

License number: G67119

NPI: 1609839299

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Vibra Hospital Of San Diego, Garden Grove Hospital And Medical Center

Medi-Cal Open Panel: No

Min/Max Age: None

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

License number: G79343

NPI: 1356319875

Provider English Spoken: Yes

Provider Language(s) Spoken:

Vietnamese

Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

Ucsd Medical Group

Ucsd Medical Group

Ucsd Medical Group

Ucsd Medical Group

Ucsd Medical Group

Ucsd Medical Group

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Ucsd Medical Group

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

American Sign Language (ASL): 4520 EXECUTIVE DR STE P2
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

NOBARI, MATTHEW M

Provider ID: 119529
Board Certified Specialty: No
UCSD MEDICAL GROUP
4520 EXECUTIVE DR # 2
SAN DIEGO, CA 92121-3018
Phone: (855) 355-5864
Fax:
After Hours Phone: (855)
355-5864
Provider Gender: Male
License number: A145102
NPI: 1619140902
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

NOBARI, MATTHEW M

Provider ID: 242035
Board Certified Specialty: No
UCSD MEDICAL GROUP

4520 EXECUTIVE DR STE P2
SAN DIEGO, CA 92121-3028
Phone: (855) 355-5864
Fax:
After Hours Phone: (855)
355-5864
Provider Gender: Male
License number: A145102
NPI: 1619140902
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

ORR, JEREMY E

Provider ID: 99606
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 471-9186
Fax: (619) 543-8255
After Hours Phone: (619)
471-9186
Provider Gender: Male
License number: A111366
NPI: 1992940969
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Santa Monica
Ucla Med Ctr

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ORR, JEREMY E

Provider ID: 99610
Board Certified Specialty: No
UCSD MEDICAL GROUP
4520 EXECUTIVE DR STE 111
SAN DIEGO, CA 92121-3019
Phone: (858) 355-5864
Fax: (858) 657-6171
After Hours Phone: (858)
355-5864
Provider Gender: Male
License number: A111366
NPI: 1992940969
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Santa Monica
Ucla Med Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

PARDEE, PERRIE E

Provider ID: 101191
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: A123826
NPI: 1578850988
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PATEL, BIJAL V

Provider ID: 257501
Board Certified Specialty: No
BLUE SHIELD PROMISE HEALTH PLAN DIRECT
8010 FROST ST STE 510
SAN DIEGO, CA 92123-4284
Phone: (858) 637-4700
Fax: (858) 637-4701
After Hours Phone: (858) 637-4700
Provider Gender: Male
License number: A74638
NPI: 1639266026
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp

Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

PATEL, KRUTI

Provider ID: 276541
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: C170176
NPI: 1043574262
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

PRATHIPATI, LAKSHMI

Provider ID: 53410
Board Certified Specialty: No
KUMARA PRATHIPATI MD INC
4276 54TH PL STE B
SAN DIEGO, CA 92115-6011
Phone: (619) 286-3222
Fax: (619) 286-3223
After Hours Phone: (619) 286-3222
Provider Gender: Female
License number: A47821
NPI: 1245338490
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog, Telugu
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 9AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

QUARTAROLO, JENNIFER M

Provider ID: 64149
Board Certified Specialty: Yes
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: A96235
NPI: 1841213865

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

QUEVEDO, JUAN M

Provider ID: 252941
Board Certified Specialty: No
HEALTH EXCEL IPA INC
995 GATEWAY CENTER WAY
STE 207
SAN DIEGO, CA 92102-4544
Phone: (619) 263-9729
Fax: (619) 263-9730
After Hours Phone: (619) 263-9729
Provider Gender: Male
License number: A144881
NPI: 1093902496
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 18/99
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

RAISINGHANI, AJIT B

Provider ID: 64630
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (619) 543-6248
Fax:
After Hours Phone: (619) 543-6248
Provider Gender: Male
License number: G75914
NPI: 1831292796
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

RAMOS, PEDRO

Provider ID: 64153
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222
Fax: (619) 543-8255
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A91945
NPI: 1861566366
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

RENARD, AYSEL

Provider ID: 271842
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A169429
NPI: 1225567456
Provider English Spoken: Yes
Provider Language(s) Spoken: Turkish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> Ucsd Medical Group	4725 MARKET ST SAN DIEGO, CA 92102-4715 <i>Phone:</i> (619) 515-2560 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2560 <i>Provider Gender:</i> Female <i>License number:</i> A126958 <i>NPI:</i> 1336346972 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Palomar Medical Center, Scripps Memorial Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medical Group(s):</i> Diamond Neighborhoods Family Hlth Ctrs Inc <i>IPA:</i>	<i>Hospital Affiliation:</i> Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> Ucsd Medical Group
RIES, DAVID C <i>Provider ID:</i> 87181 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 <i>Phone:</i> (619) 471-9186 <i>Fax:</i> (619) 543-8255 <i>After Hours Phone:</i> (619) 471-9186 <i>Provider Gender:</i> Male <i>License number:</i> A127233 <i>NPI:</i> 1376705483 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> Rady Childrens Health Network	SANTOS CAVAIOLA, TRICIA <i>Provider ID:</i> 84769 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 4168 FRONT ST SAN DIEGO, CA 92103-2030 <i>Phone:</i> (619) 543-6248 <i>Fax:</i> <i>After Hours Phone:</i> (619) 543-6248 <i>Provider Gender:</i> Female <i>License number:</i> A108282 <i>NPI:</i> 1518163799 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No	SASAKI, REID A <i>Provider ID:</i> 64182 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 <i>Phone:</i> (619) 543-6222 <i>Fax:</i> (619) 543-8255 <i>After Hours Phone:</i> (619) 543-6222 <i>Provider Gender:</i> Male <i>License number:</i> A112780 <i>NPI:</i> 1972817302 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> Ucsd Medical Group
RIVERA, TANIA L <i>Provider ID:</i> 78921 <i>Board Certified Specialty:</i> No DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC	SCHMICKL, CHRISTOPHER N <i>Provider ID:</i> 127692	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
UCSD MEDICAL GROUP
4520 EXECUTIVE DR STE 111
SAN DIEGO, CA 92121-3019
Phone: (858) 657-8860
Fax:
After Hours Phone: (858)
657-8860
Provider Gender: Male
License number: A155053
NPI: 1720498496
Provider English Spoken: Yes
Provider Language(s) Spoken:
German
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SCHOOLEY, ROBERT T

Provider ID: 64641
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST FL 3
SAN DIEGO, CA 92103-2030
Phone: (858) 657-8000
Fax:
After Hours Phone: (858)
657-8000
Provider Gender: Male
License number: C51865
NPI: 1346298502
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SEBASKY, MEGHAN M

Provider ID: 273962
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax: (619) 543-8255
After Hours Phone: (619)
543-6222
Provider Gender: Female
License number: A114146
NPI: 1538351408
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SEGAR, SANDEEP

Provider ID: 116375
Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Male
License number: A149780
NPI: 1982017067
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SEYMANN, GREGORY B

Provider ID: 64195
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Male
License number: A55150
NPI: 1710920442
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SHAHATTO, LOBNA

Provider ID: 129681
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Female
License number: A117647
NPI: 1477879906
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SHAHATTO, LOBNA

Provider ID: 201324
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR

SAN DIEGO, CA 92103-1911
Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Female
License number: A117647
NPI: 1477879906
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SMITHERMAN, KENTON O

Provider ID: 64208
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: G84563
NPI: 1205888724
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None

American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SMITH, CHELSEY J

Provider ID: 239920
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A126660
NPI: 1013264506
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SMITH, DAVID M

Provider ID: 52340
Board Certified Specialty: No
NORTH PARK FAMILY HEALTH CENTERS
3544 30TH ST

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D. Directorio de proveedores de atención especializada

SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax:
 After Hours Phone: (619) 515-2424
 Provider Gender: Male
 License number: A63610
 NPI: 1609891761
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital, Rady Childrens Hospital San Diego, Scripps Green Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessability: ME
 Hours: M-SA 9AM-5PM
 Website: www.fhcsd.org
 Email:
 Medical Group(s): North Park Family Health Centers
 IPA:

SPECKART, PAUL F

Provider ID: 64652
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
 Phone: (619) 543-6248
 Fax:
 After Hours Phone: (619) 543-6248
 Provider Gender: Male
 License number: C31776
 NPI: 1447346192
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Ucsd

Medical Ctr, Scripps Mercy Hospital
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessability: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

TANTISIRA, LALITA K

Provider ID: 275926
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4520 EXECUTIVE DR
 SAN DIEGO, CA 92121-3018
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: C170095
 NPI: 1508874298
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Thai
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL): No
 Accessability:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

TANTISIRA, LALITA K

Provider ID: 275927

Board Certified Specialty: No
 UCSD MEDICAL GROUP
 16950 VIA TAZON
 SAN DIEGO, CA 92127-1607
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: C170095
 NPI: 1508874298
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Thai
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL): No
 Accessability:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

TAYLOR, DAVID S

Provider ID: 274469
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A169407
 NPI: 1033572995
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally

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D. Directorio de proveedores de atención especializada

<p>Thornton <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 18/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group</p>	<p>SAN DIEGO, CA 92101-4368 <i>Phone:</i> (619) 515-2430 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2430 <i>Provider Gender:</i> Male <i>License number:</i> A137394 <i>NPI:</i> 1659634517 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>	<p>No <i>♿ Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>
<p>THOMAS, ROBERT L <i>Provider ID:</i> 238929 <i>Board Certified Specialty:</i> Yes UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Male <i>License number:</i> A151319 <i>NPI:</i> 1053765909 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 18/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group</p>	<p>VARUGHESE, JAY I <i>Provider ID:</i> 64239 <i>Board Certified Specialty:</i> Yes UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 <i>Phone:</i> (619) 543-6222 <i>Fax:</i> (619) 543-8255 <i>After Hours Phone:</i> (619) 543-6222 <i>Provider Gender:</i> Female <i>License number:</i> A105937 <i>NPI:</i> 1447490230 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>	<p>VODKIN, IRINE E <i>Provider ID:</i> 102009 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 4168 FRONT ST SAN DIEGO, CA 92103-2030 <i>Phone:</i> (619) 543-5415 <i>Fax:</i> <i>After Hours Phone:</i> (619) 543-5415 <i>Provider Gender:</i> Female <i>License number:</i> A113664 <i>NPI:</i> 1861762619 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>
<p>VAFADARAN, ASHKAN <i>Provider ID:</i> 109494 <i>Board Certified Specialty:</i> No DTFHC AT CONNECTIONS 1250 6TH AVE STE 100</p>	<p>VODKIN, IRINE E <i>Provider ID:</i> 102012 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911</p>	

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D. Directorio de proveedores de atención especializada

Phone: (619) 543-5415
Fax:
After Hours Phone: (619) 543-5415
Provider Gender: Female
License number: A113664
NPI: 1861762619
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

VUONG, NHAN D

Provider ID: 117217
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 471-9186
Fax:
After Hours Phone: (619) 471-9186
Provider Gender: Male
License number: A132811
NPI: 1194169573
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:
VYAS, DHWANIL V
Provider ID: 210421
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9610 GRANITE RIDGE DR STE B
SAN DIEGO, CA 92123-2684
Phone: (858) 810-8025
Fax: (858) 268-1911
After Hours Phone: (858) 810-8025
Provider Gender: Male
License number: A125364
NPI: 1295043388
Provider English Spoken: Yes
Provider Language(s) Spoken: Gujarati, Hindi
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/120
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

WANG, ANGELA C

Provider ID: 259534
Board Certified Specialty: No
UCSD MEDICAL GROUP
4520 EXECUTIVE DR STE P2

SAN DIEGO, CA 92121-3028
Phone: (855) 355-5864
Fax: (888) 539-8781
After Hours Phone: (855) 355-5864
Provider Gender: Female
License number: G62974
NPI: 1730133976
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Green Hospital, Scripps Memorial Hospital, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

WANG, ANGELA C

Provider ID: 259535
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: G62974
NPI: 1730133976
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Green Hospital, Scripps Memorial Hospital, Ucsd Medical

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D. Directorio de proveedores de atención especializada

<p>Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 18/999 <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group</p>	<p>UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 <i>Phone:</i> (619) 471-9185 <i>Fax:</i> <i>After Hours Phone:</i> (619) 471-9185 <i>Provider Gender:</i> Female <i>License number:</i> A141944 <i>NPI:</i> 1790128924 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>	<p><i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>
<p>WEBSTER, LUKE A <i>Provider ID:</i> 272681 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Male <i>License number:</i> A159228 <i>NPI:</i> 1235660887 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 18/999 <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group</p>	<p>WITZTUM, JOSEPH L <i>Provider ID:</i> 64664 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 4168 FRONT ST SAN DIEGO, CA 92103-2030 <i>Phone:</i> (619) 543-6248 <i>Fax:</i> <i>After Hours Phone:</i> (619) 543-6248 <i>Provider Gender:</i> Male <i>License number:</i> G29598 <i>NPI:</i> 1699791491 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr</p>	<p>WOOTEN, DARCY A <i>Provider ID:</i> 130066 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 <i>Phone:</i> (619) 471-9186 <i>Fax:</i> (619) 543-8255 <i>After Hours Phone:</i> (619) 471-9186 <i>Provider Gender:</i> Female <i>License number:</i> A114007 <i>NPI:</i> 1538495973 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>
<p>WINTERS, KATHRYN D <i>Provider ID:</i> 115623 <i>Board Certified Specialty:</i> No</p>	<p>WYATT, WENDELL D <i>Provider ID:</i> 255535 <i>Board Certified Specialty:</i> No</p>	<p>WYATT, WENDELL D <i>Provider ID:</i> 255535 <i>Board Certified Specialty:</i> No</p>

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D. Directorio de proveedores de atención especializada

UCSD MEDICAL GROUP
8899 UNIVERSITY CENTER LN
STE 220
SAN DIEGO, CA 92122-1040
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: C136244
NPI: 1316906696
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

YANG, JENNY Z
Provider ID: 283026
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A145538
NPI: 1346636453
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp

Memorial Hospital, Sharp
Coronado Hosp And Healthcare
Ctr, Ucsd Medical Ctr, Ucsd La
Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

YANG, JENNY Z
Provider ID: 283027
Board Certified Specialty: No
UCSD MEDICAL GROUP
4520 EXECUTIVE DR STE P2
SAN DIEGO, CA 92121-3028
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A145538
NPI: 1346636453
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Sharp
Coronado Hosp And Healthcare
Ctr, Ucsd Medical Ctr, Ucsd La
Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Ucsd Medical Group
YOUNG, MAILE A
Provider ID: 64667
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST FL 3
SAN DIEGO, CA 92103-2030
Phone: (858) 657-8000
Fax:
After Hours Phone: (858)
657-8000
Provider Gender: Female
License number: A93568
NPI: 1093904997
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ZARRINPAR, AMIR
Provider ID: 84248
Board Certified Specialty: Yes
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Male
License number: A110886
NPI: 1417110917

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
 Farsi
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ZAYETS, STANISLAV

Provider ID: 123480
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 471-9186
Fax:
After Hours Phone: (619)
 471-9186
Provider Gender: Male
License number: A141681
NPI: 1437313178
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA:
ZHANG, SHERRY S
Provider ID: 272657
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
 926-8273
Provider Gender: Female
License number: A158102
NPI: 1588198147
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Mandarin
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

INTERVENTIONAL CARDIOLOGY

CARLSON, STEVEN K , MD
Provider ID: 244810
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 292 EUCLID AVE STE 210
 SAN DIEGO, CA 92114-3629

Phone: (619) 616-2100
Fax: (619) 616-2104
After Hours Phone: (619)
 616-2100
Provider Gender: Male
License number: A109957
NPI: 1467602946
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Garfield Medical Center, Santa Monica Ucla Med Ctr, Ronald Reagan Ucla Med Ctr, Scripps Mercy Hospital, Sharp Chula Vista Med Ctr, Sharp Memorial Hospital, Alvarado Hospital Llc, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

MOUSSAVIAN, MEHRAN

Provider ID: 114977
Board Certified Specialty: No
 CARDIOVASCULAR INSTITUTE OF SAN DIEGO
 292 EUCLID AVE STE 210
 SAN DIEGO, CA 92114-3629
Phone: (619) 616-2100
Fax: (619) 616-2104
After Hours Phone: (619)
 616-2100
Provider Gender: Male
License number: 20A7241
NPI: 1689788234

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Tri City Medical Ctr, Sharp Memorial Hospital, Alvarado Hospital Llc, Grossmont Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

MOUSSAVIAN, MEHRAN

Provider ID: 126078
Board Certified Specialty: No
 DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 263-2499
Fax:
After Hours Phone: (619) 263-2499
Provider Gender: Male
License number: 20A7241
NPI: 1689788234
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Tri City Medical Ctr, Sharp Memorial Hospital, Alvarado Hospital Llc, Grossmont Hospital

Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:* ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Diamond Neighborhoods Family Hlth Ctrs Inc
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

LICENSED PROFESSIONAL CLINICAL COUNSELOR

NAKAMURA, TIFFANY

Provider ID: 239584
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4510 EXECUTIVE DR STE 315
 SAN DIEGO, CA 92121-3029
Phone: (858) 534-8019
Fax:
After Hours Phone: (858) 534-8019
Provider Gender: Female
License number: LPCC4383
NPI: 1356846349
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MATERNAL AND FETAL MEDICINE

ADAMCZAK, JOANNA E

Provider ID: 205632
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 7910 FROST ST STE 140
 SAN DIEGO, CA 92123-2712
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710

Provider Gender: Female
License number: A116982
NPI: 1447428420

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Tri City Medical Ctr, Sharp Mary Birch Hosp For Women And Newborns
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

ADAMCZAK, JOANNA E

Provider ID: 205633
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 7910 FROST ST STE 430
 SAN DIEGO, CA 92123-2795

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 966-6710
Fax: (885) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: A116982
NPI: 1447428420
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital, Tri City
Medical Ctr, Sharp Mary Birch
Hosp For Women And Newborns
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
⌘ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

ADAMCZAK, JOANNA E

Provider ID: 258901
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3003 HEALTH CENTER DR
SAN DIEGO, CA 92123-2700
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858)
966-6710
Provider Gender: Female
License number: A116982
NPI: 1447428420
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady

Childrens Hospital San Diego, Tri
City Medical Ctr, Sharp Mary
Birch Hosp For Women And
Newborns, Sharp Memorial
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
⌘ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

ADAMCZAK, JOANNA E

Provider ID: 277210
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858)
966-6710
Provider Gender: Female
License number: A116982
NPI: 1447428420
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital, Tri City
Medical Ctr, Sharp Mary Birch
Hosp For Women And Newborns
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
⌘ Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

ADAMI, REBECCA R

Provider ID: 272668
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
7910 FROST ST STE 140
SAN DIEGO, CA 92123-2712
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858)
966-6710
Provider Gender: Female
License number: A149389
NPI: 1992149447
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
⌘ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

ADAMI, REBECCA R

Provider ID: 272669
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
7910 FROST ST STE 430

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D. Directorio de proveedores de atención especializada

SAN DIEGO, CA 92123-2795
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: A149389
NPI: 1992149447
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

ADAMI, REBECCA R

Provider ID: 272670
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3003 HEALTH CENTER DR
SAN DIEGO, CA 92123-2700
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: A149389
NPI: 1992149447
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

ADAMI, REBECCA R

Provider ID: 272674
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
7910 FROST ST # 463
SAN DIEGO, CA 92123-2771
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: A149389
NPI: 1992149447
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Rady Childrens Health Network

ADAMI, REBECCA R

Provider ID: 277179
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: A149389
NPI: 1992149447
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

AHN, JENNIFER T

Provider ID: 273140
Board Certified Specialty: No
HEALTH EXCEL IPA INC
12264 EL CAMINO REAL STE 204
SAN DIEGO, CA 92130-3061

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D. Directorio de proveedores de atención especializada

Phone: (858) 794-7700
 Fax: (858) 794-7744
 After Hours Phone: (858) 794-7700
 Provider Gender: Female
 License number: C160026
 NPI: 1972673879
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Sharp Memorial Hospital, Sharp Mary Birch Hosp For Women And Newborns
 Medi-Cal Open Panel: Yes
 Min/Max Age: 16/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Health Excel Ipa Inc

CASELE, HOLLY L

Provider ID: 205837
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 7910 FROST ST STE 140
 SAN DIEGO, CA 92123-2712
 Phone: (858) 966-6710
 Fax: (858) 966-6711
 After Hours Phone: (858) 966-6710
 Provider Gender: Female
 License number: G87630
 NPI: 1255348744
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Sharp Memorial Hospital, Grossmont Hospital, Tri City Medical Ctr,

Sharp Mary Birch Hosp For Women And Newborns, Scripps Memorial Hospital Encinitas, Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

CASELE, HOLLY L

Provider ID: 205838
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 7910 FROST ST STE 430
 SAN DIEGO, CA 92123-2795
 Phone: (858) 966-6710
 Fax: (858) 966-6711
 After Hours Phone: (858) 966-6710
 Provider Gender: Female
 License number: G87630
 NPI: 1255348744
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Sharp Memorial Hospital, Grossmont Hospital, Tri City Medical Ctr, Sharp Mary Birch Hosp For Women And Newborns, Scripps Memorial Hospital Encinitas, Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):

No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

CASELE, HOLLY L

Provider ID: 258870
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3003 HEALTH CENTER DR
 SAN DIEGO, CA 92123-2700
 Phone: (858) 966-6710
 Fax: (858) 939-4102
 After Hours Phone: (858) 966-6710
 Provider Gender: Female
 License number: G87630
 NPI: 1255348744
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Sharp Memorial Hospital, Grossmont Hospital, Tri City Medical Ctr, Sharp Mary Birch Hosp For Women And Newborns, Scripps Memorial Hospital Encinitas, Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

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D. Directorio de proveedores de atención especializada

CASELE, HOLLY L

Provider ID: 277247

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)
966-6710

Provider Gender: Female

License number: G87630

NPI: 1255348744

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Grossmont Hospital, Tri City Medical Ctr, Sharp Mary Birch Hosp For Women And Newborns, Scripps Memorial Hospital Encinitas, Rady Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

CATANZARITE, VALERIAN A

Provider ID: 205742

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

7910 FROST ST STE 140

SAN DIEGO, CA 92123-2712

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)
966-6710

Provider Gender: Male

License number: G46026

NPI: 1174694939

Provider English Spoken: Yes

Provider Language(s) Spoken:
Russian, Spanish

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Scripps Memorial Hospital, Tri City Medical Ctr, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Grossmont Hospital, Scripps Memorial Hospital Encinitas, Rady Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

CATANZARITE, VALERIAN A

Provider ID: 205744

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

7910 FROST ST STE 430

SAN DIEGO, CA 92123-2795

Phone: (858) 966-6710

Fax: (858) 966-6266

After Hours Phone: (858)
966-6710

Provider Gender: Male

License number: G46026

NPI: 1174694939

Provider English Spoken: Yes

Provider Language(s) Spoken:
Russian, Spanish

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Scripps Memorial Hospital, Tri City Medical Ctr, Southwest

Healthcare System Wildomar,

Southwest Healthcare System

Murrieta, Grossmont Hospital,

Scripps Memorial Hospital

Encinitas, Rady Childrens

Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

CATANZARITE, VALERIAN A

Provider ID: 258850

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3003 HEALTH CENTER DR

SAN DIEGO, CA 92123-2700

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)
966-6710

Provider Gender: Male

License number: G46026

NPI: 1174694939

Provider English Spoken: Yes

Provider Language(s) Spoken:

Russian, Spanish

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Scripps Memorial Hospital, Tri City Medical Ctr, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Grossmont Hospital, Scripps Memorial Hospital Encinitas, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

DOWLING, DAVID D

Provider ID: 127779
Board Certified Specialty: No
HEALTH EXCEL IPA INC
12264 EL CAMINO REAL STE 204
SAN DIEGO, CA 92130-3061
Phone: (858) 794-7700
Fax: (858) 794-7744
After Hours Phone: (858) 794-7700
Provider Gender: Male
License number: G80714
NPI: 1083785844
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999

American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

ESFANDIARI, RAHELEH

Provider ID: 242013
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3003 HEALTH CENTER DR
SAN DIEGO, CA 92123-2700
Phone: (858) 939-3400
Fax: (858) 277-1475
After Hours Phone: (858) 939-3400
Provider Gender: Female
License number: A100932
NPI: 1235320185
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Tri City Medical Ctr, Rady Childrens Hospital San Diego, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

FAKSH, ARIJ

Provider ID: 278440
Board Certified Specialty: No
HEALTH EXCEL IPA INC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608
Phone: (619) 280-7072
Fax: (619) 961-0804
After Hours Phone: (619) 280-7072
Provider Gender: Female
License number: 20A14222
NPI: 1912166737
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Tri City Medical Ctr, Scripps Mercy Hospital, Scripps Green Hospital, Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 12/999
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

GOLLIN, YVONNE G

Provider ID: 127801
Board Certified Specialty: No
HEALTH EXCEL IPA INC
12264 EL CAMINO REAL STE 204
SAN DIEGO, CA 92130-3061
Phone: (858) 794-7700
Fax: (858) 794-7744
After Hours Phone: (858) 794-7700

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Female
License number: G85078
NPI: 1790899300
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Mary Birch Hosp For Women And Newborns, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

LAURENT, LOUISE C

Provider ID: 208640
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A80409
NPI: 1770532707
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Palomar Medical Center, Scripps Memorial

Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MCCULLOUGH, DEIRDRE M

Provider ID: 210032
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
7910 FROST ST STE 140
SAN DIEGO, CA 92123-2712
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: C159758
NPI: 1639153018
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Mary Birch Hosp For Women And Newborns
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MCCULLOUGH, DEIRDRE M

Provider ID: 210033
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
7910 FROST ST STE 430
SAN DIEGO, CA 92123-2795
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: C159758
NPI: 1639153018
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Mary Birch Hosp For Women And Newborns
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MCCULLOUGH, DEIRDRE M

Provider ID: 210034
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3003 HEALTH CENTER DR
SAN DIEGO, CA 92123-2700
Phone: (858) 966-6710
Fax: (858) 939-4102
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: C159758
NPI: 1639153018

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Mary Birch Hosp For Women And Newborns
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MCCULLOUGH, DEIRDRE M

Provider ID: 277260
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: C159758
NPI: 1639153018
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Mary Birch Hosp For Women And Newborns
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Rady Childrens Health Network
MOORE, THOMAS R
Provider ID: 208643
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: G49930
NPI: 1184682379

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MOORE, THOMAS R
Provider ID: 208644
Board Certified Specialty: No
UCSD MEDICAL GROUP
4910 DIRECTORS PL STE 200
SAN DIEGO, CA 92121-3814
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male

License number: G49930
NPI: 1184682379
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

RICHARDSON, ALVIE C

Provider ID: 214434
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
7910 FROST ST STE 140
SAN DIEGO, CA 92123-2712
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Male
License number: C160063
NPI: 1154305977
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

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D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Rady Childrens Health Network

RICHARDSON, ALVIE C

Provider ID: 214435
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
7910 FROST ST STE 430
SAN DIEGO, CA 92123-2795
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Male
License number: C160063
NPI: 1154305977
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

RICHARDSON, ALVIE C

Provider ID: 214436
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3003 HEALTH CENTER DR
SAN DIEGO, CA 92123-2700

Phone: (858) 966-6710
Fax: (858) 939-4102
After Hours Phone: (858) 966-6710
Provider Gender: Male
License number: C160063
NPI: 1154305977
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

RICHARDSON, ALVIE C

Provider ID: 277314
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Male
License number: C160063
NPI: 1154305977
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18

American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

RICHARD, JOHN D

Provider ID: 217176
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3003 HEALTH CENTER DR
SAN DIEGO, CA 92123-2700
Phone: (858) 966-6710
Fax:
After Hours Phone: (858) 966-6710
Provider Gender: Male
License number: A96329
NPI: 1568448116
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Naval Medical Ctr Sd Rbe, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

RICHARD, JOHN D

Provider ID: 217177
Board Certified Specialty: No

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D. Directorio de proveedores de atención especializada

RADY CHILDRENS HEALTH NETWORK
 7910 FROST ST STE 140
 SAN DIEGO, CA 92123-2712
 Phone: (858) 966-6710
 Fax:
 After Hours Phone: (858) 966-6710
 Provider Gender: Male
 License number: A96329
 NPI: 1568448116
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Naval Medical Ctr Sd Rbe, Sharp Memorial Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

SCHWENDEMANN, WADE D
 Provider ID: 205438
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 7910 FROST ST STE 430
 SAN DIEGO, CA 92123-2795
 Phone: (858) 966-6710
 Fax: (858) 966-6711
 After Hours Phone: (858) 966-6710
 Provider Gender: Male
 License number: A109228
 NPI: 1477563302
 Provider English Spoken: Yes
 Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Scripps Memorial Hospital, Grossmont Hospital, Sharp Memorial Hospital, Sharp Mary Birch Hosp For Women And Newborns, Tri City Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SCHWENDEMANN, WADE D
 Provider ID: 205439
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 7910 FROST ST STE 140
 SAN DIEGO, CA 92123-2712
 Phone: (858) 966-6710
 Fax: (858) 966-6711
 After Hours Phone: (858) 966-6710
 Provider Gender: Male
 License number: A109228
 NPI: 1477563302
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Scripps Memorial Hospital, Grossmont Hospital, Sharp Memorial Hospital, Sharp Mary Birch Hosp For Women And Newborns, Tri City Medical Ctr
Medi-Cal Open Panel: Yes

Min/Max Age: 0/18
American Sign Language (ASL): No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SCHWENDEMANN, WADE D
 Provider ID: 277304
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-6710
 Fax: (858) 966-6711
 After Hours Phone: (858) 966-6710
 Provider Gender: Male
 License number: A109228
 NPI: 1477563302
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Scripps Memorial Hospital, Grossmont Hospital, Sharp Memorial Hospital, Sharp Mary Birch Hosp For Women And Newborns, Tri City Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health

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D. Directorio de proveedores de atención especializada

Network

SCHWENDEMANN, WADE D

Provider ID: 277307

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3003 HEALTH CENTER DR
SAN DIEGO, CA 92123-2700

Phone: (858) 966-6710

Fax: (858) 939-4102

After Hours Phone: (858)

966-6710

Provider Gender: Male

License number: A109228

NPI: 1477563302

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Scripps Memorial Hospital,

Grossmont Hospital, Sharp

Memorial Hospital, Sharp Mary

Birch Hosp For Women And

Newborns, Tri City Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

THOMAS, STEVEN J

Provider ID: 209479

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-6600

Fax: (619) 543-5767

After Hours Phone: (619)

543-6600

Provider Gender: Male

License number: A40379

NPI: 1639242589

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Palomar

Health Downtown Campus, Ucsd

Medical Ctr, Scripps Mercy

Hospital, Scripps Mercy Hospital

Chula Vista, Scripps Memorial

Hospital Encinitas, Scripps

Memorial Hospital, Palomar

Medical Center, Ucsd La Jolla

John Sally Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 16/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

TITH, TEVY

Provider ID: 205388

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

7910 FROST ST STE 430

SAN DIEGO, CA 92123-2795

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)

966-6710

Provider Gender: Female

License number: A103521

NPI: 1588816086

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Sharp Memorial Hospital, Tri City

Medical Ctr, Sharp Mary Birch

Hosp For Women And

Newborns, University Of

California Irvine Med Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

TITH, TEVY

Provider ID: 205389

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

7910 FROST ST STE 140

SAN DIEGO, CA 92123-2712

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)

966-6710

Provider Gender: Female

License number: A103521

NPI: 1588816086

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Sharp Memorial Hospital, Tri City

Medical Ctr, Sharp Mary Birch

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D. Directorio de proveedores de atención especializada

Hosp For Women And
Newborns, University Of
California Irvine Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

TITH, TEVY

Provider ID: 262371

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3003 HEALTH CENTER DR
SAN DIEGO, CA 92123-2700

Phone: (858) 966-6710

Fax: (858) 939-4102

After Hours Phone: (858)

966-6710

Provider Gender: Female

License number: A103521

NPI: 1588816086

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital, Tri City
Medical Ctr, Sharp Mary Birch

Hosp For Women And
Newborns, University Of
California Irvine Med Ctr

Medi-Cal Open Panel: Yes
Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

TITH, TEVY

Provider ID: 277325

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)

966-6710

Provider Gender: Female

License number: A103521

NPI: 1588816086

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital, Tri City
Medical Ctr, Sharp Mary Birch

Hosp For Women And
Newborns, University Of
California Irvine Med Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

Network

WESTERMANN, MELISSA L

Provider ID: 242520

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

7910 FROST ST STE 140
SAN DIEGO, CA 92123-2712

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)

966-6710

Provider Gender: Female

License number: A130149

NPI: 1760730758

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp Mary

Birch Hosp For Women And
Newborns, Earl And Lorraine
Miller Childrens Hsp, Long Beach

Memorial Med Ctr, University Of
California Irvine Med Ctr, Sharp
Memorial Hospital, Grossmont
Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

Network

WESTERMANN, MELISSA L

Provider ID: 242521

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

7910 FROST ST STE 430

SAN DIEGO, CA 92123-2795

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>Phone: (858) 966-6710 Fax: (858) 966-6711 After Hours Phone: (858) 966-6710 Provider Gender: Female License number: A130149 NPI: 1760730758 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Sharp Mary Birch Hosp For Women And Newborns, Earl And Lorraine Miller Childrens Hsp, Long Beach Memorial Med Ctr, University Of California Irvine Med Ctr, Sharp Memorial Hospital, Grossmont Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0/18 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network</p>	<p>Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Sharp Mary Birch Hosp For Women And Newborns, Earl And Lorraine Miller Childrens Hsp, Long Beach Memorial Med Ctr, University Of California Irvine Med Ctr, Sharp Memorial Hospital, Grossmont Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0/18 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network</p>	<p>Memorial Hospital, Grossmont Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0/18 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network</p>
<p>WESTERMANN, MELISSA L Provider ID: 242522 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 3003 HEALTH CENTER DR SAN DIEGO, CA 92123-2700 Phone: (858) 966-6710 Fax: (858) 939-4102 After Hours Phone: (858) 966-6710 Provider Gender: Female License number: A130149 NPI: 1760730758 Provider English Spoken: Yes</p>	<p>WESTERMANN, MELISSA L Provider ID: 277353 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 Phone: (858) 966-6710 Fax: (858) 966-6711 After Hours Phone: (858) 966-6710 Provider Gender: Female License number: A130149 NPI: 1760730758 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Sharp Mary Birch Hosp For Women And Newborns, Earl And Lorraine Miller Childrens Hsp, Long Beach Memorial Med Ctr, University Of California Irvine Med Ctr, Sharp</p>	<p>WILLIAMS, KRISTIN M Provider ID: 206229 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 7910 FROST ST STE 430 SAN DIEGO, CA 92123-2795 Phone: (858) 966-6710 Fax: (858) 966-6711 After Hours Phone: (858) 966-6710 Provider Gender: Female License number: A72985 NPI: 1992847131 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Stanford Health Care, Lucile Salter Packard Childrens Hosp, San Mateo Medical Ctr, Sharp Memorial Hospital, Sharp Mary Birch Hosp For Women And Newborns, Tri City Medical Ctr, California Pacific Med Ctr, Rady Childrens Hospital San Diego Medi-Cal Open Panel: Yes Min/Max Age: 0/18 American Sign Language (ASL): No ♿ Accessibility:</p>

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D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

WILLIAMS, KRISTIN M

Provider ID: 206231

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

7910 FROST ST STE 140
SAN DIEGO, CA 92123-2712

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)
966-6710

Provider Gender: Female

License number: A72985

NPI: 1992847131

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Sharp Mary Birch Hosp For Women And

Newborns, Tri City Medical Ctr, California Pacific Med Ctr,

Stanford Health Care, Lucile Salter Packard Childrens Hosp,

San Mateo Medical Ctr, Rady Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

WILLIAMS, KRISTIN M

Provider ID: 277383

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)
966-6710

Provider Gender: Female

License number: A72985

NPI: 1992847131

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Stanford

Health Care, Lucile Salter

Packard Childrens Hosp, San Mateo Medical Ctr, Sharp

Memorial Hospital, Sharp Mary Birch Hosp For Women And

Newborns, Tri City Medical Ctr, California Pacific Med Ctr, Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

WILLIAMS, KRISTIN M

Provider ID: 277387

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3003 HEALTH CENTER DR

SAN DIEGO, CA 92123-2700

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)
966-6710

Provider Gender: Female

License number: A72985

NPI: 1992847131

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Stanford

Health Care, Lucile Salter

Packard Childrens Hosp, San

Mateo Medical Ctr, Sharp

Memorial Hospital, Sharp Mary Birch Hosp For Women And

Newborns, Tri City Medical Ctr,

California Pacific Med Ctr, Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

WOLF, RICHARD B

Provider ID: 209253

Board Certified Specialty: No
UCSD MEDICAL GROUP

4910 DIRECTORS PL STE 200
SAN DIEGO, CA 92121-3814

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: 20A6028

NPI: 1497713846

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Palomar Medical Center, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

NEONATAL / PERINATAL MEDICINE

CARROLL, JEANNE M

Provider ID: 205727
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5818
Fax: (858) 966-7483
After Hours Phone: (858) 966-5818
Provider Gender: Female
License number: A118050
NPI: 1386928224
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego

Medi-Cal Open Panel: Yes
Min/Max Age: 0/0
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CASSEY, LINDSAY E

Provider ID: 270421
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
220 EUCLID AVE STE 30
SAN DIEGO, CA 92114-3617
Phone: (209) 576-3526
Fax:
After Hours Phone: (209) 576-3526
Provider Gender: Female
License number: 20A14218
NPI: 1457762619
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

COHENMEYER, CASEY L

Provider ID: 206102
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5841
Fax: (858) 966-7483
After Hours Phone: (858) 966-5841
Provider Gender: Female
License number: A80114
NPI: 1033286430
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Scripps Memorial Hospital, Southwest Healthcare System Murrieta, Ucsd Medical Ctr, Southwest Healthcare System Wildomar, Scripps Memorial Hospital Encinitas, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/0
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CULWELL, KELLY R

Provider ID: 270475
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
220 EUCLID AVE STE 30
SAN DIEGO, CA 92114-3617
Phone: (916) 734-6925
Fax:
After Hours Phone: (916) 734-6925
Provider Gender: Female
License number: A76983

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1043508377
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Uc Davis
Medical Ctr, Tri City Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

FARRELL, MAUREEN E
Provider ID: 270157
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
2017 1ST AVE STE 201
SAN DIEGO, CA 92101-2033
Phone: (619) 881-4589
Fax:
After Hours Phone: (619)
881-4589
Provider Gender: Female
License number: A82843
NPI: 1508842303
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas,
Sharp Memorial Hospital, Naval
Hsp Camp Pendleton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Community Care Ipa Llc

FLEMING, SARAH E
Provider ID: 205645
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
4077 5TH AVE
SAN DIEGO, CA 92103-2105
Phone: (619) 260-7046
Fax: (619) 686-3843
After Hours Phone: (619)
260-7046
Provider Gender: Female
License number: A89838
NPI: 1679809826

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

GOLEMBESKI, DAVID J
Provider ID: 205892
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
200 W ARBOR DR
SAN DIEGO, CA 92103-1911

Phone: (619) 543-3759
Fax: (619) 543-3812
After Hours Phone: (619)
543-3759
Provider Gender: Male
License number: G63111
NPI: 1376614131
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Palomar Health Downtown
Campus, Scripps Memorial
Hospital Encinitas, Pomerado
Hospital, Southwest Healthcare
System Wildomar, Southwest
Healthcare System Murrieta,
Palomar Medical Center, Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

HONOLD, JOSE A
Provider ID: 205941
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5818
Fax: (858) 966-7483
After Hours Phone: (858)
966-5818
Provider Gender: Male
License number: A51798

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1093886855
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Pioneers Memorial Hospital, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Scripps Mercy Hospital Chula Vista, El Centro Regional Medical Center, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

HONOLD, JOSE A

Provider ID: 242881
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 4077 5TH AVE
 SAN DIEGO, CA 92103-2105
Phone: (619) 691-7000
Fax:
After Hours Phone: (619) 691-7000
Provider Gender: Male
License number: A51798
 NPI: 1093886855
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady

Childrens Hospital San Diego, Pioneers Memorial Hospital, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Scripps Mercy Hospital Chula Vista, El Centro Regional Medical Center, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

HUSKEY, DANA E

Provider ID: 262264
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3003 HEALTH CENTER DR
 SAN DIEGO, CA 92123-2700
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: A99128
 NPI: 1538146337
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Sharp Mary Birch Hosp For Women And Newborns, Palomar Medical Center, Palomar Health Downtown Campus, Pomerado Hospital, Sierra Vista Regional Med Ctr, Rady Childrens Hospital

San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

HUSKEY, DANA E

Provider ID: 262265
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 7910 FROST ST STE 140
 SAN DIEGO, CA 92123-2712
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: A99128
 NPI: 1538146337
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Sharp Mary Birch Hosp For Women And Newborns, Palomar Medical Center, Palomar Health Downtown Campus, Pomerado Hospital, Sierra Vista Regional Med Ctr, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

HUSKEY, DANA E

Provider ID: 262266
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
7910 FROST ST STE 430
SAN DIEGO, CA 92123-2795
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: A99128
NPI: 1538146337
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Sharp Mary Birch Hosp For Women And Newborns, Palomar Medical Center, Palomar Health Downtown Campus, Pomerado Hospital, Sierra Vista Regional Med Ctr, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

KO, KIMBERLY J

Provider ID: 214506
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A77120
NPI: 1437448917
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LANE, BRIAN P

Provider ID: 205707
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5818
Fax: (858) 966-7483
After Hours Phone: (858) 966-5818
Provider Gender: Male
License number: A73829
NPI: 1427129287
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady

Childrens Hospital San Diego, Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta
Medi-Cal Open Panel: Yes
Min/Max Age: 0/0
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

LEIBEL, SANDRA L

Provider ID: 205951
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5855
Fax:
After Hours Phone: (858) 966-5855
Provider Gender: Female
License number: A121976
NPI: 1407024995
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Polish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: 0/0
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

LE, CRYSTAL N

Provider ID: 205630
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-5818
 Fax: (858) 966-7483
 After Hours Phone: (858)
 966-5818
 Provider Gender: Female
 License number: A97634
 NPI: 1003028416
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Scripps Memorial Hospital,
 Scripps Memorial Hospital
 Encinitas, Southwest Healthcare
 System Wildomar, Southwest
 Healthcare System Murrieta
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/0
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

Network
MARC AURELE, KRISHELLE L
 Provider ID: 206206
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (800) 926-8273
 Fax: (619) 543-3812
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 License number: A99634
 NPI: 1952503435
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Ucsd Medical Ctr, Ucsd La Jolla
 John Sally Thornton, Tri City
 Medical Ctr, Scripps Memorial
 Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/0
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network
MARC AURELE, KRISHELLE L
 Provider ID: 206208
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223

Phone: (858) 966-5818
 Fax: (858) 966-7483
 After Hours Phone: (858)
 966-5818
 Provider Gender: Female
 License number: A99634
 NPI: 1952503435
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego, Tri
 City Medical Ctr, Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton, Scripps Memorial
 Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/0
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network
MARC AURELE, KRISHELLE L
 Provider ID: 206210
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3030 CHILDRENS WAY FL 2
 SAN DIEGO, CA 92123-4232
 Phone: (858) 966-8022
 Fax: (858) 966-8457
 After Hours Phone: (858)
 966-8022
 Provider Gender: Female
 License number: A99634
 NPI: 1952503435
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Rady
Childrens Hospital San Diego, Tri
City Medical Ctr, Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton, Scripps Memorial
Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/0

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

MARDOUM, RIAD

Provider ID: 206152

Board Certified Specialty: Yes
RADY CHILDRENS HEALTH
NETWORK

4077 5TH AVE

SAN DIEGO, CA 92103-2105

Phone: (619) 260-7046

Fax: (619) 686-3843

After Hours Phone: (619)

260-7046

Provider Gender: Male

License number: A36720

NPI: 1417050584

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Rady Childrens
Hospital San Diego, Scripps

Mercy Hospital Chula Vista, Ucsd
Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

MARDOUM, RIAD

Provider ID: 262122

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-5818

Fax:

After Hours Phone: (858)

966-5818

Provider Gender: Male

License number: A36720

NPI: 1417050584

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Rady Childrens
Hospital San Diego, Scripps

Mercy Hospital Chula Vista, Ucsd
Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

MARENGO BARBICK, ANTOINETTE

Provider ID: 271176

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
2017 1ST AVE STE 301

SAN DIEGO, CA 92101-2033

Phone: (619) 881-4500

Fax:

After Hours Phone: (619)

881-4500

Provider Gender: Female

License number: A87783

NPI: 1144200718

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: University Of
California Irvine Med Ctr, Scripps
Memorial Hospital Encinitas

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

MCCULLEY, DAVID J

Provider ID: 277177

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-5818

Fax: (858) 966-7483

After Hours Phone: (858)

966-5818

Provider Gender: Male

License number: A88660

NPI: 1235304155

Provider English Spoken: Yes

Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

MESTAN, KAREN K

Provider ID: 285932

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

3010 CHILDRENS WAY FL 3

SAN DIEGO, CA 92123-4223

Phone: (858) 966-5888

Fax:

After Hours Phone: (858)

966-5888

Provider Gender: Female

License number: C173648

NPI: 1942253356

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

MODY, SHEILA K

Provider ID: 270296

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

2017 1ST AVE STE 100

SAN DIEGO, CA 92101-9001

Phone: (619) 543-6777

Fax:

After Hours Phone: (619)

543-6777

Provider Gender: Female

License number: A117818

NPI: 1952561102

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

MOYER, LAUREL B

Provider ID: 205399

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (858) 966-5818

Fax: (858) 966-7483

After Hours Phone: (858)

966-5818

Provider Gender: Female

License number: C144070

NPI: 1598970378

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Scripps Mercy Hospital, Scripps

Mercy Hospital Chula Vista

Medi-Cal Open Panel: Yes

Min/Max Age: 0/0

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

MOYER, LAUREL B

Provider ID: 283257

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-5818

Fax: (858) 966-7483

After Hours Phone: (858)

966-5818

Provider Gender: Female

License number: C144070

NPI: 1598970378

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Scripps Mercy Hospital, Scripps

Mercy Hospital Chula Vista

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

NIEMI, ANNA-KAISA

Provider ID: 262157
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5818
Fax: (858) 966-7483
After Hours Phone: (858) 966-5818
Provider Gender: Female
License number: A104907
NPI: 1497941397
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

NIEMI, ANNA-KAISA

Provider ID: 262158
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
4077 5TH AVE
SAN DIEGO, CA 92103-2105

Phone: (619) 260-7107
Fax:
After Hours Phone: (619) 260-7107
Provider Gender: Female
License number: A104907
NPI: 1497941397
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

ODONNELL, F JANE D

Provider ID: 205578
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5818
Fax: (858) 966-7483
After Hours Phone: (858) 966-5818
Provider Gender: Female
License number: G81056
NPI: 1477625325
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Southwest Healthcare System Wildomar, Childrens Hosp And Resrch Ctr At Oakland, Southwest

Healthcare System Murrieta, Scripps Mercy Hospital Chula Vista, Rady Childrens Hospital San Diego, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/0
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

RAMOS, CARLOS G

Provider ID: 206060
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-3759
Fax: (619) 543-3812
After Hours Phone: (619) 543-3759
Provider Gender: Male
License number: A91944
NPI: 1205047545
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, El Centro Regional Medical Center, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Rady Childrens Hospital San Diego, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	SAN DIEGO, CA 92103-1911 <i>Phone:</i> (619) 543-3759 <i>Fax:</i> (619) 543-3812 <i>After Hours Phone:</i> (619) 543-3759 <i>Provider Gender:</i> Female <i>License number:</i> A115973 <i>NPI:</i> 1649433103 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Childrens Hosp And Resrch Ctr At Oakland, Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/0 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	Memorial Hospital, Sharp Mary Birch Hosp For Women And Newborns <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network
ROBERTSON, LAUREN A <i>Provider ID:</i> 271054 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 2017 1ST AVE STE 100 SAN DIEGO, CA 92101-9001 <i>Phone:</i> (858) 455-7520 <i>Fax:</i> <i>After Hours Phone:</i> (858) 455-7520 <i>Provider Gender:</i> Female <i>License number:</i> A109671 <i>NPI:</i> 1710211867 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc	SHANNON, KELLI K <i>Provider ID:</i> 208474 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3003 HEALTH CENTER DR SAN DIEGO, CA 92123-2700 <i>Phone:</i> (858) 966-6710 <i>Fax:</i> (858) 966-6711 <i>After Hours Phone:</i> (858) 966-6710 <i>Provider Gender:</i> Female <i>License number:</i> A125621 <i>NPI:</i> 1922156397 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp	SONG, RICHARD S <i>Provider ID:</i> 206143 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-5818 <i>Fax:</i> (858) 966-7483 <i>After Hours Phone:</i> (858) 966-5818 <i>Provider Gender:</i> Male <i>License number:</i> A112147 <i>NPI:</i> 1881893477 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas, Palomar Medical Center, Palomar Health Downtown Campus, Pomerado Hospital, Southwest Healthcare System Murrieta, Southwest Healthcare System Wildomar <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/0 <i>American Sign Language (ASL):</i>
SAJTI, ENIKO C <i>Provider ID:</i> 206171 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 200 W ARBOR DR		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	SUTTNER, DENISE M <i>Provider ID:</i> 265085 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-5818 <i>Fax:</i> (858) 966-7483 <i>After Hours Phone:</i> (858) 966-5818 <i>Provider Gender:</i> Female <i>License number:</i> A52313 <i>NPI:</i> 1457433799 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Scripps Memorial Hospital, Scripps Mercy Hospital	3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-5818 <i>Fax:</i> (858) 966-7483 <i>After Hours Phone:</i> (858) 966-5818 <i>Provider Gender:</i> Female <i>License number:</i> A110761 <i>NPI:</i> 1164572632 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/0 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network
SPEZIALE, MARK V <i>Provider ID:</i> 206126 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-5818 <i>Fax:</i> (858) 966-7483 <i>After Hours Phone:</i> (858) 966-5818 <i>Provider Gender:</i> Male <i>License number:</i> G78658 <i>NPI:</i> 1801978143 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista, Rady Childrens Hospital San Diego, Scripps Mercy Hospital, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/0 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	SWEENEY, NATHALY M <i>Provider ID:</i> 206182 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK	VAUCHER, YVONNE E <i>Provider ID:</i> 205652 <i>Board Certified Specialty:</i> Yes RADY CHILDRENS HEALTH NETWORK 4077 5TH AVE SAN DIEGO, CA 92103-2105 <i>Phone:</i> (619) 260-7046 <i>Fax:</i> <i>After Hours Phone:</i> (619) 260-7046 <i>Provider Gender:</i> Female <i>License number:</i> G25444 <i>NPI:</i> 1275615510 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes
Min/Max Age: 0/0
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

WEISS, KATHERINE J

Provider ID: 264677
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5818
Fax: (858) 966-7483
After Hours Phone: (858) 966-5818
Provider Gender: Female
License number: C154876
NPI: 1053541862
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/25
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

NEPHROLOGY

AHMED, KAMAL E
Provider ID: 63771
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: C50781
NPI: 1952352411
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, French, Tagalog
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BARANSKI, JOEL J

Provider ID: 211830
Board Certified Specialty: No
HEALTH EXCEL IPA INC
4060 4TH AVE STE 220
SAN DIEGO, CA 92103-2120
Phone: (619) 299-2350
Fax: (619) 297-8379
After Hours Phone: (619) 299-2350
Provider Gender: Male
License number: G67559
NPI: 1548265234
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish

Cultural Competency: No
Hospital Affiliation: Kindred Hospital San Diego, Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital, Vibra Hospital Of San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 18/120
American Sign Language (ASL):
No
♿ Accessibility: P, IB, E, W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

BARANSKI, JOEL J

Provider ID: 257541
Board Certified Specialty: No
BLUE SHIELD PROMISE HEALTH PLAN DIRECT
4060 4TH AVE STE 220
SAN DIEGO, CA 92103-2120
Phone: (619) 299-2350
Fax: (619) 297-8379
After Hours Phone: (619) 299-2350
Provider Gender: Male
License number: G67559
NPI: 1548265234
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Kindred Hospital San Diego, Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital, Vibra Hospital Of San Diego
Medi-Cal Open Panel: Yes

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ *Accessibility:* P, IB, E, W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

BARANSKI, JOEL J

Provider ID: 31396

Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC

4060 4TH AVE STE 220
SAN DIEGO, CA 92103-2120

Phone: (619) 299-2350

Fax: (619) 297-8379

After Hours Phone: (619)
299-2350

Provider Gender: Male

License number: G67559

NPI: 1548265234

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Kindred Hospital San Diego, Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital, Vibra Hospital Of San Diego
Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ *Accessibility:* P, IB, E, W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

BARANSKI, JOEL J , MD

Provider ID: 31396

Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC

4060 4TH AVE STE 220
SAN DIEGO, CA 92103-2120

Phone: (619) 299-2350

Fax: (619) 297-8379

After Hours Phone: (619)
299-2350

Provider Gender: Male

License number: G67559

NPI: 1548265234

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Kindred Hospital San Diego, Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital, Vibra Hospital Of San Diego
Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ *Accessibility:* P, IB, E, W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

BARANSKI, JOEL J

Provider ID: 31396

Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC

4060 4TH AVE STE 220
SAN DIEGO, CA 92103-2120

Phone: (619) 299-2350

Fax: (619) 297-8379

After Hours Phone: (619)
299-2350

Provider Gender: Male

License number: G67559

NPI: 1548265234

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Kindred Hospital San Diego, Scripps Mercy Hospital, Vibra Hospital Of San Diego, Sharp Coronado Hosp And Healthcare Ctr
Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ *Accessibility:* P, IB, E, W

Hours: M-F 9AM-5PM, SA
9AM-5PM

Website: www.bnmg.org

Email:

Medical Group(s):

IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

BEBEN, TOMASZ

Provider ID: 101291

Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A113430
NPI: 1689839441
Provider English Spoken: Yes
Provider Language(s) Spoken: Polish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BEHREND, TERRY L

Provider ID: 214025
Board Certified Specialty: No
HEALTH EXCEL IPA INC
8010 FROST ST STE 510
SAN DIEGO, CA 92123-4284
Phone: (619) 582-4490
Fax: (619) 582-4737
After Hours Phone: (619) 582-4490
Provider Gender: Male
License number: A75812
NPI: 1790780484
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/120

American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

BEHREND, TERRY L

Provider ID: 257272
Board Certified Specialty: No
HEALTH EXCEL IPA INC
6402 EL CAJON BLVD # 100
SAN DIEGO, CA 92115-2645
Phone: (619) 582-4490
Fax: (619) 582-4737
After Hours Phone: (619) 582-4490
Provider Gender: Male
License number: A75812
NPI: 1790780484
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

BEHREND, TERRY L

Provider ID: 262197
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
6402 EL CAJON BLVD # 100
SAN DIEGO, CA 92115-2645
Phone: (619) 582-4490
Fax: (619) 582-4737
After Hours Phone: (619) 582-4490
Provider Gender: Male
License number: A75812
NPI: 1790780484
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

BEHREND, TERRY L

Provider ID: 87090
Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC
6402 EL CAJON BLVD # 100
SAN DIEGO, CA 92115-2645
Phone: (619) 582-4490
Fax: (619) 582-4737
After Hours Phone: (619) 582-4490
Provider Gender: Male
License number: A75812

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1790780484

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-F 7:30AM-4PM, SA

9AM-5PM

Website: bnmg.org

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc, Imperial

Health Holdings Medical

Group-Sd

BEHREND, TERRY L , MD

Provider ID: 87090

Board Certified Specialty: No

BALBOA NEPHROLOGY MED
GRP INC

6402 EL CAJON BLVD # 100

SAN DIEGO, CA 92115-2645

Phone: (619) 582-4490

Fax: (619) 582-4737

After Hours Phone: (619)

582-4490

Provider Gender: Male

License number: A75812

NPI: 1790780484

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc, Imperial

Health Holdings Medical

Group-Sd

BENADOR, NADINE M

Provider ID: 52563

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED

FNDTN

8001 FROST ST

SAN DIEGO, CA 92123-2746

Phone: (999) 999-9999

Fax:

After Hours Phone: (999)

999-9999

Provider Gender: Female

License number: A84483

NPI: 1366513129

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Ucsd Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

BROWN, KRISTIAN L

Provider ID: 262237

Board Certified Specialty: No

IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD

8010 FROST ST STE 510

SAN DIEGO, CA 92123-4284

Phone: (858) 637-4800

Fax: (858) 637-4801

After Hours Phone: (858)

637-4800

Provider Gender: Male

License number: A124291

NPI: 1023272051

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc, Imperial

Health Holdings Medical

Group-Sd

CARTER, CAITLIN E

Provider ID: 68211

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED

FNDTN

8001 FROST ST

SAN DIEGO, CA 92123-2746

Phone: (858) 966-5855

Fax:

After Hours Phone: (858)

966-5855

Provider Gender: Female

License number: A93600

NPI: 1255514618

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Scripps Green Hospital, Scripps
 Memorial Hospital Encinitas,
 Scripps Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

DAVIS, JASON T

Provider ID: 62916
Board Certified Specialty: No
 BALBOA NEPHROLOGY MED
 GRP INC
 8010 FROST ST STE 510
 SAN DIEGO, CA 92123-4284
Phone: (858) 637-4800
Fax: (858) 637-4801
After Hours Phone: (858)
 637-4800
Provider Gender: Male
License number: A100799
NPI: 1295911469
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital Chula Vista, Sharp
 Coronado Hosp And Healthcare
 Ctr, Sharp Memorial Hospital,
 Kindred Hospital San Diego,
 Scripps Mercy Hospital, Vibra
 Hospital Of San Diego,

Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc, Imperial
 Health Holdings Medical
 Group-Sd

DAVIS, JASON T

Provider ID: 80404
Board Certified Specialty: No
 BALBOA NEPHROLOGY MED
 GRP INC
 4060 4TH AVE STE 220
 SAN DIEGO, CA 92103-2120
Phone: (619) 299-2350
Fax: (619) 297-8379
After Hours Phone: (619)
 299-2350
Provider Gender: Male
License number: A100799
NPI: 1295911469
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital Chula Vista, Sharp
 Coronado Hosp And Healthcare
 Ctr, Sharp Memorial Hospital,
 Kindred Hospital San Diego,
 Scripps Mercy Hospital, Vibra
 Hospital Of San Diego,
 Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No

☯ *Accessibility:* P, IB, E
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc, Imperial
 Health Holdings Medical
 Group-Sd

DAVIS, JASON T

Provider ID: 80404
Board Certified Specialty: No
 BALBOA NEPHROLOGY MED
 GRP INC
 4060 4TH AVE STE 220
 SAN DIEGO, CA 92103-2120
Phone: (619) 299-2350
Fax:
After Hours Phone: (619)
 299-2350
Provider Gender: Male
License number: A100799
NPI: 1295911469
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
 Coronado Hosp And Healthcare
 Ctr, Sharp Memorial Hospital,
 Kindred Hospital San Diego,
 Scripps Mercy Hospital, Vibra
 Hospital Of San Diego, Scripps
 Mercy Hospital Chula Vista,
 Grossmont Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* P, IB, E, W
Hours: M-F 9AM-5PM, SA
 9AM-5PM
Website: www.bnmg.org
Email:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc, Imperial
 Health Holdings Medical
 Group-Sd

FARAVARDEH, ARMAN

Provider ID: 262114
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 8010 FROST ST STE 510
 SAN DIEGO, CA 92123-4284
Phone: (858) 637-4800
Fax: (858) 637-4801
After Hours Phone: (858)
 637-4800

Provider Gender: Male
License number: A94375
NPI: 1467410019
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Farsi, Swedish
Cultural Competency: No
Hospital Affiliation: Sharp
 Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc, Imperial
 Health Holdings Medical
 Group-Sd

FARAVARDEH, ARMAN

Provider ID: 82852
Board Certified Specialty: No
 BALBOA NEPHROLOGY MED
 GRP INC

8010 FROST ST STE 510
 SAN DIEGO, CA 92123-4284
Phone: (858) 637-4800
Fax: (858) 637-4801
After Hours Phone: (858)
 637-4800
Provider Gender: Male
License number: A94375
NPI: 1467410019
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Farsi, Swedish
Cultural Competency: No
Hospital Affiliation: Sharp
 Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc, Imperial
 Health Holdings Medical
 Group-Sd

FARAVARDEH, ARMAN

Provider ID: 82852
Board Certified Specialty: No
 BALBOA NEPHROLOGY MED
 GRP INC
 8010 FROST ST STE 510
 SAN DIEGO, CA 92123-4284
Phone: (858) 637-4700
Fax:
After Hours Phone: (858)
 637-4700

Provider Gender: Male
License number: A94375
NPI: 1467410019
Provider English Spoken: Yes
Provider Language(s) Spoken:

Farsi, Swedish
Cultural Competency: No
Hospital Affiliation: Sharp
 Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No

♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website: bnmg.org
Email:

Medical Group(s):
IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc, Imperial
 Health Holdings Medical
 Group-Sd

FARAVARDEH, ARMAN, MD

Provider ID: 82852
Board Certified Specialty: No
 BALBOA NEPHROLOGY MED
 GRP INC
 8010 FROST ST STE 510
 SAN DIEGO, CA 92123-4284
Phone: (858) 637-4800
Fax: (858) 637-4801
After Hours Phone: (858)
 637-4800

Provider Gender: Male
License number: A94375
NPI: 1467410019
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Farsi, Swedish

Cultural Competency: No
Hospital Affiliation: Sharp
 Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

GOLLAPUDI, RAGHAV A R

Provider ID: 53857
Board Certified Specialty: No
SAN DIEGO CARDIAC CTR
MED GRP INC
3131 BERGER AVE STE 200
SAN DIEGO, CA 92123-4203
Phone: (858) 244-6800

Fax:
After Hours Phone: (858)
244-6800
Provider Gender: Male
License number: A73392
NPI: 1467429191
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish

Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Scripps
Mercy Hospital Chula Vista,
Grossmont Hospital, Sharp
Chula Vista Med Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

GRISOLIA, JAMES S

Provider ID: 262180

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
4033 3RD AVE STE 410
SAN DIEGO, CA 92103-2140
Phone: (619) 297-1155
Fax: (619) 297-7538
After Hours Phone: (619)
297-1155

Provider Gender: Male
License number: G42884
NPI: 1336102359
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital Chula Vista, Scripps
Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Imperial Health Holdings
Medical Group-Sd

HALLDORSON, JEFFREY B

Provider ID: 262155
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
8010 FROST ST STE 510
SAN DIEGO, CA 92123-4284
Phone: (858) 637-4800
Fax: (858) 637-4801
After Hours Phone: (858)
637-4800
Provider Gender: Male
License number: G86089
NPI: 1558446351

Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp
Coronado Hosp And Healthcare
Ctr, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

HAMMES, JOHN S

Provider ID: 262327
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
4060 4TH AVE STE 220
SAN DIEGO, CA 92103-2120
Phone: (619) 299-2350
Fax: (619) 297-8379
After Hours Phone: (619)
299-2350

Provider Gender: Male
License number: G84351
NPI: 1891766994
Provider English Spoken: Yes
Provider Language(s) Spoken:
French, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital Chula Vista, Sharp
Coronado Hosp And Healthcare
Ctr, Kindred Hospital San Diego,
Vibra Hospital Of San Diego,
Scripps Mercy Hospital

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:* P, IB, E

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc, Imperial

Health Holdings Medical

Group-Sd

HAMMES, JOHN S

Provider ID: 76487

Board Certified Specialty: No

BALBOA NEPHROLOGY MED

GRP INC

4060 4TH AVE STE 220

SAN DIEGO, CA 92103-2120

Phone: (619) 299-2350

Fax:

After Hours Phone: (619)

299-2350

Provider Gender: Male

License number: G84351

NPI: 1891766994

Provider English Spoken: Yes

Provider Language(s) Spoken:

French, Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital Chula Vista, Sharp

Coronado Hosp And Healthcare

Ctr, Kindred Hospital San Diego,

Vibra Hospital Of San Diego,

Scripps Mercy Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* P, IB, E, W

Hours: M-F 9AM-5PM, SA

9AM-5PM

Website: www.bnmg.org

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc, Imperial

Health Holdings Medical

Group-Sd

HAMMES, JOHN S , MD

Provider ID: 76487

Board Certified Specialty: No

BALBOA NEPHROLOGY MED

GRP INC

4060 4TH AVE STE 220

SAN DIEGO, CA 92103-2120

Phone: (619) 299-2350

Fax: (619) 297-8379

After Hours Phone: (619)

299-2350

Provider Gender: Male

License number: G84351

NPI: 1891766994

Provider English Spoken: Yes

Provider Language(s) Spoken:

French, Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital Chula Vista, Sharp

Coronado Hosp And Healthcare

Ctr, Kindred Hospital San Diego,

Vibra Hospital Of San Diego,

Scripps Mercy Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* P, IB, E

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc, Imperial

Health Holdings Medical

Group-Sd

INGULLI, ELIZABETH G

Provider ID: 52564

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED

FNDTN

8001 FROST ST

SAN DIEGO, CA 92123-2746

Phone: (858) 966-5855

Fax:

After Hours Phone: (858)

966-5855

Provider Gender: Female

License number: G87981

NPI: 1811919244

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Ucsd Medical Ctr, Sharp

Memorial Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

KHAING, KATHY, MD

Provider ID: 205002

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

8010 FROST ST STE 510

SAN DIEGO, CA 92123-4284

Phone: (858) 637-4700

Fax:

After Hours Phone: (858)

637-4700

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Female
License number: A127006
NPI: 1912219155
Provider English Spoken: Yes
Provider Language(s) Spoken: Burmese, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Paradise Valley Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

LUND, GUY L

Provider ID: 262178
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
8010 FROST ST STE 510
SAN DIEGO, CA 92123-4284
Phone: (858) 637-4700
Fax: (858) 637-4701
After Hours Phone: (858) 637-4700
Provider Gender: Male
License number: A68839
NPI: 1700859279
Provider English Spoken: Yes
Provider Language(s) Spoken: Slovak, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

LUND, GUY L , MD

Provider ID: 87088
Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC
8010 FROST ST STE 510
SAN DIEGO, CA 92123-4284
Phone: (858) 637-4700
Fax: (858) 637-4701
After Hours Phone: (858) 637-4700
Provider Gender: Male
License number: A68839
NPI: 1700859279
Provider English Spoken: Yes
Provider Language(s) Spoken: Slovak, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

LUND, GUY L

Provider ID: 87088
Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC
8010 FROST ST STE 510
SAN DIEGO, CA 92123-4284
Phone: (858) 637-4700
Fax:
After Hours Phone: (858) 637-4700
Provider Gender: Male
License number: A68839
NPI: 1700859279
Provider English Spoken: Yes
Provider Language(s) Spoken: Slovak, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

♿ Accessibility: W

Hours: M-SA 9AM-5PM
Website: bnmg.org
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

MAK, ROBERT H

Provider ID: 206177
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
8001 FROST ST # 10
SAN DIEGO, CA 92123-2746

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 966-8052
Fax: (858) 966-7789
After Hours Phone: (858) 966-8052
Provider Gender: Male
License number: A43991
NPI: 1740295252
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MAK, ROBERT H

Provider ID: 52566
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
8001 FROST ST
SAN DIEGO, CA 92123-2746
Phone: (858) 966-5855
Fax:
After Hours Phone: (858) 966-5855
Provider Gender: Male
License number: A43991
NPI: 1740295252
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally Thornton, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

NAMAZY, DAVID S

Provider ID: 119925
Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC
6402 EL CAJON BLVD # 100
SAN DIEGO, CA 92115-2645
Phone: (619) 582-4490
Fax: (619) 582-4737
After Hours Phone: (619) 582-4490
Provider Gender: Male
License number: A74630
NPI: 1477558013
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

♿ Accessibility: W
Hours: M-F 7:30AM-4PM, SA 9AM-5PM
Website: bnmg.org
Email:
Medical Group(s):

IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

NAMAZY, DAVID S

Provider ID: 262262
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
6402 EL CAJON BLVD # 100
SAN DIEGO, CA 92115-2645
Phone: (619) 582-4490
Fax: (619) 582-4737
After Hours Phone: (619) 582-4490
Provider Gender: Male
License number: A74630
NPI: 1477558013
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

NGUYEN, VIET D , MD

Provider ID: 270191
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4060 4TH AVE STE 220
SAN DIEGO, CA 92103-2120

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>Phone: (619) 299-2350 Fax: (619) 297-8379 After Hours Phone: (619) 299-2350 Provider Gender: Male License number: A149088 NPI: 1184019051 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc</p>	<p>Childrens Hospital San Diego, Ucsd Medical Ctr, Childrens Hosp And Resrch Ctr At Oakland Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network</p>	<p>Network PATEL, BIJAL V Provider ID: 214154 Board Certified Specialty: No HEALTH EXCEL IPA INC 8010 FROST ST STE 510 SAN DIEGO, CA 92123-4284 Phone: (858) 637-4700 Fax: (858) 637-4701 After Hours Phone: (858) 637-4700 Provider Gender: Male License number: A74638 NPI: 1639266026 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Sharp Memorial Hospital Medi-Cal Open Panel: Yes Min/Max Age: 18/120 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>
<p>NOURBAKHSH, NOUREDDIN D Provider ID: 101316 Board Certified Specialty: No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 8001 FROST ST SAN DIEGO, CA 92123-2746 Phone: (858) 966-5855 Fax: After Hours Phone: (858) 966-5855 Provider Gender: Male License number: 20A11746 NPI: 1801082003 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Childrens Hosp And Resrch Ctr At Oakland Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health</p>	<p>NOURBAKHSH, NOUREDDIN D Provider ID: 102313 Board Certified Specialty: No UCSD MEDICAL GROUP 4168 FRONT ST FL 3 SAN DIEGO, CA 92103-2030 Phone: (619) 543-6248 Fax: (858) 657-8000 After Hours Phone: (619) 543-6248 Provider Gender: Male License number: 20A11746 NPI: 1801082003 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Childrens Hosp And Resrch Ctr At Oakland Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health</p>	<p>PATEL, BIJAL V Provider ID: 262121 Board Certified Specialty: No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 8010 FROST ST STE 510 SAN DIEGO, CA 92123-4284</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 637-4700

Fax: (858) 637-4701

After Hours Phone: (858) 637-4700

Provider Gender: Male

License number: A74638

NPI: 1639266026

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

PATEL, BIJAL V

Provider ID: 34506

Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC

8010 FROST ST STE 510

SAN DIEGO, CA 92123-4284

Phone: (858) 637-4700

Fax:

After Hours Phone: (858) 637-4700

Provider Gender: Male

License number: A74638

NPI: 1639266026

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL): No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website: bnmg.org

Email:

Medical Group(s):

IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

PATEL, BIJAL V , MD

Provider ID: 34506

Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC

8010 FROST ST STE 510

SAN DIEGO, CA 92123-4284

Phone: (858) 637-4700

Fax: (858) 637-4701

After Hours Phone: (858) 637-4700

Provider Gender: Male

License number: A74638

NPI: 1639266026

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Blue Shield Promise Health

Plan Direct, Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

PERENS, ELLIOT A

Provider ID: 101300

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED FNDTN

8001 FROST ST

SAN DIEGO, CA 92123-2746

Phone: (858) 966-8052

Fax: (858) 966-7789

After Hours Phone: (858) 966-8052

Provider Gender: Male

License number: A108840

NPI: 1922328947

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland, Medical Ctr At Ucsf

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL): No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

QUEVEDO, JUAN M , MD

Provider ID: 269998

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

995 GATEWAY CENTER WAY STE 207

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D. Directorio de proveedores de atención especializada

SAN DIEGO, CA 92102-4544

Phone: (619) 263-9729

Fax: (619) 263-9730

After Hours Phone: (619)

263-9729

Provider Gender: Male

License number: A144881

NPI: 1093902496

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital, Scripps Mercy Hospital

Chula Vista

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc

QUEVEDO, JUAN M

Provider ID: 35241

Board Certified Specialty: No

SOUTHERN CALIFORNIA

INTERVENTIONAL ASSOC

995 GATEWAY CENTER WAY

STE 207

SAN DIEGO, CA 92102-4544

Phone: (619) 263-9729

Fax:

After Hours Phone: (619)

263-9729

Provider Gender: Male

License number: A144881

NPI: 1093902496

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital, Scripps Mercy Hospital

Chula Vista

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M,W-F 7:30AM-4PM,

TU,SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc

SANCHEZ, AMBER P

Provider ID: 64175

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222

Fax:

After Hours Phone: (619)

543-6222

Provider Gender: Female

License number: A91770

NPI: 1700963907

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

SHAH, MITA M

Provider ID: 262230

Board Certified Specialty: No

IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD

8010 FROST ST STE 510

SAN DIEGO, CA 92123-4284

Phone: (858) 637-4700

Fax: (858) 637-4701

After Hours Phone: (858)

637-4700

Provider Gender: Female

License number: A71739

NPI: 1194773010

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Imperial Health Holdings

Medical Group-Sd

STEINBERG, STEVEN M

Provider ID: 262281

Board Certified Specialty: No

IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD

8010 FROST ST STE 510

SAN DIEGO, CA 92123-4284

Phone: (858) 637-4700

Fax: (858) 637-4701

After Hours Phone: (858)

637-4700

Provider Gender: Male

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: G17843
NPI: 1407852783
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

STEINBERG, STEVEN M , MD

Provider ID: 270031
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
7910 FROST ST STE 250
SAN DIEGO, CA 92123-2752
Phone: (858) 637-4800
Fax: (858) 637-4801
After Hours Phone: (858)
637-4800
Provider Gender: Male
License number: G17843
NPI: 1407852783
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

STEINBERG, STEVEN M , MD

Provider ID: 87140
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
8010 FROST ST STE 510
SAN DIEGO, CA 92123-4284
Phone: (858) 637-4700
Fax: (858) 637-4701
After Hours Phone: (858)
637-4700
Provider Gender: Male
License number: G17843
NPI: 1407852783
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

THOMAS, THEODORE S

Provider ID: 262359
Board Certified Specialty: Yes
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
4060 4TH AVE STE 220
SAN DIEGO, CA 92103-2120

Phone: (619) 299-2350
Fax: (619) 297-8379
After Hours Phone: (619)
299-2350
Provider Gender: Male
License number: G61681
NPI: 1669477113
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
Coronado Hosp And Healthcare
Ctr, Kindred Hospital San Diego,
Vibra Hospital Of San Diego,
Scripps Mercy Hospital Chula
Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility: P, IB, E
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings
Medical Group-Sd

THOMSON, SCOTT C

Provider ID: 64223
Board Certified Specialty: Yes
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Male
License number: G53658
NPI: 1225052483
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

NEUROLOGY CHILD

CRAWFORD, JOHN R

Provider ID: 206037
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
8001 FROST ST
SAN DIEGO, CA 92123-2746
Phone: (858) 966-5999
Fax: (858) 966-4930
After Hours Phone: (858) 966-5999
Provider Gender: Male
License number: A107230
NPI: 1982790259
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Rady Childrens Health Network
FRIEDMAN, JENNIFER R
Provider ID: 205835
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5999
Fax: (858) 966-4930
After Hours Phone: (858) 966-5999

Provider Gender: Female
License number: G87128
NPI: 1821144478
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

GOLD, JEFFREY J

Provider ID: 205922
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
8001 FROST ST
SAN DIEGO, CA 92123-2746

Phone: (858) 966-5999
Fax: (858) 966-4930
After Hours Phone: (858) 966-5999
Provider Gender: Male
License number: A111541
NPI: 1568773984
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

GRAVES, JENNIFER S

Provider ID: 261037
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858) 966-8800
Provider Gender: Female
License number: A116811
NPI: 1992849863
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsf Medical Center At Mission Bay, Ucsf

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Center At Mount Zion,
Medical Ctr At Ucsf, Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr, Ucsd La Jolla
John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

GRAY, ROBERT M

Provider ID: 261016
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY STE
410
SAN DIEGO, CA 92123-4228
Phone: (858) 966-6706
Fax: (858) 966-8519
After Hours Phone: (858)
966-6706
Provider Gender: Male
License number: PSY20705
NPI: 1679616981
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

GROSMANN, CARLA M

Provider ID: 205658
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5999
Fax:
After Hours Phone: (858)
966-5999
Provider Gender: Female
License number: G84717
NPI: 1497826259
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Childrens Hosp And Resrch Ctr
At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

GUIDO-ESTRADA, NATALIE M

Provider ID: 205825
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
8001 FROST ST
SAN DIEGO, CA 92123-2746

Phone: (858) 966-5999
Fax: (858) 966-4930
After Hours Phone: (858)
966-5999
Provider Gender: Female
License number: A140052
NPI: 1528353521
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

HAAS, RICHARD H

Provider ID: 205622
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
8001 FROST ST
SAN DIEGO, CA 92123-2746
Phone: (858) 966-5999
Fax: (858) 966-4930
After Hours Phone: (858)
966-5999
Provider Gender: Male
License number: A38555
NPI: 1700801867
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr, Sharp Mary
Birch Hosp For Women And

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Newborns <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	Network HAAS, RICHARD H <i>Provider ID:</i> 63936 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 <i>Phone:</i> (619) 543-6222 <i>Fax:</i> <i>After Hours Phone:</i> (619) 543-6222 <i>Provider Gender:</i> Male <i>License number:</i> A38555 <i>NPI:</i> 1700801867 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Sharp Mary Birch Hosp For Women And Newborns <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	<i>Phone:</i> (858) 966-5999 <i>Fax:</i> (858) 966-4930 <i>After Hours Phone:</i> (858) 966-5999 <i>Provider Gender:</i> Female <i>License number:</i> A120194 <i>NPI:</i> 1174870067 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> University Of California Irvine Med Ctr, Rady Childrens Hospital San Diego, Childrens Hospital Of Orange County <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network
HAAS, RICHARD H <i>Provider ID:</i> 205623 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 7910 FROST ST STE 200 SAN DIEGO, CA 92123-2776 <i>Phone:</i> (619) 543-7800 <i>Fax:</i> (619) 543-3565 <i>After Hours Phone:</i> (619) 543-7800 <i>Provider Gender:</i> Male <i>License number:</i> A38555 <i>NPI:</i> 1700801867 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Sharp Mary Birch Hosp For Women And Newborns <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	KIM MCMANUS, OLIVIA S <i>Provider ID:</i> 206256 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 8001 FROST ST SAN DIEGO, CA 92123-2746	KONERSMAN, CHAMINDRA G <i>Provider ID:</i> 205501 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 8001 FROST ST SAN DIEGO, CA 92123-2746 <i>Phone:</i> (858) 966-8052 <i>Fax:</i> <i>After Hours Phone:</i> (858) 966-8052 <i>Provider Gender:</i> Female <i>License number:</i> A101351 <i>NPI:</i> 1538320395 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Childrens Hospital San Diego,
Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

NELSON, JAMES E

Provider ID: 205373
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
8001 FROST ST
SAN DIEGO, CA 92123-2746
Phone: (858) 966-5999
Fax: (858) 966-4930
After Hours Phone: (858)
966-5999
Provider Gender: Male
License number: C55868
NPI: 1568434546
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Valley
Childrens Hospital, Ucsd Medical
Ctr, Rady Childrens Hospital San
Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health

Network
NESPECA, MARK P
Provider ID: 205401
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5999
Fax: (858) 966-4930
After Hours Phone: (858)
966-5999
Provider Gender: Male
License number: G65509
NPI: 1942371703
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

RISMANCHI, NEGGY

Provider ID: 206017
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
8001 FROST ST
SAN DIEGO, CA 92123-2746
Phone: (858) 966-5999
Fax: (858) 966-4930
After Hours Phone: (858)
966-5999

Provider Gender: Female
License number: A118427
NPI: 1669759148
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

SAHAGIAN, MICHELLE L

Provider ID: 206074
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5999
Fax: (858) 966-4930
After Hours Phone: (858)
966-5999
Provider Gender: Female
License number: A80990
NPI: 1275604035
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

SATTAR, SHIFTEH

Provider ID: 206181
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-5999
 Fax: (858) 966-4930
 After Hours Phone: (858) 966-5999
 Provider Gender: Female
 License number: A103904
 NPI: 1750407300
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

NEUROLOGY

ANSARI, HOSSEIN

Provider ID: 92480
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4510 EXECUTIVE DR STE 325
 SAN DIEGO, CA 92121-3069

Phone: (858) 657-8540
 Fax:
 After Hours Phone: (858) 657-8540
 Provider Gender: Male
 License number: A121526
 NPI: 1578774949
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Farsi
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Tri City Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

BEVINS, ELIZABETH A

Provider ID: 241943
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4510 EXECUTIVE DR STE 325
 SAN DIEGO, CA 92121-3069
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A145182
 NPI: 1013395151
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

BREWER, JAMES B

Provider ID: 63818
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-6222
 Fax:
 After Hours Phone: (619) 543-6222
 Provider Gender: Male
 License number: A89348
 NPI: 1033144985
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Hebrew
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

BUI, JONATHAN D

Provider ID: 206005
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 8001 FROST ST

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

SAN DIEGO, CA 92123-2746
Phone: (858) 966-5999
Fax: (858) 966-4930
After Hours Phone: (858) 966-5999
Provider Gender: Male
License number: A96574
NPI: 1730247974
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

BUI, JONATHAN D

Provider ID: 63827
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (999) 999-9999
Fax:
After Hours Phone: (999)
999-9999
Provider Gender: Male
License number: A96574
NPI: 1730247974
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

BUI, JONATHAN D

Provider ID: 82151
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (999) 999-9999
Fax:
After Hours Phone: (999)
999-9999
Provider Gender: Male
License number: A96574
NPI: 1730247974
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

CALZADA, AUDREY P

Provider ID: 275301
Board Certified Specialty: No
HEALTH EXCEL IPA INC
5405 OBERLIN DR
SAN DIEGO, CA 92121-1700
Phone: (858) 909-0770
Fax: (858) 909-0880
After Hours Phone: (858)
909-0770
Provider Gender: Female
License number: A107965
NPI: 1619113230
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas,
Sharp Memorial Hospital, Rady
Childrens Hospital San Diego,
Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

CHEN, DILLON Y

Provider ID: 259994
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
8001 FROST ST
SAN DIEGO, CA 92123-2746

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 966-5999
Fax: (858) 966-4930
After Hours Phone: (858) 966-5999
Provider Gender: Male
License number: A133170
NPI: 1841633914
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/99
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

CHEN, DILLON Y
Provider ID: 259996
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-3759
Fax: (619) 543-3812
After Hours Phone: (619)
543-3759
Provider Gender: Male
License number: A133170
NPI: 1841633914
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/99

American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

COREY BLOOM, JODY P
Provider ID: 63863
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Female
License number: G62847
NPI: 1053400093
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

COUGHLIN, DAVID G
Provider ID: 240949
Board Certified Specialty: Yes
UCSD MEDICAL GROUP
4510 EXECUTIVE DR STE 325
SAN DIEGO, CA 92121-3069

Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A162063
NPI: 1740543784
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

COUGHLIN, DAVID G
Provider ID: 240951
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A162063
NPI: 1740543784
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

DUNN-PIRIO, ANASTASIE M

Provider ID: 203235
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR FL 1
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A157861
NPI: 1700177136
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

ELLIS, RONALD J

Provider ID: 63892
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Male

License number: G70658
NPI: 1992763114
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

EVANS, SEAN J

Provider ID: 64699
Board Certified Specialty: No
UCSD MEDICAL GROUP
4510 EXECUTIVE DR STE 325
SAN DIEGO, CA 92121-3069
Phone: (858) 657-8540
Fax:
After Hours Phone: (858)
657-8540
Provider Gender: Male
License number: A81217
NPI: 1366503427
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA:

FLEMING, WESLEY E

Provider ID: 283662
Board Certified Specialty: No
HEALTH EXCEL IPA INC
5471 KEARNY VILLA RD STE
202
SAN DIEGO, CA 92123-1141
Phone: (619) 299-6299
Fax: (619) 299-6222
After Hours Phone: (619)
299-6299
Provider Gender: Male
License number: A70474
NPI: 1205922945
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Hoag
Memorial Hospital Presbyterian,
Hoag Hospital Irvine, Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

FREDERICK, ALIYA L

Provider ID: 283152
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5999
Fax: (858) 576-8412
After Hours Phone: (858)
966-5999

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Female
License number: A148160
NPI: 1548657992
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd La Jolla John Sally
Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

FRIEDMAN, JENNIFER R
Provider ID: 283037
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
8001 FROST ST
SAN DIEGO, CA 92123-2746
Phone: (858) 966-5999
Fax: (858) 966-4930
After Hours Phone: (858)
966-5999
Provider Gender: Female
License number: G87128
NPI: 1821144478
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

FRIEDMAN, JENNIFER R
Provider ID: 283237
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123-4232
Phone: (858) 966-5819
Fax: (858) 966-4930
After Hours Phone: (858)
966-5819
Provider Gender: Female
License number: G87128
NPI: 1821144478
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

FRIEDMAN, JENNIFER R
Provider ID: 52575
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 576-1700
Fax:
After Hours Phone: (858)
576-1700
Provider Gender: Female
License number: G87128
NPI: 1821144478
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

GERTSCH, JEFFREY H
Provider ID: 63915
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Male
License number: A88828
NPI: 1730352287
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None

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D. Directorio de proveedores de atención especializada

American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GLEESON, JOSEPH G

Provider ID: 283435
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
8001 FROST ST
SAN DIEGO, CA 92123-2746
Phone: (858) 966-5999
Fax: (858) 966-4930
After Hours Phone: (858) 966-5999
Provider Gender: Male
License number: G85292
NPI: 1689745440
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GOLD, JEFFREY J

Provider ID: 283335
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5999
Fax: (858) 576-8412
After Hours Phone: (858) 966-5999
Provider Gender: Male
License number: A111541
NPI: 1568773984
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

GONZALEZ, CYNTHIA

Provider ID: 110378
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: A131602
NPI: 1871767210
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GUIDO-ESTRADA, NATALIE M

Provider ID: 109190
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
8001 FROST ST
SAN DIEGO, CA 92123-2746
Phone: (858) 966-5999
Fax:
After Hours Phone: (858) 966-5999
Provider Gender: Female
License number: A140052
NPI: 1528353521
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

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D. Directorio de proveedores de atención especializada

GUNDOGDU, MELEK B

Provider ID: 128070
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: C156629
NPI: 1437253671
Provider English Spoken: Yes
Provider Language(s) Spoken: Turkish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

GUNDOGDU, MELEK B

Provider ID: 201623
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR FL 1
SAN DIEGO, CA 92103-1911
Phone: (619) 543-3500
Fax:
After Hours Phone: (619) 543-3500
Provider Gender: Female
License number: C156629
NPI: 1437253671

Provider English Spoken: Yes
Provider Language(s) Spoken: Turkish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HANNAWI, ANDREW P

Provider ID: 283154
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5999
Fax: (858) 576-8412
After Hours Phone: (858) 966-5999
Provider Gender: Male
License number: A153161
NPI: 1194179135
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network, Ucsd Medical Group

HEMMEN, THOMAS M

Provider ID: 63952
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A72645
NPI: 1902821945
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: El Centro Regional Medical Center, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HUISA-GARATE, BRANKO N

Provider ID: 110376
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 543-6222

Fax:

After Hours Phone: (619)
543-6222

Provider Gender: Male

License number: A108574

NPI: 1063551000

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: University Of
California Irvine Med Ctr, El
Centro Regional Medical Center,
Scripps Mercy Hospital, Scripps
Mercy Hospital Chula Vista,
Corona Regional Med Ctr,
Temecula Valley Hospital Inc,
Ucsd Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

IRAGUIMADOZ, VICENTE J

Provider ID: 63979

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222

Fax:

After Hours Phone: (619)
543-6222

Provider Gender: Male

License number: A31274

NPI: 1053326710

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla
John Sally Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

JABLECKI, CHARLES K

Provider ID: 112351

Board Certified Specialty: No
UCSD MEDICAL GROUP

4510 EXECUTIVE DR STE 325
SAN DIEGO, CA 92121-3069

Phone: (858) 657-8540

Fax:

After Hours Phone: (858)
657-8540

Provider Gender: Male

License number: G33067

NPI: 1255315677

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp
Memorial Hospital, Ucsd Medical
Ctr, Rady Childrens Hospital San
Diego

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

JINDAL, ANUJA V

Provider ID: 119343

Board Certified Specialty: No
RADY CHILDRENS

SPECIALISTS SAN DIEGO MED
FNDTN

8001 FROST ST

SAN DIEGO, CA 92123-2746

Phone: (858) 966-5999

Fax:

After Hours Phone: (858)
966-5999

Provider Gender: Female

License number: A149444

NPI: 1194046581

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

JINDAL, ANUJA V

Provider ID: 206263

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

8001 FROST ST

SAN DIEGO, CA 92123-2746

Phone: (858) 966-5999

Fax: (858) 966-4930

After Hours Phone: (858)

966-5999

Provider Gender: Female

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D. Directorio de proveedores de atención especializada

License number: A149444
NPI: 1194046581
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

KANSAL, LEENA R

Provider ID: 63989
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Female
License number: A99271
NPI: 1871759084
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA:
KHAMISHON, BORIS, MD
Provider ID: 269923
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
6699 ALVARADO RD STE 2301
SAN DIEGO, CA 92120-5241
Phone: (619) 582-2595
Fax: (619) 229-8006
After Hours Phone: (619)
582-2595
Provider Gender: Male
License number: A56165
NPI: 1104922038
Provider English Spoken: Yes
Provider Language(s) Spoken:
Russian, Samoan, Spanish
Cultural Competency: No
Hospital Affiliation: Alvarado
Hospital Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

KHOROMI, SUZAN

Provider ID: 110429
Board Certified Specialty: No
UCSD MEDICAL GROUP
4510 EXECUTIVE DR STE 325
SAN DIEGO, CA 92121-3069
Phone: (619) 543-3500
Fax:
After Hours Phone: (619)
543-3500
Provider Gender: Female
License number: G136006

NPI: 1588803340
Provider English Spoken: Yes
Provider Language(s) Spoken:
Persian, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Scripps
Memorial Hospital Encinitas,
Scripps Mercy Hospital, Vibra
Hospital Of San Diego, Scripps
Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KIM MCMANUS, OLIVIA S

Provider ID: 121365
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FN D TN
8001 FROST ST
SAN DIEGO, CA 92123-2746
Phone: (858) 966-5999
Fax:
After Hours Phone: (858)
966-5999
Provider Gender: Female
License number: A120194
NPI: 1174870067
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: University Of
California Irvine Med Ctr,
Childrens Hospital Of Orange
County, Rady Childrens Hospital
San Diego

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D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

KINKEL, REVERE P

Provider ID: 83656
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: G89360
NPI: 1043325939
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KONERSMAN, CHAMINDRA G

Provider ID: 110438
Board Certified Specialty: No
UCSD MEDICAL GROUP

4510 EXECUTIVE DR STE 325
SAN DIEGO, CA 92121-3069
Phone: (858) 657-8540
Fax:
After Hours Phone: (858) 657-8540
Provider Gender: Female
License number: A101351
NPI: 1538320395
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

KONERSMAN, CHAMINDRA G

Provider ID: 85229
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
8001 FROST ST
SAN DIEGO, CA 92123-2746
Phone: (858) 966-8052
Fax:
After Hours Phone: (858) 966-8052
Provider Gender: Female
License number: A101351
NPI: 1538320395
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

LABUZETTA, JAMIE N

Provider ID: 110440
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: A130618
NPI: 1316268949
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

LEE, DAVID J

Provider ID: 246263
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR FL 1
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A124329
NPI: 1871884130
Provider English Spoken: Yes
Provider Language(s) Spoken:
Korean
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LEGER, GABRIEL C

Provider ID: 247608
Board Certified Specialty: No
UCSD MEDICAL GROUP
4510 EXECUTIVE DR STE 325
SAN DIEGO, CA 92121-3069
Phone: (858) 543-8540
Fax:
After Hours Phone: (858)
543-8540
Provider Gender: Male
License number: C155902
NPI: 1720367899

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LESSIG, STEPHANIE L

Provider ID: 64036
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Female
License number: A81417
NPI: 1134167141
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LIPTON, STUART A

Provider ID: 64044
Board Certified Specialty: Yes
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Male
License number: G85439
NPI: 1578596292
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LONGARDNER, KATHERINE M

Provider ID: 268346
Board Certified Specialty: No
UCSD MEDICAL GROUP
4520 EXECUTIVE DR
SAN DIEGO, CA 92121-3018
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A137963
NPI: 1801215926
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

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D. Directorio de proveedores de atención especializada

Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MCGEHRIN, KEVIN M

Provider ID: 243545
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR FL 1
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A140783
NPI: 1972913101
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MEHTA, RITVIK P

Provider ID: 257240
Board Certified Specialty: No
HEALTH EXCEL IPA INC
5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121-1700
Phone: (858) 909-0770
Fax: (858) 909-0880
After Hours Phone: (858) 909-0770
Provider Gender: Male
License number: A93336
NPI: 1245393586
Provider English Spoken: Yes
Provider Language(s) Spoken:

Gujarati, Hindi
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

MEYER, BRETT C

Provider ID: 64083
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A70903
NPI: 1316011265
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: El Centro Regional Medical Center, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MODIR, ROYYA F

Provider ID: 84287
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: A121407
NPI: 1295909554
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: El Centro Regional Medical Center, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<i>Medical Group(s):</i> <i>IPA:</i>	<i>Phone:</i> (858) 576-1700 <i>Fax:</i> <i>After Hours Phone:</i> (858) 576-1700 <i>Provider Gender:</i> Male <i>License number:</i> G65509 <i>NPI:</i> 1942371703 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>	<i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>
NELSON, JAMES E <i>Provider ID:</i> 104822 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 8001 FROST ST SAN DIEGO, CA 92123-2746 <i>Phone:</i> (858) 966-5855 <i>Fax:</i> <i>After Hours Phone:</i> (858) 966-5855 <i>Provider Gender:</i> Male <i>License number:</i> C55868 <i>NPI:</i> 1568434546 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Valley Childrens Hospital, Ucsd Medical Ctr, Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	OLSON, SCOTT E <i>Provider ID:</i> 64120 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Male <i>License number:</i> A83715 <i>NPI:</i> 1376568659 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Tri City Medical Ctr, Ucsd Medical Ctr, Pomerado Hospital, Palomar Medical Center, Scripps Green Hospital, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group	
NESPECA, MARK P <i>Provider ID:</i> 52598 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223	NISSINEN, JANNE K <i>Provider ID:</i> 116418 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 4510 EXECUTIVE DR STE 325 SAN DIEGO, CA 92121-3069 <i>Phone:</i> (858) 657-8814 <i>Fax:</i> <i>After Hours Phone:</i> (858) 657-8814 <i>Provider Gender:</i> Male <i>License number:</i> A123181 <i>NPI:</i> 1710278569 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No	QAYOUMI, WALI Z <i>Provider ID:</i> 284370

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
UCSD MEDICAL GROUP
4510 EXECUTIVE DR STE 325
SAN DIEGO, CA 92121-3069
Phone: (619) 294-3746
Fax: (888) 539-8781
After Hours Phone: (619)
294-3746
Provider Gender: Male
License number: A168429
NPI: 1093178220
Provider English Spoken: Yes
Provider Language(s) Spoken:
French
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

RHO, JONG M

Provider ID: 243628
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
8001 FROST ST
SAN DIEGO, CA 92123-2746
Phone: (858) 966-5819
Fax:
After Hours Phone: (858)
966-5819
Provider Gender: Female
License number: G64857
NPI: 1235243999
Provider English Spoken: Yes
Provider Language(s) Spoken:

Korean
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

RISMANCHI, NEGGY

Provider ID: 118530
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FN D TN
8001 FROST ST
SAN DIEGO, CA 92123-2746
Phone: (858) 966-5999
Fax:
After Hours Phone: (858)
966-5999
Provider Gender: Female
License number: A118427
NPI: 1669759148
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Rady Childrens Health
Network

SCHUMANN, RICHARD J

Provider ID: 269967
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
16776 BERNARDO CENTER DR
STE 209
SAN DIEGO, CA 92128-2559
Phone: (858) 675-1112
Fax: (888) 675-1141
After Hours Phone: (858)
675-1112
Provider Gender: Male
License number: A62324
NPI: 1831157916
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Kindred
Hospital San Diego, Vibra
Hospital Of San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SHTRAHMAN, MATTHEW

Provider ID: 115790
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Male
License number: A108752
NPI: 1740440460
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SIAVOSHI, SARA S

Provider ID: 110460
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Female
License number: 20A13495
NPI: 1548604101
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Temecula
Valley Hospital Inc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA:
TECOMA, EVELYN S
Provider ID: 64219
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Female
License number: G58138
NPI: 1174556518
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

TRAUNER, DORIS A

Provider ID: 205504
Board Certified Specialty: Yes
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5999
Fax: (858) 966-4930
After Hours Phone: (858)
966-5999
Provider Gender: Female
License number: G25519
NPI: 1124051420

Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/99
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

TRAUNER, DORIS A

Provider ID: 52604
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDRN
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 576-1700
Fax:
After Hours Phone: (858)
576-1700
Provider Gender: Female
License number: G25519
NPI: 1124051420
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

TROXELL, REGINA M

Provider ID: 201621
Board Certified Specialty: No
UCSD MEDICAL GROUP
4510 EXECUTIVE DR STE 325
SAN DIEGO, CA 92121-3069
Phone: (800) 926-8273

Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A157940
NPI: 1013350586
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):

No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network, Ucsd Medical Group

TROXELL, REGINA M

Provider ID: 201622
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR FL 1
SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A157940
NPI: 1013350586
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):

No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network, Ucsd Medical Group

TROXELL, REGINA M

Provider ID: 210761
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
8001 FROST ST
SAN DIEGO, CA 92123-2746
Phone: (858) 966-5999
Fax: (858) 966-4930

After Hours Phone: (858) 966-5999
Provider Gender: Female
License number: A157940
NPI: 1013350586
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/99

American Sign Language (ASL):
No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network, Ucsd Medical Group

TROXELL, REGINA M

Provider ID: 265111
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY
SAN DIEGO, CA 92123-4232
Phone: (858) 966-5819
Fax: (858) 966-4930
After Hours Phone: (858) 966-5819
Provider Gender: Female
License number: A157940
NPI: 1013350586

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/99
American Sign Language (ASL):

No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network, Ucsd Medical Group

TROXELL, REGINA M

Provider ID: 283167
Board Certified Specialty: No
RADY CHILDRENS HEALTH

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

NETWORK

3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123-4232

Phone: (858) 966-5819

Fax: (858) 966-4930

After Hours Phone: (858)

966-5819

Provider Gender: Female

License number: A157940

NPI: 1013350586

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network, Ucsd Medical Group

WANG, CHING H

Provider ID: 275492

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

8001 FROST ST

SAN DIEGO, CA 92123-2746

Phone: (858) 966-5999

Fax: (858) 966-4930

After Hours Phone: (858)

966-5999

Provider Gender: Male

License number: G86512

NPI: 1023144375

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Marin General

Hosp, California Pacific Med Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

WIEGAND, SARAH E

Provider ID: 284209

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

3030 CHILDRENS WAY # 4

SAN DIEGO, CA 92123-4232

Phone: (858) 966-5819

Fax: (858) 966-4930

After Hours Phone: (858)

966-5819

Provider Gender: Female

License number: 20A16503

NPI: 1164818035

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network, Ucsd Medical Group

WIEGAND, SARAH E

Provider ID: 284210

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-5841

Fax: (858) 966-6728

After Hours Phone: (858)

966-5841

Provider Gender: Female

License number: 20A16503

NPI: 1164818035

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network, Ucsd Medical Group

WIEGAND, SARAH E

Provider ID: 284211

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

8001 FROST ST

SAN DIEGO, CA 92123-2746

Phone: (858) 966-5999

Fax: (858) 966-4930

After Hours Phone: (858)

966-5999

Provider Gender: Female

License number: 20A16503

NPI: 1164818035

Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network, Ucsd Medical Group

ZIMBRIC, MICHAEL R

Provider ID: 206272
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5999
Fax: (858) 966-4930
After Hours Phone: (858)
966-5999
Provider Gender: Male
License number: A95660
NPI: 1487819546
Provider English Spoken: Yes
Provider Language(s) Spoken:
French
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Childrens Hosp And Resrch Ctr
At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/99
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

ZIMBRIC, MICHAEL R

Provider ID: 283174
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
8001 FROST ST
SAN DIEGO, CA 92123-2746
Phone: (858) 966-5999
Fax: (858) 966-4930
After Hours Phone: (858)
966-5999
Provider Gender: Male
License number: A95660
NPI: 1487819546
Provider English Spoken: Yes
Provider Language(s) Spoken:
French
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Childrens Hosp And Resrch Ctr
At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

ZIMBRIC, MICHAEL R

Provider ID: 52605
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 576-1700
Fax:
After Hours Phone: (858)
576-1700
Provider Gender: Male
License number: A95660
NPI: 1487819546
Provider English Spoken: Yes
Provider Language(s) Spoken:
French
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Childrens Hosp And Resrch Ctr
At Oakland
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

NUCLEAR MEDICINE

BELEZZUOLI, ERNEST V

Provider ID: 63804
Board Certified Specialty: Yes
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Male
License number: G74168
NPI: 1083703805
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BELEZZUOLI, ERNEST V
Provider ID: 64272
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240
Fax: (619) 471-9245
After Hours Phone: (619) 471-9240
Provider Gender: Male
License number: G74168
NPI: 1083703805

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HOH, CARL K
Provider ID: 63961
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: G61309
NPI: 1962427682

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HOH, CARL K
Provider ID: 64324
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240
Fax:
After Hours Phone: (619) 471-9240
Provider Gender: Male
License number: G61309
NPI: 1962427682
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

OBSTETRICS / GYNECOLOGY

ADAMCZAK, JOANNA E
Provider ID: 69225
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
7910 FROST ST STE 430
SAN DIEGO, CA 92123-2795
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: A116982
NPI: 1447428420
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Tri City Medical Ctr, Sharp Mary Birch Hosp For Women And Newborns
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

AGARWAL, SANJAY K
Provider ID: 64523
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (619) 543-6248
Fax:
After Hours Phone: (619) 543-6248
Provider Gender: Male
License number: A52018
NPI: 1255489720
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Scripps Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ALIMONOS, LYSISTRATI A
Provider ID: 114809
Board Certified Specialty: No
LOGAN HEIGHTS FAMILY HEALTH CENTER
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Provider Gender: Female
License number: 20A14919
NPI: 1619397031
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Logan Heights Family Health Center
IPA:

ALIMONOS, LYSISTRATI A
Provider ID: 114818
Board Certified Specialty: No
CITY HEIGHTS FAMILY HEALTH CENTERS INC
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619) 515-2400
Provider Gender: Female
License number: 20A14919
NPI: 1619397031
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Grossmont Hospital

Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): City Heights Family Health Centers Inc
IPA:

ALIMONOS, LYSISTRATI A
Provider ID: 114820
Board Certified Specialty: No
DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2560
Fax:
After Hours Phone: (619) 515-2560
Provider Gender: Female
License number: 20A14919
NPI: 1619397031
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Diamond Neighborhoods Family Hlth Ctrs Inc
IPA:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

ALIMONOS, LYSISTRATI A

Provider ID: 114839
Board Certified Specialty: No
NORTH PARK FAMILY HEALTH CENTERS
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619) 515-2424

Provider Gender: Female
License number: 20A14919
NPI: 1619397031
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): North Park Family Health Centers
IPA:

ALIMONOS, LYSISTRATI A

Provider ID: 128384
Board Certified Specialty: No
FAMILY HLTH CTR SAN DIEGO-BEACH AREA
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2444
Fax:
After Hours Phone: (619) 515-2444
Provider Gender: Female

License number: 20A14919
NPI: 1619397031
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-W,F 8:30AM-5:30PM, TH 9AM-6PM, SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Family Hlth Ctr San Diego-Beach Area
IPA:

BAHADOR, AFSHIN

Provider ID: 66125
Board Certified Specialty: No
SOUTH COAST GYNECOLOGIC ONCOLOGY INC
3390 CARMEL MOUNTAIN RD STE 130
SAN DIEGO, CA 92121-1054
Phone: (858) 455-5524
Fax:
After Hours Phone: (858) 455-5524
Provider Gender: Male
License number: A65396
NPI: 1316963713
Provider English Spoken: Yes
Provider Language(s) Spoken: Faroese, Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Grossmont Hospital, Sharp Chula Vista Med Ctr

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BROWN, ELISE S

Provider ID: 201761
Board Certified Specialty: No
UCSD MEDICAL GROUP
6719 ALVARADO RD STE 302
SAN DIEGO, CA 92120-5263
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: G85861
NPI: 1801893201
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BROWN, ELISE S

Provider ID: 282786
Board Certified Specialty: No

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

UCSD MEDICAL GROUP
 3750 CONVOY ST STE 312
 SAN DIEGO, CA 92111-3741
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 License number: G85861
 NPI: 1801893201
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Grossmont
 Hospital, Ucsd Medical Ctr, Ucsd
 La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 16/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

BRUBAKER, LINDA

Provider ID: 113025
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4520 EXECUTIVE DR STE 111
 SAN DIEGO, CA 92121-3019
 Phone: (858) 657-8860
 Fax:
 After Hours Phone: (858)
 657-8860
 Provider Gender: Female
 License number: G87848
 NPI: 1053385195
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical

Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

BUECHNER, CHARLENE A

Provider ID: 127418
 Board Certified Specialty: No
 FAMILY HLTH CTR SAN
 DIEGO-BEACH AREA
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2444
 Fax:
 After Hours Phone: (619)
 515-2444
 Provider Gender: Female
 License number: A68463
 NPI: 1376663831
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp
 Memorial Hospital, Scripps
 Mercy Hospital, Scripps Mercy
 Hospital Chula Vista, Sharp Mary
 Birch Hosp For Women And
 Newborns
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-W,F 8:30AM-5:30PM,
 TH 9AM-6PM, SA 9AM-5PM
 Website: www.fhcsd.org
 Email:

Medical Group(s): Family Hlth Ctr
 San Diego-Beach Area
 IPA:

BUECHNER, CHARLENE A

Provider ID: 127428
 Board Certified Specialty: No
 CITY HEIGHTS FAMILY
 HEALTH CENTERS INC
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2400
 Fax:
 After Hours Phone: (619)
 515-2400
 Provider Gender: Female
 License number: A68463
 NPI: 1376663831
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp
 Memorial Hospital, Scripps
 Mercy Hospital, Scripps Mercy
 Hospital Chula Vista, Sharp Mary
 Birch Hosp For Women And
 Newborns
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: ME
 Hours: M-SA 9AM-5PM
 Website: www.fhcsd.org
 Email:
 Medical Group(s): City Heights
 Family Health Centers Inc
 IPA:

BUECHNER, CHARLENE A

Provider ID: 127429
 Board Certified Specialty: No
 DIAMOND NEIGHBORHOODS
 FAMILY HLTH CTRS INC

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2420
 Fax:
 After Hours Phone: (619)
 515-2420
 Provider Gender: Female
 License number: A68463
 NPI: 1376663831
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp
 Memorial Hospital, Scripps
 Mercy Hospital, Scripps Mercy
 Hospital Chula Vista, Sharp Mary
 Birch Hosp For Women And
 Newborns
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: ME
 Hours: M-SA 9AM-5PM
 Website: www.fhcsd.org
 Email:
 Medical Group(s): Diamond
 Neighborhoods Family Hlth Ctrs
 Inc
 IPA:

BUECHNER, CHARLENE A
 Provider ID: 127455
 Board Certified Specialty: No
 NORTH PARK FAMILY HEALTH
 CENTERS
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax:
 After Hours Phone: (619)
 515-2424
 Provider Gender: Female
 License number: A68463

NPI: 1376663831
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp
 Memorial Hospital, Scripps
 Mercy Hospital, Scripps Mercy
 Hospital Chula Vista, Sharp Mary
 Birch Hosp For Women And
 Newborns
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: ME
 Hours: M-SA 9AM-5PM
 Website: www.fhcsd.org
 Email:
 Medical Group(s): North Park
 Family Health Centers
 IPA:

BUECHNER, CHARLENE A
 Provider ID: 98960
 Board Certified Specialty: No
 SAN DIEGO AMERICAN INDIAN
 HEALTH CENTER
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619)
 515-2300
 Provider Gender: Female
 License number: A68463
 NPI: 1376663831
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp
 Memorial Hospital, Scripps
 Mercy Hospital, Scripps Mercy
 Hospital Chula Vista, Sharp Mary
 Hospital Chula Vista, Sharp Mary

Birch Hosp For Women And
 Newborns
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: ME
 Hours: M-SA 9AM-5PM
 Website: www.fhcsd.org
 Email:
 Medical Group(s): Logan Heights
 Family Health Center
 IPA:

BUECHNER, CHARLENE A
 Provider ID: 98960
 Board Certified Specialty: No
 LOGAN HEIGHTS FAMILY
 HEALTH CENTER
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2300
 Fax:

After Hours Phone: (619)
 515-2300
 Provider Gender: Female
 License number: A68463
 NPI: 1376663831
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp
 Memorial Hospital, Scripps
 Mercy Hospital, Scripps Mercy
 Hospital Chula Vista, Sharp Mary
 Birch Hosp For Women And
 Newborns
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: ME
 Hours: M-SA 9AM-5PM
 Website: www.fhcsd.org

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D. Directorio de proveedores de atención especializada

<p><i>Email:</i> <i>Medical Group(s):</i> Logan Heights Family Health Center <i>IPA:</i></p> <p>CARTER, KHALIL J <i>Provider ID:</i> 1227380 <i>Board Certified Specialty:</i> No LOGAN HEIGHTS FAMILY HEALTH CENTER 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Provider Gender:</i> Male <i>License number:</i> A113001 <i>NPI:</i> 1225231582 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medical Group(s):</i> Logan Heights Family Health Center <i>IPA:</i></p> <p>CARTER, KHALIL J <i>Provider ID:</i> 127373 <i>Board Certified Specialty:</i> No FAMILY HLTH CTR SAN DIEGO-BEACH AREA 3705 MISSION BLVD SAN DIEGO, CA 92109-7104</p>	<p><i>Phone:</i> (619) 515-2444 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2444 <i>Provider Gender:</i> Male <i>License number:</i> A113001 <i>NPI:</i> 1225231582 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-W,F 8:30AM-5:30PM, TH 9AM-6PM, SA 9AM-5PM <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medical Group(s):</i> Family Hlth Ctr San Diego-Beach Area <i>IPA:</i></p> <p>CARTER, KHALIL J <i>Provider ID:</i> 127375 <i>Board Certified Specialty:</i> No CITY HEIGHTS FAMILY HEALTH CENTERS INC 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 <i>Phone:</i> (619) 515-2400 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2400 <i>Provider Gender:</i> Male <i>License number:</i> A113001 <i>NPI:</i> 1225231582 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont</p>	<p>Hospital, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medical Group(s):</i> City Heights Family Health Centers Inc <i>IPA:</i></p> <p>CARTER, KHALIL J <i>Provider ID:</i> 127376 <i>Board Certified Specialty:</i> No DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC 4725 MARKET ST SAN DIEGO, CA 92102-4715 <i>Phone:</i> (619) 515-2420 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2420 <i>Provider Gender:</i> Male <i>License number:</i> A113001 <i>NPI:</i> 1225231582 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medical Group(s):</i> Diamond Neighborhoods Family Hlth Ctrs Inc <i>IPA:</i></p>
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D. Directorio de proveedores de atención especializada

CARTER, KHALIL J

Provider ID: 127381
Board Certified Specialty: No
NORTH PARK FAMILY HEALTH CENTERS
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619) 515-2424
Provider Gender: Male
License number: A113001
NPI: 1225231582
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): North Park Family Health Centers
IPA:

CASELE, HOLLY L

Provider ID: 52475
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 7910 FROST ST STE 430
 SAN DIEGO, CA 92123-2795
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710

Provider Gender: Female
License number: G87630
NPI: 1255348744
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Grossmont Hospital, Tri City Medical Ctr, Sharp Mary Birch Hosp For Women And Newborns, Scripps Memorial Hospital Encinitas, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CATANZARITE, VALERIAN A

Provider ID: 121848
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 7910 FROST ST STE 430
 SAN DIEGO, CA 92123-2795
Phone: (858) 966-6710
Fax: (858) 966-6266
After Hours Phone: (858) 966-6710
Provider Gender: Male
License number: G46026
NPI: 1174694939
Provider English Spoken: Yes
Provider Language(s) Spoken: Russian, Spanish
Cultural Competency: No

Hospital Affiliation: Sharp Memorial Hospital, Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Grossmont Hospital, Tri City Medical Ctr, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CERVANTES, SANDRA M

Provider ID: 114860
Board Certified Specialty: No
LOGAN HEIGHTS FAMILY HEALTH CENTER
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2561
Fax:
After Hours Phone: (619) 515-2561
Provider Gender: Female
License number: A118095
NPI: 1073701041
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital
Medi-Cal Open Panel: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: None

American Sign Language (ASL): No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Logan Heights Family Health Center

IPA:

CERVANTES, SANDRA M

Provider ID: 114864

Board Certified Specialty: No

NORTH PARK FAMILY HEALTH CENTERS

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax:

After Hours Phone: (619)

515-2424

Provider Gender: Female

License number: A118095

NPI: 1073701041

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): North Park Family Health Centers

IPA:

CERVANTES, SANDRA M

Provider ID: 114870

Board Certified Specialty: No

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: (619) 515-2560

Fax:

After Hours Phone: (619)

515-2560

Provider Gender: Female

License number: A118095

NPI: 1073701041

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Diamond Neighborhoods Family Hlth Ctrs Inc

IPA:

CERVANTES, SANDRA M

Provider ID: 114877

Board Certified Specialty: No

CITY HEIGHTS FAMILY HEALTH CENTERS INC

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2400

Fax:

After Hours Phone: (619) 515-2400

Provider Gender: Female

License number: A118095

NPI: 1073701041

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): City Heights Family Health Centers Inc

IPA:

CERVANTES, SANDRA M

Provider ID: 128379

Board Certified Specialty: No

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2444

Fax:

After Hours Phone: (619)

515-2444

Provider Gender: Female

License number: A118095

NPI: 1073701041

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

♿ *Accessibility:*

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

Website: www.fhcsd.org

Email:

Medical Group(s): Family Hlth Ctr San Diego-Beach Area

IPA:

COHEN, MANSOUR J

Provider ID: 205940

Board Certified Specialty: Yes
RADY CHILDRENS HEALTH NETWORK

7695 CARDINAL CT STE 390
SAN DIEGO, CA 92123-3356

Phone: (858) 279-8111

Fax: (858) 279-4703

After Hours Phone: (858)

279-8111

Provider Gender: Male

License number: A34624

NPI: 1346225356

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, Farsi, Hebrew

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Sharp Mary Birch Hosp For Women And Newborns

Medi-Cal Open Panel: Yes

Min/Max Age: 16/999

American Sign Language (ASL): No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

CORMANO, JULIA L

Provider ID: 112487

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222

Fax:

After Hours Phone: (619)

543-6222

Provider Gender: Female

License number: A115304

NPI: 1073740395

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

DEAK, PAMELA W

Provider ID: 64556

Board Certified Specialty: No

UCSD MEDICAL GROUP

4168 FRONT ST

SAN DIEGO, CA 92103-2030

Phone: (619) 543-7878

Fax: (619) 543-5350

After Hours Phone: (619)
543-7878

Provider Gender: Female

License number: A54653

NPI: 1316978554

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-F 8AM-5PM, SA
9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

DUGGAN, BRIDGETTE D

Provider ID: 66127

Board Certified Specialty: No

SOUTH COAST

GYNECOLOGIC ONCOLOGY
INC

3390 CARMEL MOUNTAIN RD
STE 130

SAN DIEGO, CA 92121-1054

Phone: (858) 455-5524

Fax:

After Hours Phone: (858)

455-5524

Provider Gender: Female

License number: G66287

NPI: 1841212081

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Grossmont Hospital, Sharp Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ESKANDER, RAMEZ N

Provider ID: 114324
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A102482
NPI: 1144486929
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: University Of California Irvine Med Ctr, Earl And Lorraine Miller Childrens Hsp, Long Beach Memorial Med Ctr, Providence St Joseph Hospital, Providence St Jude Medical Center, Orange Coast Mem Med Ctr, Fountain Valley Regional Hosp And Med Ctr, Corona Regional Med Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):

No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

FOLCH TORRES-AGUIAR, BEATRIZ M

Provider ID: 120486
Board Certified Specialty: No
 LOGAN HEIGHTS FAMILY HEALTH CENTER
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Provider Gender: Female
License number: A148014
NPI: 1457794752
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Yue Chinese
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Logan Heights Family Health Center
IPA:

FOLCH TORRES-AGUIAR, BEATRIZ M

Provider ID: 120494
Board Certified Specialty: No

FAMILY HLTH CTR SAN DIEGO-BEACH AREA
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2444
Fax:
After Hours Phone: (619) 515-2444
Provider Gender: Female
License number: A148014
NPI: 1457794752
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Yue Chinese
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-W,F 8:30AM-5:30PM, TH 9AM-6PM, SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Family Hlth Ctr San Diego-Beach Area
IPA:

FOLCH TORRES-AGUIAR, BEATRIZ M

Provider ID: 120508
Board Certified Specialty: No
 CITY HEIGHTS FAMILY HEALTH CENTERS INC
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619) 515-2400
Provider Gender: Female
License number: A148014
NPI: 1457794752

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Yue Chinese
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): City Heights Family Health Centers Inc
IPA:

FOLCH TORRES-AGUIAR, BEATRIZ M

Provider ID: 120509
Board Certified Specialty: No
 DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2560
Fax:
After Hours Phone: (619) 515-2560
Provider Gender: Female
License number: A148014
NPI: 1457794752
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Yue Chinese
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* ME
Hours: M-SA 9AM-5PM

Website: www.fhcsd.org
Email:
Medical Group(s): Diamond Neighborhoods Family Hlth Ctrs Inc
IPA:

FOLCH TORRES-AGUIAR, BEATRIZ M

Provider ID: 120520
Board Certified Specialty: No
 NORTH PARK FAMILY HEALTH CENTERS
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619) 515-2424
Provider Gender: Female
License number: A148014
NPI: 1457794752
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Yue Chinese
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): North Park Family Health Centers
IPA:

FRATTO, VICTORIA M

Provider ID: 97636
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR

SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: A136189
NPI: 1124318472
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Yue Chinese
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FRUGONI, GINA R , MD

Provider ID: 270056
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A99646
NPI: 1578729315
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Yue Chinese
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: Yes

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D. Directorio de proveedores de atención especializada

Min/Max Age: 16/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

FRUGONI, GINA R

Provider ID: 64563
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
 Phone: (619) 543-7878
 Fax: (619) 543-5350
 After Hours Phone: (619)
 543-7878
 Provider Gender: Female
 License number: A99646
 NPI: 1578729315
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA
 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

GABBY, LAURYN C

Provider ID: 269692
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST

SAN DIEGO, CA 92103-2030
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 License number: A151539
 NPI: 1003330572
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

GROSS, ERIN A

Provider ID: 64570
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
 Phone: (619) 543-6248
 Fax: (858) 657-8666
 After Hours Phone: (619)
 543-6248
 Provider Gender: Female
 License number: A99544
 NPI: 1013175009
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton

Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA
 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

GUPTA, PRATIMA

Provider ID: 257547
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 16950 VIA TAZON
 SAN DIEGO, CA 92127-1607
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 License number: A832373
 NPI: 1891749842
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Hindi, Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 16/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

GUPTA, PRATIMA

Provider ID: 257548

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273

Provider Gender: Female
License number: A832373
NPI: 1891749842
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi, Spanish

Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL):
No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HARVEY, SCOTT A

Provider ID: 278915
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273

Provider Gender: Male
License number: C169168
NPI: 1457662868
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL):
No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HARVEY, SCOTT A

Provider ID: 278917
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: C169168
NPI: 1457662868
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL):
No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HEBERT, STEPHEN A

Provider ID: 64573
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (619) 543-6248
Fax:

After Hours Phone: (619)
543-6248
Provider Gender: Male
License number: G40602
NPI: 1730127069
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Scripps
Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HERRERO, TIFFANY C

Provider ID: 270001
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (650) 243-7942
Fax:

After Hours Phone: (650)
243-7942
Provider Gender: Female
License number: A119846
NPI: 1609140524
Provider English Spoken: Yes
Provider Language(s) Spoken:
Mandarin, Spanish

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital, Chula Vista, Stanford Health Care, Lucile Salter Packard Childrens Hosp
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

HOANG, MAI P
Provider ID: 208294
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A130031
NPI: 1104143593
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Ucsd Medical Group
HOM, MARIANNE S
Provider ID: 242751
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A146335
NPI: 1972047397
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HUSKEY, DANA E
Provider ID: 127325
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
7910 FROST ST STE 430
SAN DIEGO, CA 92123-2795

Phone: (858) 966-6710
Fax:
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: A99128
NPI: 1538146337
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Sharp Mary Birch Hosp For Women And Newborns, Palomar Medical Center, Pomerado Hospital, Sierra Vista Regional Med Ctr, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

HUSKEY, DANA E
Provider ID: 127326
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
3003 HEALTH CENTER DR
SAN DIEGO, CA 92123-2700
Phone: (858) 966-6710
Fax:
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: A99128
NPI: 1538146337

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Sharp Mary Birch Hosp For Women And Newborns, Palomar Medical Center, Pomerado Hospital, Sierra Vista Regional Med Ctr, Rady Childrens Hospital San Diego

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

KELLY, THOMAS F

Provider ID: 64584
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (619) 543-7878
Fax:

After Hours Phone: (619) 543-7878
Provider Gender: Male
License number: G60630
NPI: 1336203496
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Palomar Medical

Center
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KINGSTON, JESSICA M

Provider ID: 64586
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (619) 543-6248
Fax:
After Hours Phone: (619) 543-6248

Provider Gender: Female
License number: A70367
NPI: 1538106372
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KLEIN, DAVID A

Provider ID: 271560
Board Certified Specialty: No
UCSD MEDICAL GROUP
16950 VIA TAZON
SAN DIEGO, CA 92127-1607
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A155090
NPI: 1780073635
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KLEIN, DAVID A

Provider ID: 271561
Board Certified Specialty: No
UCSD MEDICAL GROUP
6030 VILLAGE WAY
SAN DIEGO, CA 92130-2972
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A155090
NPI: 1780073635
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KOHATSU, KAREN E

Provider ID: 205481
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
11939 RANCHO BERNARDO RD STE 110
SAN DIEGO, CA 92128-2074
Phone: (858) 618-1156
Fax: (858) 618-3314
After Hours Phone: (858) 618-1156
Provider Gender: Female
License number: G70665
NPI: 1679517239
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Pomerado Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Rady Childrens Health Network
LACOURSIERE, DAPHNE Y
Provider ID: 64594
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (619) 543-7878
Fax: (619) 543-5350
After Hours Phone: (619) 543-7878

Provider Gender: Female
License number: A74138
NPI: 1316037922
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LAMALE-SMITH, LEAH M

Provider ID: 208681
Board Certified Specialty: No
UCSD MEDICAL GROUP
4910 DIRECTORS PL STE 200
SAN DIEGO, CA 92121-3814
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273

Provider Gender: Female
License number: A135831
NPI: 1396904876
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LAMALE-SMITH, LEAH M

Provider ID: 285519
Board Certified Specialty: No
UCSD MEDICAL GROUP
16950 VIA TAZON
SAN DIEGO, CA 92127-1607
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A135831
NPI: 1396904876
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LAMALE-SMITH, LEAH M

Provider ID: 99917
Board Certified Specialty: No
UCSD MEDICAL GROUP
4910 DIRECTORS PL STE 200
SAN DIEGO, CA 92121-3814
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A135831
NPI: 1396904876
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LAROCQUE, TODD M

Provider ID: 282091
Board Certified Specialty: No
HEALTH EXCEL IPA INC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

Phone: (619) 280-7072
Fax: (619) 961-0804
After Hours Phone: (619)
280-7072
Provider Gender: Male
License number: C55172
NPI: 1225140288
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas,
Palomar Medical Center, Scripps
Mercy Hospital, Scripps Mercy
Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 12/999
American Sign Language (ASL):
No
♿ *Accessibility:* P, EB, IB, E
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

LAURENT, LOUISE C

Provider ID: 64595
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (619) 543-6248
Fax:
After Hours Phone: (619)
543-6248
Provider Gender: Female
License number: A80409
NPI: 1770532707
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Scripps

Mercy Hospital, Scripps Mercy
Hospital Chula Vista, Scripps
Memorial Hospital Encinitas,
Palomar Medical Center
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LIPSCHITZ, LISA S

Provider ID: 115420
Board Certified Specialty: No
FAMILY HLTH CTR SAN
DIEGO-BEACH AREA
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2444
Fax:
After Hours Phone: (619)
515-2444
Provider Gender: Female
License number: A72005
NPI: 1649208711
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Grossmont Hospital,
Sharp Coronado Hosp And
Healthcare Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-W, F 8:30AM-5:30PM,
TH 9AM-6PM, SA 9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Website: www.fhcsd.org

Email:

Medical Group(s): Family Hlth Ctr
San Diego-Beach Area

IPA:

LIPSCHITZ, LISA S

Provider ID: 115427

Board Certified Specialty: No

CITY HEIGHTS FAMILY
HEALTH CENTERS INC

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2400

Fax:

After Hours Phone: (619)

515-2400

Provider Gender: Female

License number: A72005

NPI: 1649208711

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital, Grossmont Hospital,

Sharp Coronado Hosp And

Healthcare Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): City Heights

Family Health Centers Inc

IPA:

LIPSCHITZ, LISA S

Provider ID: 115428

Board Certified Specialty: No

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: (619) 515-2560

Fax:

After Hours Phone: (619)

515-2560

Provider Gender: Female

License number: A72005

NPI: 1649208711

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Sharp

Coronado Hosp And Healthcare

Ctr, Scripps Mercy Hospital,

Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Diamond

Neighborhoods Family Hlth Ctrs

Inc

IPA:

LIPSCHITZ, LISA S

Provider ID: 115432

Board Certified Specialty: No

NORTH PARK FAMILY HEALTH
CENTERS

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax:

After Hours Phone: (619)

515-2424

Provider Gender: Female

License number: A72005

NPI: 1649208711

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital, Grossmont Hospital,

Sharp Coronado Hosp And

Healthcare Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): North Park

Family Health Centers

IPA:

LIPSCHITZ, LISA S

Provider ID: 25621

Board Certified Specialty: No

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Provider Gender: Female

License number: A72005

NPI: 1649208711

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital, Grossmont Hospital,

Sharp Coronado Hosp And

Healthcare Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>♿ <i>Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medical Group(s):</i> Logan Heights Family Health Center <i>IPA:</i></p>	<p>NORTH PARK FAMILY HEALTH CENTERS 3544 30TH ST SAN DIEGO, CA 92104-4120 <i>Phone:</i> (619) 515-2424 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2424</p>	<p><i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista</p>
<p>LOEFFLER, ALLISON M <i>Provider ID:</i> 115543 <i>Board Certified Specialty:</i> No LOGAN HEIGHTS FAMILY HEALTH CENTER 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300</p>	<p><i>Provider Gender:</i> Female <i>License number:</i> A116680 <i>NPI:</i> 1700073962 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista</p>	<p><i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medical Group(s):</i> City Heights Family Health Centers Inc <i>IPA:</i></p>
<p><i>Provider Gender:</i> Female <i>License number:</i> A116680 <i>NPI:</i> 1700073962 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No</p>	<p><i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medical Group(s):</i> North Park Family Health Centers <i>IPA:</i></p>	<p>LOEFFLER, ALLISON M <i>Provider ID:</i> 115561 <i>Board Certified Specialty:</i> No DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC 4725 MARKET ST SAN DIEGO, CA 92102-4715 <i>Phone:</i> (619) 515-2560 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2560</p>
<p><i>Provider Gender:</i> Female <i>License number:</i> A116680 <i>NPI:</i> 1700073962 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medical Group(s):</i> Logan Heights Family Health Center <i>IPA:</i></p>	<p>LOEFFLER, ALLISON M <i>Provider ID:</i> 115560 <i>Board Certified Specialty:</i> No CITY HEIGHTS FAMILY HEALTH CENTERS INC 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 <i>Phone:</i> (619) 515-2400 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2400</p>	<p><i>Provider Gender:</i> Female <i>License number:</i> A116680 <i>NPI:</i> 1700073962 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista</p>
<p>LOEFFLER, ALLISON M <i>Provider ID:</i> 115545 <i>Board Certified Specialty:</i> No</p>	<p><i>Provider Gender:</i> Female <i>License number:</i> A116680 <i>NPI:</i> 1700073962</p>	<p><i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i></p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

No ♿ <i>Accessibility</i> : ME <i>Hours</i> : M-SA 9AM-5PM <i>Website</i> : www.fhcsd.org <i>Email</i> : <i>Medical Group(s)</i> : Diamond Neighborhoods Family Hlth Ctrs Inc <i>IPA</i> :	LUKACZ, EMILY S <i>Provider ID</i> : 64604 <i>Board Certified Specialty</i> : No UCSD MEDICAL GROUP 4168 FRONT ST SAN DIEGO, CA 92103-2030 <i>Phone</i> : (858) 657-8745 <i>Fax</i> : (858) 657-8666 <i>After Hours Phone</i> : (858) 657-8745 <i>Provider Gender</i> : Female <i>License number</i> : A63540 <i>NPI</i> : 1750339446 <i>Provider English Spoken</i> : Yes <i>Provider Language(s) Spoken</i> : Spanish <i>Cultural Competency</i> : No <i>Hospital Affiliation</i> : Ucsd Medical Ctr <i>Medi-Cal Open Panel</i> : No <i>Min/Max Age</i> : None <i>American Sign Language (ASL)</i> : No ♿ <i>Accessibility</i> : W <i>Hours</i> : M-F 8AM-5PM, SA 9AM-5PM <i>Website</i> : <i>Email</i> : <i>Medical Group(s)</i> : <i>IPA</i> :	<i>Provider English Spoken</i> : Yes <i>Provider Language(s) Spoken</i> : <i>Cultural Competency</i> : No <i>Hospital Affiliation</i> : <i>Medi-Cal Open Panel</i> : No <i>Min/Max Age</i> : None <i>American Sign Language (ASL)</i> : No ♿ <i>Accessibility</i> : W <i>Hours</i> : M-F 8AM-5PM, SA 9AM-5PM <i>Website</i> : <i>Email</i> : <i>Medical Group(s)</i> : <i>IPA</i> :
LOEFFLER, ALLISON M <i>Provider ID</i> : 128426 <i>Board Certified Specialty</i> : No LEMON GROVE FAMILY HEALTH CENTER 3705 MISSION BLVD SAN DIEGO, CA 92109-7104 <i>Phone</i> : (619) 515-2444 <i>Fax</i> : <i>After Hours Phone</i> : (619) 515-2444 <i>Provider Gender</i> : Female <i>License number</i> : A116680 <i>NPI</i> : 1700073962 <i>Provider English Spoken</i> : Yes <i>Provider Language(s) Spoken</i> : Spanish <i>Cultural Competency</i> : No <i>Hospital Affiliation</i> : Grossmont Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista <i>Medi-Cal Open Panel</i> : Yes <i>Min/Max Age</i> : None <i>American Sign Language (ASL)</i> : No ♿ <i>Accessibility</i> : <i>Hours</i> : M-W,F 8:30AM-5:30PM, TH 9AM-6PM, SA 9AM-5PM <i>Website</i> : www.fhcsd.org <i>Email</i> : <i>Medical Group(s)</i> : Family Hlth Ctr San Diego-Beach Area <i>IPA</i> :	MACKAY, GILLIAN <i>Provider ID</i> : 200965 <i>Board Certified Specialty</i> : No UCSD MEDICAL GROUP 16950 VIA TAZON SAN DIEGO, CA 92127-1607 <i>Phone</i> : (800) 926-8273 <i>Fax</i> : <i>After Hours Phone</i> : (800) 926-8273 <i>Provider Gender</i> : Female <i>License number</i> : A113346 <i>NPI</i> : 1770702177 <i>Provider English Spoken</i> : Yes <i>Provider Language(s) Spoken</i> : <i>Cultural Competency</i> : No <i>Hospital Affiliation</i> : Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel</i> : Yes <i>Min/Max Age</i> : 16/999 <i>American Sign Language (ASL)</i> : No ♿ <i>Accessibility</i> : <i>Hours</i> : M-SA 9AM-5PM <i>Website</i> : <i>Email</i> : <i>Medical Group(s)</i> : <i>IPA</i> : Ucsd Medical Group	MACAULAY, KATHRYN M <i>Provider ID</i> : 64606 <i>Board Certified Specialty</i> : No UCSD MEDICAL GROUP 4168 FRONT ST SAN DIEGO, CA 92103-2030 <i>Phone</i> : (619) 543-7878 <i>Fax</i> : (619) 543-5350 <i>After Hours Phone</i> : (619) 543-7878 <i>Provider Gender</i> : Female <i>License number</i> : A61603 <i>NPI</i> : 1235154618

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

MACKAY, GILLIAN

Provider ID: 200966
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A113346
NPI: 1770702177
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MANI, PARVIN P

Provider ID: 242345
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
5555 RESERVOIR DR STE 208
SAN DIEGO, CA 92120-5187
Phone: (619) 583-7555
Fax: (619) 583-0555
After Hours Phone: (619)
583-7555
Provider Gender: Female
License number: A52580
NPI: 1518925015

Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi
Cultural Competency: No
Hospital Affiliation: Sharp Mary
Birch Hosp For Women And
Newborns, Ucsd La Jolla John
Sally Thornton, Grossmont
Hospital, Alvarado Hospital Llc
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings
Medical Group-Sd

MANSOUR, ANMAR A

Provider ID: 204717
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
7695 CARDINAL CT STE 370
SAN DIEGO, CA 92123-3332
Phone: (858) 277-1599
Fax: (858) 225-7261
After Hours Phone: (866)
558-7293
Provider Gender: Female
License number: A92470
NPI: 1881617884
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Sharp Mary
Birch Hosp For Women And
Newborns, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL):
No
Accessibility: P, EB, IB, E
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

No
Accessibility: P, EB, IB, E
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

MANSOUR, ANMAR A

Provider ID: 215785
Board Certified Specialty: No
HEALTH EXCEL IPA INC
7695 CARDINAL CT STE 370
SAN DIEGO, CA 92123-3332
Phone: (858) 277-1599
Fax: (858) 225-7261
After Hours Phone: (866)
558-7293
Provider Gender: Female
License number: A92470
NPI: 1881617884
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Sharp Mary
Birch Hosp For Women And
Newborns, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL):
No
Accessibility: P, EB, IB, E
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

MCCAULLEY, JILL A

Provider ID: 110414
Board Certified Specialty: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

UCSD MEDICAL GROUP
4910 DIRECTORS PL STE 200
SAN DIEGO, CA 92121-3814
Phone: (858) 657-7200
Fax:
After Hours Phone: (858)
657-7200
Provider Gender: Female
License number: A131156
NPI: 1669607388
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Scripps Memorial Hospital,
Scripps Mercy Hospital, Scripps
Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MCNALLY, COLLEEN P
Provider ID: 209894
Board Certified Specialty: No
UCSD MEDICAL GROUP
3750 CONVOY ST STE 312
SAN DIEGO, CA 92111-3741
Phone: (619) 543-7400
Fax: (619) 543-7401
After Hours Phone: (619)
543-7400
Provider Gender: Female
License number: G74059
NPI: 1114039062
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla

John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MCQUEEN, DANA B
Provider ID: 110865
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Female
License number: A141023
NPI: 1669768180
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MEADOWS, AUDRA R
Provider ID: 285741
Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: C171680
NPI: 1467585521
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MEADOWS, AUDRA R
Provider ID: 285742
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: C171680
NPI: 1467585521
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes
 Min/Max Age: 16/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

MELLENDEZ BERRIOS, IARA DEL M

Provider ID: 115031
 Board Certified Specialty: No
 CITY HEIGHTS FAMILY HEALTH CENTERS INC
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2400
 Fax:
 After Hours Phone: (619) 515-2400
 Provider Gender: Female
 License number: A114181
 NPI: 1740514249
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: ME
 Hours: M-SA 9AM-5PM
 Website: www.fhcsd.org
 Email:
 Medical Group(s): City Heights Family Health Centers Inc
 IPA:

MELLENDEZ BERRIOS, IARA

DEL M
 Provider ID: 115034
 Board Certified Specialty: No
 DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2560
 Fax:
 After Hours Phone: (619) 515-2560
 Provider Gender: Female
 License number: A114181
 NPI: 1740514249
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: ME
 Hours: M-SA 9AM-5PM
 Website: www.fhcsd.org
 Email:
 Medical Group(s): Diamond Neighborhoods Family Hlth Ctrs Inc
 IPA:

MELLENDEZ BERRIOS, IARA DEL M

Provider ID: 115051
 Board Certified Specialty: No
 NORTH PARK FAMILY HEALTH CENTERS
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax:
 After Hours Phone: (619) 515-2424

Provider Gender: Female
 License number: A114181
 NPI: 1740514249
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: ME
 Hours: M-SA 9AM-5PM
 Website: www.fhcsd.org
 Email:
 Medical Group(s): North Park Family Health Centers
 IPA:

MELLENDEZ BERRIOS, IARA DEL M

Provider ID: 128388
 Board Certified Specialty: No
 FAMILY HLTH CTR SAN DIEGO-BEACH AREA
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2444
 Fax:
 After Hours Phone: (619) 515-2444
 Provider Gender: Female
 License number: A114181
 NPI: 1740514249
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital, Grossmont Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

No ♿ <i>Accessibility:</i> <i>Hours:</i> M-W,F 8:30AM-5:30PM, TH 9AM-6PM, SA 9AM-5PM <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medical Group(s):</i> Family Hlth Ctr San Diego-Beach Area <i>IPA:</i>	<i>Provider ID:</i> 284268 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female <i>License number:</i> A159003 <i>NPI:</i> 1720510779 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> French <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> University Hsp Of San Diego Co, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 16/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group	<i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> French <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> University Hsp Of San Diego Co, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 16/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group
MELENDEZ BERRIOS, IARA DEL M <i>Provider ID:</i> 75971 <i>Board Certified Specialty:</i> No LOGAN HEIGHTS FAMILY HEALTH CENTER 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Provider Gender:</i> Female <i>License number:</i> A114181 <i>NPI:</i> 1740514249 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medical Group(s):</i> Logan Heights Family Health Center <i>IPA:</i>	MILLER, CHRISTINE B <i>Provider ID:</i> 64614 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 4168 FRONT ST SAN DIEGO, CA 92103-2030 <i>Phone:</i> (619) 543-7878 <i>Fax:</i> (619) 543-5350 <i>After Hours Phone:</i> (619) 543-7878 <i>Provider Gender:</i> Female <i>License number:</i> G82246 <i>NPI:</i> 1154346583 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM	MEURICE, MARIELLE ERENDIRA LUCILLE <i>Provider ID:</i> 284270 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 4168 FRONT ST SAN DIEGO, CA 92103-2030 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female <i>License number:</i> A159003 <i>NPI:</i> 1720510779
MEURICE, MARIELLE ERENDIRA LUCILLE		

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D. Directorio de proveedores de atención especializada

Website:

Email:

Medical Group(s):

IPA:

MODY, SHEILA K

Provider ID: 64616

Board Certified Specialty: No

UCSD MEDICAL GROUP

4168 FRONT ST

SAN DIEGO, CA 92103-2030

Phone: (619) 543-6248

Fax: (858) 657-8666

After Hours Phone: (619)

543-6248

Provider Gender: Female

License number: A117818

NPI: 1952561102

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

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

9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

MOORE, THOMAS R

Provider ID: 64617

Board Certified Specialty: No

UCSD MEDICAL GROUP

4168 FRONT ST

SAN DIEGO, CA 92103-2030

Phone: (619) 543-7878

Fax: (619) 543-5350

After Hours Phone: (619)

543-7878

Provider Gender: Male

License number: G49930

NPI: 1184682379

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Scripps Memorial Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

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

9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

MORAN, THOMAS P

Provider ID: 270953

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

220 EUCLID AVE STE 30

SAN DIEGO, CA 92114-3617

Phone: (619) 881-4500

Fax:

After Hours Phone: (619)

881-4500

Provider Gender: Male

License number: G59541

NPI: 1093887069

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital, Sharp Memorial

Hospital, Sharp Chula Vista Med

Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 16/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

MORAN, THOMAS P

Provider ID: 48123

Board Certified Specialty: No

PLANNED PARENTHOOD OF

THE PACIFIC SOUTHWEST

2017 1ST AVE STE 100

SAN DIEGO, CA 92101-9001

Phone: (888) 743-7526

Fax:

After Hours Phone: (888)

743-7526

Provider Gender: Male

License number: G59541

NPI: 1093887069

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital, Sharp Memorial

Hospital, Sharp Chula Vista Med

Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 7:30AM-4PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

NGUYEN, SON H

Provider ID: 271018

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

1075 CAMINO DEL RIO S

SAN DIEGO, CA 92108-3538

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D. Directorio de proveedores de atención especializada

Phone: (619) 881-4500

Fax:

After Hours Phone: (619)
881-4500

Provider Gender: Male

License number: G63695

NPI: 1548332513

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 16/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

ORAND-MEDICA, ALEXA C

Provider ID: 272596

Board Certified Specialty: No
UCSD MEDICAL GROUP

9333 GENESEE AVE # 340

SAN DIEGO, CA 92121-2111

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

License number: A154785

NPI: 1639524424

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 16/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

PINSON, KELSEY A

Provider ID: 284286

Board Certified Specialty: No

UCSD MEDICAL GROUP

4910 DIRECTORS PL STE 200

SAN DIEGO, CA 92121-3814

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

License number: A158192

NPI: 1841722485

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr, University Hsp Of
San Diego Co

Medi-Cal Open Panel: Yes

Min/Max Age: 16/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

PINSON, KELSEY A

Provider ID: 284287

Board Certified Specialty: No

UCSD MEDICAL GROUP

4168 FRONT ST

SAN DIEGO, CA 92103-2030

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

License number: A158192

NPI: 1841722485

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr, University Hsp Of
San Diego Co

Medi-Cal Open Panel: Yes

Min/Max Age: 16/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

PINSON, KELSEY A

Provider ID: 284288

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

License number: A158192

NPI: 1841722485

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr, University Hsp Of
San Diego Co

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

PRIVER, DAVID M

Provider ID: 271005
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1075 CAMINO DEL RIO S
SAN DIEGO, CA 92108-3538
Phone: (619) 280-4213
Fax:
After Hours Phone: (619)
280-4213
Provider Gender: Male
License number: C38171
NPI: 1710089941
Provider English Spoken: Yes
Provider Language(s) Spoken:
French, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Scripps
Mercy Hospital, Sharp Mary
Birch Hosp For Women And
Newborns
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

RESNIK, JAMIE L

Provider ID: 271534
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A66580
NPI: 1558310557
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

RESNIK, JAMIE L

Provider ID: 271536
Board Certified Specialty: No
UCSD MEDICAL GROUP
16950 VIA TAZON
SAN DIEGO, CA 92127-1607
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A66580
NPI: 1558310557
Provider English Spoken: Yes
Provider Language(s) Spoken:

Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

RESNIK, JAMIE L

Provider ID: 271537
Board Certified Specialty: No
UCSD MEDICAL GROUP
6030 VILLAGE WAY
SAN DIEGO, CA 92130-2972
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A66580
NPI: 1558310557
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

IPA: Ucsd Medical Group

RESNIK, JAMIE L

Provider ID: 64633

Board Certified Specialty: No

UCSD MEDICAL GROUP

4168 FRONT ST

SAN DIEGO, CA 92103-2030

Phone: (619) 543-6248

Fax:

After Hours Phone: (619)

543-6248

Provider Gender: Female

License number: A66580

NPI: 1558310557

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

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

9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

RIEGER, MARY M

Provider ID: 126472

Board Certified Specialty: No

UCSD MEDICAL GROUP

4520 EXECUTIVE DR STE 360

SAN DIEGO, CA 92121-3020

Phone: (858) 657-8737

Fax:

After Hours Phone: (858)

657-8737

Provider Gender: Female

License number: A154692

NPI: 1134548399

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

RIES, MAUREEN C

Provider ID: 124479

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222

Fax:

After Hours Phone: (619)

543-6222

Provider Gender: Female

License number: A127234

NPI: 1750544516

Provider English Spoken: Yes

Provider Language(s) Spoken:

Indonesian, Spanish, Swahili

Cultural Competency: No

Hospital Affiliation: University Of

California Irvine Med Ctr, Ucsd

Medical Ctr, Ucsd La Jolla John

Sally Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

RIES, MAUREEN C

Provider ID: 125254

Board Certified Specialty: No

UCSD MEDICAL GROUP

4168 FRONT ST

SAN DIEGO, CA 92103-2030

Phone: (619) 543-6248

Fax:

After Hours Phone: (619)

543-6248

Provider Gender: Female

License number: A127234

NPI: 1750544516

Provider English Spoken: Yes

Provider Language(s) Spoken:

Indonesian, Spanish, Swahili

Cultural Competency: No

Hospital Affiliation: University Of

California Irvine Med Ctr, Ucsd

Medical Ctr, Ucsd La Jolla John

Sally Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

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

9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

RIVAS, RENEE N

Provider ID: 284298

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A173043
NPI: 1295263861
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
♿ Accessibility: Hours: M-SA 9AM-5PM
Website: Email: Medical Group(s): IPA: Ucsd Medical Group

RODRIGUEZ JEREZ, ROBERTO D
Provider ID: 130080
Board Certified Specialty: No
NORTH PARK FAMILY HEALTH CENTERS
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: After Hours Phone: (619) 515-2424
Provider Gender: Male
License number: A154298
NPI: 1710316450
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Sharp Coronado Hosp

And Healthcare Ctr, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email: Medical Group(s): North Park Family Health Centers
IPA:

RODRIGUEZ JEREZ, ROBERTO D
Provider ID: 130084
Board Certified Specialty: No
DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2420
Fax: After Hours Phone: (619) 515-2420
Provider Gender: Male
License number: A154298
NPI: 1710316450
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:

Medical Group(s): Diamond Neighborhoods Family Hlth Ctrs Inc
IPA:

RODRIGUEZ JEREZ, ROBERTO D
Provider ID: 130085
Board Certified Specialty: No
CITY HEIGHTS FAMILY HEALTH CENTERS INC
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax: After Hours Phone: (619) 515-2400
Provider Gender: Male
License number: A154298
NPI: 1710316450
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email: Medical Group(s): City Heights Family Health Centers Inc
IPA:

RODRIGUEZ JEREZ, ROBERTO D
Provider ID: 130087
Board Certified Specialty: No
FAMILY HLTH CTR SAN

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

DIEGO-BEACH AREA
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (616) 515-2444
Fax:
After Hours Phone: (616)
515-2444
Provider Gender: Male
License number: A154298
NPI: 1710316450
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Sharp Coronado Hosp
And Healthcare Ctr, Grossmont
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-W,F 8:30AM-5:30PM,
TH 9AM-6PM, SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Family Hlth Ctr
San Diego-Beach Area
IPA:

**RODRIGUEZ JEREZ,
ROBERTO D**
Provider ID: 130088
Board Certified Specialty: No
LOGAN HEIGHTS FAMILY
HEALTH CENTER
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Provider Gender: Male
License number: A154298

NPI: 1710316450
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Sharp Coronado Hosp
And Healthcare Ctr, Grossmont
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Logan Heights
Family Health Center
IPA:

SANDOVAL, SELINA M
Provider ID: 270560
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A167853
NPI: 1336599653
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL):
No
♿ Accessibility:

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group
SCHWENDEMANN, WADE D
Provider ID: 122023
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN
7910 FROST ST STE 430
SAN DIEGO, CA 92123-2795
Phone: (858) 966-6710
Fax:
After Hours Phone: (858)
966-6710
Provider Gender: Male
License number: A109228
NPI: 1477563302
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Scripps Memorial Hospital,
Grossmont Hospital, Sharp
Memorial Hospital, Sharp Mary
Birch Hosp For Women And
Newborns, Tri City Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network
SEFA-BOAKYE, KOFI D
Provider ID: 205413

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: Yes
RADY CHILDRENS HEALTH NETWORK
286 EUCLID AVE STE 205
SAN DIEGO, CA 92114-3612
Phone: (619) 263-6141
Fax: (619) 263-7236
After Hours Phone: (619) 263-6141

Provider Gender: Male
License number: G59670
NPI: 1902993660
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital Chula Vista

Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc, Rady Childrens Health Network

SEFA-BOAKYE, KOFI D

Provider ID: 209741
Board Certified Specialty: Yes
HEALTH EXCEL IPA INC
286 EUCLID AVE STE 205
SAN DIEGO, CA 92114-3612
Phone: (619) 263-6141
Fax: (619) 263-7236
After Hours Phone: (619) 263-6141
Provider Gender: Male
License number: G59670

NPI: 1902993660
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 12/110
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc, Rady Childrens Health Network

SEMO, ROBERT J

Provider ID: 64642
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (619) 543-7878
Fax: (619) 543-5350
After Hours Phone: (619) 543-7878
Provider Gender: Male
License number: A42951
NPI: 1326030669
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Sharp Mary Birch Hosp For Women And Newborns, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None

American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SHAH, NEMI M

Provider ID: 272580
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A168801
NPI: 1558715268
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SUTTON, ALICE C

Provider ID: 121249
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: A146708
NPI: 1669815437
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SUYAMA, JULIE A

Provider ID: 284290
Board Certified Specialty: No
UCSD MEDICAL GROUP
4520 EXECUTIVE DR STE 360
SAN DIEGO, CA 92121-3020
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A172670
NPI: 1306372800
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd

Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SUYAMA, JULIE A

Provider ID: 284291
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A172670
NPI: 1306372800
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

TAJRAN, DEENA S

Provider ID: 204961

Board Certified Specialty: No
HEALTH EXCEL IPA INC
10737 CAMINO RUIZ STE 114
SAN DIEGO, CA 92126-2361
Phone: (858) 578-9600
Fax: (858) 578-9065
After Hours Phone: (858) 578-9600
Provider Gender: Female
License number: A55154
NPI: 1891757217
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Sharp Memorial Hospital, Sharp Mary Birch Hosp For Women And Newborns
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

THOMAS, STEVEN J

Provider ID: 64221
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6600
Fax: (619) 543-5767
After Hours Phone: (619) 543-6600
Provider Gender: Male
License number: A40379
NPI: 1639242589
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p><i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Palomar Medical Center, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group</p>	<p>No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group</p>	<p><i>Phone:</i> (619) 543-7878 <i>Fax:</i> <i>After Hours Phone:</i> (619) 543-7878 <i>Provider Gender:</i> Female <i>License number:</i> A154086 <i>NPI:</i> 1194139766 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>
<p>THOMSON, SAMANTHA L <i>Provider ID:</i> 285174 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female <i>License number:</i> A149038 <i>NPI:</i> 1689013468 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Cedars Sinai Medical Center, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 16/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group</p>	<p>THOMSON, SAMANTHA L <i>Provider ID:</i> 285176 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 4168 FRONT ST SAN DIEGO, CA 92103-2030 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female <i>License number:</i> A149038 <i>NPI:</i> 1689013468 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Cedars Sinai Medical Center, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 16/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group</p>	<p>TITH, TEVY <i>Provider ID:</i> 73303 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 7910 FROST ST STE 430 SAN DIEGO, CA 92123-2795 <i>Phone:</i> (858) 966-6710 <i>Fax:</i> <i>After Hours Phone:</i> (858) 966-6710 <i>Provider Gender:</i> Female <i>License number:</i> A103521 <i>NPI:</i> 1588816086 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady</p>
<p>THOMSON, SAMANTHA L <i>Provider ID:</i> 285174 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female <i>License number:</i> A149038 <i>NPI:</i> 1689013468 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Cedars Sinai Medical Center, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 16/999 <i>American Sign Language (ASL):</i></p>	<p>TILFORD, SARAH A <i>Provider ID:</i> 126503 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 4168 FRONT ST SAN DIEGO, CA 92103-2030</p>	

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D. Directorio de proveedores de atención especializada

Childrens Hospital San Diego,
Sharp Memorial Hospital, Tri City
Medical Ctr, Sharp Mary Birch
Hosp For Women And
Newborns, University Of
California Irvine Med Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

VARON, SHIRA

Provider ID: 64662
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (619) 543-7878
Fax: (619) 543-5350
After Hours Phone: (619)
543-7878
Provider Gender: Female
License number: A96901
NPI: 1619047545
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:

Email:
Medical Group(s):
IPA:

WASHINGTON, SIERRA L

Provider ID: 124298
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6777
Fax:
After Hours Phone: (619)
543-6777
Provider Gender: Female
License number: A99781
NPI: 1386845162
Provider English Spoken: Yes
Provider Language(s) Spoken:
French, Portuguese, Spanish,
Swahili
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton, Medical Ctr At Ucsf
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

WEBER, AKILAH F

Provider ID: 77792
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FN D TN
7920 FROST ST STE 200
SAN DIEGO, CA 92123-4289

Phone: (858) 966-7484
Fax: (858) 966-4064
After Hours Phone: (858)
966-7484
Provider Gender: Female
License number: C56035
NPI: 1760652713
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Rady Childrens Hospital San
Diego, Childrens Hosp And
Resrch Ctr At Oakland
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* P, EB, IB, E, R,
T, W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

WEBER, AKILAH F

Provider ID: 84961
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax: (858) 657-8666
After Hours Phone: (619)
543-6222
Provider Gender: Female
License number: C56035
NPI: 1760652713
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Rady Childrens Hospital San

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Diego, Childrens Hosp And
Resrch Ctr At Oakland
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

WILLIAMS, KRISTIN M

Provider ID: 121983
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN
7910 FROST ST STE 430
SAN DIEGO, CA 92123-2795
Phone: (858) 966-6710
Fax:
After Hours Phone: (858)
966-6710
Provider Gender: Female
License number: A72985
NPI: 1992847131
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Stanford
Health Care, Lucile Salter
Packard Childrens Hosp, San
Mateo Medical Ctr, Sharp
Memorial Hospital, Sharp Mary
Birch Hosp For Women And
Newborns, Tri City Medical Ctr,
California Pacific Med Ctr, Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

WINESBURG, JENNIFER J

Provider ID: 113743
Board Certified Specialty: No
LOGAN HEIGHTS FAMILY
HEALTH CENTER
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Provider Gender: Female
License number: 20A11535
NPI: 1811162456
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Desert
Regional Med Ctr, Sharp
Coronado Hosp And Healthcare
Ctr, Grossmont Hospital, Scripps
Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Logan Heights
Family Health Center
IPA:
WINESBURG, JENNIFER J
Provider ID: 114803

Board Certified Specialty: No
CITY HEIGHTS FAMILY
HEALTH CENTERS INC
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619)
515-2400
Provider Gender: Female
License number: 20A11535
NPI: 1811162456
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Desert
Regional Med Ctr, Sharp
Coronado Hosp And Healthcare
Ctr, Grossmont Hospital, Scripps
Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): City Heights
Family Health Centers Inc
IPA:

WINESBURG, JENNIFER J
Provider ID: 114804
Board Certified Specialty: No
DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2420
Fax:
After Hours Phone: (619)
515-2420
Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: 20A11535
 NPI: 1811162456
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Desert Regional Med Ctr, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital, Scripps Mercy Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: ME
 Hours: M-SA 9AM-5PM
 Website: www.fhcsd.org
 Email:
 Medical Group(s): Diamond Neighborhoods Family Hlth Ctrs Inc
 IPA:

WINESBURG, JENNIFER J

Provider ID: 114812
 Board Certified Specialty: No
 NORTH PARK FAMILY HEALTH CENTERS
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2400
 Fax:
 After Hours Phone: (619) 515-2400
 Provider Gender: Female
 License number: 20A11535
 NPI: 1811162456
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Desert Regional Med Ctr, Sharp Coronado Hosp And Healthcare

Ctr, Grossmont Hospital, Scripps Mercy Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: ME
 Hours: M-SA 9AM-5PM
 Website: www.fhcsd.org
 Email:
 Medical Group(s): North Park Family Health Centers
 IPA:

WINESBURG, JENNIFER J

Provider ID: 128427
 Board Certified Specialty: No
 FAMILY HLTH CTR SAN DIEGO-BEACH AREA
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2444
 Fax:
 After Hours Phone: (619) 515-2444
 Provider Gender: Female
 License number: 20A11535
 NPI: 1811162456
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Desert Regional Med Ctr, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital, Scripps Mercy Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-W,F 8:30AM-5:30PM, TH 9AM-6PM, SA 9AM-5PM
 Website: www.fhcsd.org

Email:
 Medical Group(s): Family Hlth Ctr San Diego-Beach Area
 IPA:

WITTGROVE, PERRI LYNNE L

Provider ID: 282743
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3750 CONVOY ST STE 312
 SAN DIEGO, CA 92111-3741
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: G56550
 NPI: 1497752836
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Alvarado Hospital Llc, Grossmont Hospital, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 16/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

WITTGROVE, PERRI LYNNE L

Provider ID: 282744
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 6719 ALVARADO RD STE 302
 SAN DIEGO, CA 92120-5263

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>Phone: (800) 926-8273 Fax: (888) 539-8781 After Hours Phone: (800) 926-8273 Provider Gender: Female License number: G56550 NPI: 1497752836 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Alvarado Hospital Llc, Grossmont Hospital, Ucsd Medical Ctr Medi-Cal Open Panel: Yes Min/Max Age: 16/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group</p> <p>WONG, MICHAEL C Provider ID: 26940 Board Certified Specialty: No CALIFORNIA WOMENS MEDICAL CLINIC 4282 GENESEE AVE STE 201 SAN DIEGO, CA 92117-4964 Phone: (858) 268-0300 Fax: (858) 268-3894 After Hours Phone: (858) 268-0300 Provider Gender: Male License number: G34771 NPI: 1033113600 Provider English Spoken: Yes Provider Language(s) Spoken: Chinese Cultural Competency: No Hospital Affiliation: Sharp Mary</p>	<p>Birch Hosp For Women And Newborns, Sharp Memorial Hospital Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-F 8:30AM-5PM, SA 9AM-5PM Website: www.californiawomensmedicalclinic.com Email: Medical Group(s): IPA:</p> <p>ZHANG-RUTLEDGE, KATHY T Provider ID: 126408 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 Phone: (619) 543-6222 Fax: After Hours Phone: (619) 543-6222 Provider Gender: Female License number: A153493 NPI: 1467871376 Provider English Spoken: Yes Provider Language(s) Spoken: Chinese Cultural Competency: No Hospital Affiliation: University Hsp Of San Diego Co, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:</p> <p>ZHOU, BETH B Provider ID: 240067 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 Phone: (800) 926-8273 Fax: After Hours Phone: (800) 926-8273 Provider Gender: Female</p>	<p>Medical Group(s): IPA:</p> <p>ZHANG-RUTLEDGE, KATHY T Provider ID: 126525 Board Certified Specialty: No UCSD MEDICAL GROUP 4910 DIRECTORS PL STE 200 SAN DIEGO, CA 92121-3814 Phone: (800) 926-8273 Fax: After Hours Phone: (800) 926-8273 Provider Gender: Female License number: A153493 NPI: 1467871376 Provider English Spoken: Yes Provider Language(s) Spoken: Chinese Cultural Competency: No Hospital Affiliation: University Hsp Of San Diego Co, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:</p>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: A162098
NPI: 1558748186
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

ZIEG, ALAN J

Provider ID: 114822
Board Certified Specialty: No
DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2560
Fax:
After Hours Phone: (619)
515-2560
Provider Gender: Male
License number: G78814
NPI: 1699790634
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Scripps Mercy Hospital,
Sharp Coronado Hosp And
Healthcare Ctr, Scripps Mercy
Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No

♿ Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Diamond
Neighborhoods Family Hlth Ctrs
Inc
IPA:

ZIEG, ALAN J

Provider ID: 25639
Board Certified Specialty: No
CITY HEIGHTS FAMILY
HEALTH CENTERS INC
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619)
515-2400
Provider Gender: Male
License number: G78814
NPI: 1699790634
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Scripps Mercy Hospital,
Sharp Coronado Hosp And
Healthcare Ctr, Scripps Mercy
Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): City Heights
Family Health Centers Inc
IPA:

ZIEG, ALAN J

Provider ID: 25640

Board Certified Specialty: No
LOGAN HEIGHTS FAMILY
HEALTH CENTER
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Provider Gender: Male
License number: G78814
NPI: 1699790634
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Scripps Mercy Hospital,
Sharp Coronado Hosp And
Healthcare Ctr, Scripps Mercy
Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Logan Heights
Family Health Center
IPA:

ZIEG, ALAN J

Provider ID: 25642
Board Certified Specialty: No
NORTH PARK FAMILY HEALTH
CENTERS
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619)
515-2424
Provider Gender: Male
License number: G78814

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1699790634

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital Chula Vista

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): North Park Family Health Centers

IPA:

ZIEG, ALAN J

Provider ID: 25642

Board Certified Specialty: No

SAN DIEGO AMERICAN INDIAN HEALTH CENTER

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax:

After Hours Phone: (619)

515-2424

Provider Gender: Male

License number: G78814

NPI: 1699790634

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital Chula Vista

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): North Park Family Health Centers

IPA:

ZIEG, ALAN J

Provider ID: 46812

Board Certified Specialty: No

FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2444

Fax:

After Hours Phone: (619)

515-2444

Provider Gender: Male

License number: G78814

NPI: 1699790634

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital Chula Vista

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

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

TH 9AM-6PM, SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Family Hlth Ctr San Diego-Beach Area

IPA:

ONCOLOGY MEDICAL

EISENBERG, STEVEN G

Provider ID: 257270

Board Certified Specialty: No

HEALTH EXCEL IPA INC

16918 DOVE CANYON RD STE 103

SAN DIEGO, CA 92127-3455

Phone: (858) 649-5100

Fax: (858) 649-5099

After Hours Phone: (858)

649-5100

Provider Gender: Male

License number: 20A8293

NPI: 1831162627

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Tagalog

Cultural Competency: No

Hospital Affiliation: Palomar

Health Downtown Campus

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc, Imperial

Health Holdings Medical

Group-Sd

FLORES, EDNA I

Provider ID: 115370

Board Certified Specialty: No

CALIFORNIA CANCER

ASSOCS FOR RESEARCH AND EXCELL

16918 DOVE CANYON RD STE 103

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

SAN DIEGO, CA 92127-3455
Phone: (858) 649-5100
Fax: (858) 649-5099
After Hours Phone: (858) 649-5100
Provider Gender: Female
License number: A114373
NPI: 1396994604
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Pioneers Memorial Hospital, Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

FLORES, EDNA I
Provider ID: 115370
Board Certified Specialty: No
CALIFORNIA CANCER ASSOCS FOR RESEARCH AND EXCELL
16918 DOVE CANYON RD STE 103
SAN DIEGO, CA 92127-3455
Phone: (858) 649-5100
Fax: (858) 649-5099
After Hours Phone: (858) 649-5100
Provider Gender: Female
License number: A114373

NPI: 1396994604
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Pioneers Memorial Hospital, Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 16/120
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

FRAKES, LAURIE A , MD
Provider ID: 241857
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
16918 DOVE CANYON RD STE 103
SAN DIEGO, CA 92127-3455
Phone: (858) 649-5100
Fax: (858) 649-5099
After Hours Phone: (858) 649-5100
Provider Gender: Female
License number: A52663
NPI: 1174595144
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

LAMON, JOEL M
Provider ID: 68222
Board Certified Specialty: No
CALIFORNIA CANCER ASSOCS FOR RESEARCH AND EXCELL
16918 DOVE CANYON RD STE 103
SAN DIEGO, CA 92127-3455
Phone: (858) 649-5100
Fax: (858) 649-5099
After Hours Phone: (858) 649-5100
Provider Gender: Male
License number: G28164
NPI: 1699721035
Provider English Spoken: Yes
Provider Language(s) Spoken: French, German, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Group(s):

IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

LAMON, JOEL M

Provider ID: 68222

Board Certified Specialty: No
CALIFORNIA CANCER ASSOCS FOR RESEARCH AND EXCELL

16918 DOVE CANYON RD STE 103

SAN DIEGO, CA 92127-3455

Phone: (858) 649-5100

Fax: (858) 649-5099

After Hours Phone: (858)

649-5100

Provider Gender: Male

License number: G28164

NPI: 1699721035

Provider English Spoken: Yes

Provider Language(s) Spoken:

French, German, Spanish,

Tagalog

Cultural Competency: No

Hospital Affiliation: Palomar

Health Downtown Campus

Medi-Cal Open Panel: Yes

Min/Max Age: 16/120

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

ABBOUD, JEAN-PAUL J

Provider ID: 214188

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

7910 FROST ST STE 200

SAN DIEGO, CA 92123-2776

Phone: (858) 309-7702

Fax: (858) 966-7403

After Hours Phone: (858)

309-7702

Provider Gender: Male

License number: A124825

NPI: 1760776728

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, French, Spanish

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego, Tri

City Medical Ctr, Scripps

Memorial Hospital, Scripps

Mercy Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

Phone: (858) 309-7702

Fax: (858) 966-7403

After Hours Phone: (858)

309-7702

Provider Gender: Female

License number: OPT14457

NPI: 1942564521

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/99

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

ADAMS, MONA N

Provider ID: 260963

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

7910 FROST ST STE 200

SAN DIEGO, CA 92123-2776

Phone: (858) 309-7702

Fax: (858) 966-7403

After Hours Phone: (858)

309-7702

Provider Gender: Female

License number: OPT14457

NPI: 1942564521

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/99

OPHTHALMOLOGY

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<i>American Sign Language (ASL):</i> No <i>Accessibility:</i>  <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> Rady Childrens Health Network	<i>SAN DIEGO, CA 92123-2776</i> <i>Phone:</i> (858) 309-7702 <i>Fax:</i> (858) 966-7403 <i>After Hours Phone:</i> (858) 309-7702 <i>Provider Gender:</i> Female <i>License number:</i> A90890 <i>NPI:</i> 1871664631 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Grossmont Hospital, Sharp Mary Birch Hosp For Women And Newborns, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Tri City Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i>  <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> Rady Childrens Health Network	<i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i>  <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> Ucsd Medical Group
AFSHARI, NATALIE A <i>Provider ID:</i> 63769 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 <i>Phone:</i> (619) 543-6222 <i>Fax:</i> <i>After Hours Phone:</i> (619) 543-6222 <i>Provider Gender:</i> Female <i>License number:</i> C51849 <i>NPI:</i> 1538126735 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>	BAXTER, SALLY L <i>Provider ID:</i> 272789 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR # 101 SAN DIEGO, CA 92103-1911 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female <i>License number:</i> A140952 <i>NPI:</i> 1912325184 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i>  <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> Ucsd Medical Group	BAXTER, SALLY L <i>Provider ID:</i> 272788 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 4060 4TH AVE STE 610 SAN DIEGO, CA 92103-2144 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female <i>License number:</i> A140952 <i>NPI:</i> 1912325184 <i>Provider English Spoken:</i> Yes
BANSAL, PREETI <i>Provider ID:</i> 205620 <i>Board Certified Specialty:</i> Yes RADY CHILDRENS HEALTH NETWORK 7910 FROST ST STE 200		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

BEAZER, ALEX P

Provider ID: 272803
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A169030
NPI: 1942662168
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BHATIA, SHAGUN K

Provider ID: 240636
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
7910 FROST ST STE 200
SAN DIEGO, CA 92123-2776
Phone: (858) 309-7702
Fax: (858) 966-7403
After Hours Phone: (858) 309-7702
Provider Gender: Female
License number: A154902
NPI: 1104237353

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

BINDER, NICHOLAS R

Provider ID: 214258
Board Certified Specialty: Yes
HEALTH EXCEL IPA INC
6945 EL CAJON BLVD
SAN DIEGO, CA 92115-1754
Phone: (619) 697-4600
Fax: (619) 464-5526
After Hours Phone: (619) 697-4600
Provider Gender: Male
License number: A124698
NPI: 1306076716
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:

Email:

Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

BINDER, NICHOLAS R , MD

Provider ID: 268751
Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC
6945 EL CAJON BLVD
SAN DIEGO, CA 92115-1754
Phone: (619) 697-4600
Fax: (619) 464-5526
After Hours Phone: (619) 697-4600
Provider Gender: Male
License number: A124698
NPI: 1306076716
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

BINDER, NICHOLAS R , MD

Provider ID: 268755
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4344 CONVOY ST STE C2

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D. Directorio de proveedores de atención especializada

SAN DIEGO, CA 92111-3737
Phone: (858) 565-8822
Fax: (858) 565-2449
After Hours Phone: (858) 565-8822
Provider Gender: Male
License number: A124698
NPI: 1306076716
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility: Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

BOECKMANN, JESSICA M
Provider ID: 214426
Board Certified Specialty: No
HEALTH EXCEL IPA INC
4344 CONVOY ST STE C2
SAN DIEGO, CA 92111-3737
Phone: (858) 565-8822
Fax: (858) 565-2449
After Hours Phone: (858) 565-8822
Provider Gender: Female
License number: A124361
NPI: 1629210679
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Armenian, Cantonese, French, Mandarin, Spanish,

Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation: Anaheim Regional Medical Ctr, St Mary Medical Center Long Beach
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility: Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

BOKOSKY, JOHN E
Provider ID: 206066
Board Certified Specialty: Yes
RADY CHILDRENS HEALTH NETWORK
3939 3RD AVE
SAN DIEGO, CA 92103-3002
Phone: (800) 765-2737
Fax: (619) 296-4622
After Hours Phone: (800) 765-2737
Provider Gender: Male
License number: G51651
NPI: 1245215748
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility: Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Rady Childrens Health Network
BOKOSKY, JOHN E
Provider ID: 26909
Board Certified Specialty: No
EYE CARE OF SAN DIEGO MED OFFICE
3939 3RD AVE
SAN DIEGO, CA 92103-3002
Phone: (619) 296-8525
Fax: (619) 291-6577
After Hours Phone: (619) 296-8525
Provider Gender: Male
License number: G51651
NPI: 1245215748
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

BREIDENSTEIN, BRENDA G
Provider ID: 63817
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911

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D. Directorio de proveedores de atención especializada

Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: A121728
NPI: 1518118124
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BRUMMEL, KIRSTA L

Provider ID: 240635
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: 20A11590
NPI: 1003085481
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ronald Reagan Ucla Med Ctr, Santa Monica Ucla Med Ctr, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CAMP, ANDREW S

Provider ID: 260020
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
7910 FROST ST STE 200
SAN DIEGO, CA 92123-2776
Phone: (858) 309-7702
Fax: (858) 966-7403
After Hours Phone: (858) 309-7702
Provider Gender: Male
License number: A142062
NPI: 1326300377
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/99
American Sign Language (ASL): No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CHANG, TOM S , MD

Provider ID: 270361

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4344 CONVOY ST STE C2
SAN DIEGO, CA 92111-3737
Phone: (858) 565-8822
Fax: (858) 565-2449
After Hours Phone: (858) 565-8822
Provider Gender: Male
License number: A69909
NPI: 1609848969
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Armenian, Cantonese, Chinese, Croatian, Korean, Mandarin, Spanish
Cultural Competency: No
Hospital Affiliation: San Gabriel Valley Med Ctr, Providence Little Co Of Mary Med Ctr Torrance, Methodist Hosp Of Southern California, Hollywood Presbyterian Med Ctr, Desert Regional Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

CHOPLIN, NEIL T

Provider ID: 49233
Board Certified Specialty: No
EYE CARE OF SAN DIEGO
MED OFFICE
3939 3RD AVE
SAN DIEGO, CA 92103-3002

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 765-2737
Fax: (619) 291-6577
After Hours Phone: (619) 765-2737
Provider Gender: Male
License number: G57042
NPI: 1144205642
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CROSBY, MICHELLE B

Provider ID: 271691
Board Certified Specialty: No
HEALTH EXCEL IPA INC
5550 CARMEL MOUNTAIN RD
STE 206
SAN DIEGO, CA 92130-4861
Phone: (858) 943-2540
Fax:
After Hours Phone: (858) 943-2540
Provider Gender: Female
License number: A108687
NPI: 1558549303
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Memorial Hospital, Scripps Memorial

Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

DIZINNO, LIBRO E

Provider ID: 127849
Board Certified Specialty: No
HEALTH EXCEL IPA INC
5330 CARROLL CANYON RD
STE 210
SAN DIEGO, CA 92121-3758
Phone: (858) 450-1010
Fax: (858) 450-9451
After Hours Phone: (858) 450-1010
Provider Gender: Male
License number: C30996
NPI: 1619967809
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Italian, Spanish, Telugu
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

DORAIRAJ, SYRIL K

Provider ID: 63879

Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A115934
NPI: 1295992550
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Tamil
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

EL KHATIB, NORA, MD

Provider ID: 269853
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
233 LEWIS ST
SAN DIEGO, CA 92103-2122
Phone: (619) 501-9050
Fax: (619) 501-9054
After Hours Phone: (619) 501-9050
Provider Gender: Female
License number: A140794
NPI: 1538487756
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Spanish
Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Sharp Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Sharp Chula Vista Med Ctr, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL): No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

EL KHATIB, NORA

Provider ID: 272327
Board Certified Specialty: No
HEALTH EXCEL IPA INC
4060 4TH AVE STE 640
SAN DIEGO, CA 92103-2118
Phone: (619) 642-2240
Fax: (619) 642-2245
After Hours Phone: (619) 642-2240
Provider Gender: Female
License number: A140794
NPI: 1538487756
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Sharp Chula Vista Med Ctr, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

EZON, ISAAC C

Provider ID: 63897
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A120923
NPI: 1801057781
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FERREYRA, HENRY A

Provider ID: 63906
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A77921
NPI: 1669497822
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Doctors Medical Center, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GARFF, KEVIN

Provider ID: 239606
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A160988
NPI: 1609258920
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ☯ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Health Excel Ipa Inc, Ucsd
 Medical Group

GOLDBERG, JEFFREY L

Provider ID: 83515
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-6222
 Fax:
 After Hours Phone: (619)
 543-6222
 Provider Gender: Male
 License number: A124021
 NPI: 1417158114
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr, Stanford Health Care, Lucile
 Salter Packard Childrens Hosp
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ☯ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

GRANET, DAVID B

Provider ID: 64567
 Board Certified Specialty: No

UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
 Phone: (619) 543-6248
 Fax:
 After Hours Phone: (619)
 543-6248
 Provider Gender: Male
 License number: G77597
 NPI: 1982629036
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ☯ Accessibility: W
 Hours: M-F 8AM-5PM, SA
 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

GUALTIERI, CHRISTOPHER J , MD

Provider ID: 252313
 Board Certified Specialty: Yes
 COMMUNITY CARE IPA LLC
 3969 4TH AVE STE 300
 SAN DIEGO, CA 92103-3165
 Phone: (619) 688-2648
 Fax: (619) 688-2626
 After Hours Phone: (619)
 688-2648
 Provider Gender: Male
 License number: G73020
 NPI: 1790769156
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish

Cultural Competency: No
 Hospital Affiliation: Scripps Mercy
 Hospital, Scripps Mercy Hospital
 Chula Vista
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ☯ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

HAAK, LOGAN M

Provider ID: 252953
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 1855 1ST AVE STE 200B
 SAN DIEGO, CA 92101-2650
 Phone: (858) 863-7597
 Fax: (858) 345-4730
 After Hours Phone: (858)
 863-7597
 Provider Gender: Male
 License number: A110896
 NPI: 1952565491
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Farsi, Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp
 Memorial Hospital, Scripps
 Mercy Hospital, Scripps Mercy
 Hospital Chula Vista, Tri City
 Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ☯ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

HAAK, LOGAN M , MD

Provider ID: 270058
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4077 5TH AVE
SAN DIEGO, CA 92103-2105
Phone: (619) 294-8111
Fax:
After Hours Phone: (619)
294-8111
Provider Gender: Male
License number: A110896
NPI: 1952565491
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Scripps
Mercy Hospital, Scripps Mercy
Hospital Chula Vista, Tri City
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

HUANG, ALEX A

Provider ID: 63968
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Male
License number: A111999
NPI: 1821246141
Provider English Spoken: Yes
Provider Language(s) Spoken:
Mandarin
Cultural Competency: No
Hospital Affiliation: Huntington
Memorial Hospital, Ronald
Reagan Ucla Med Ctr, Ucsd
Medical Ctr, Lac Usc Medical
Center
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HUYNH, PAUL D , MD

Provider ID: 245199
Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC
10737 CAMINO RUIZ STE 100
SAN DIEGO, CA 92126-2370
Phone: (858) 549-3200
Fax: (858) 752-4383
After Hours Phone: (858)
549-3200
Provider Gender: Male
License number: A79141
NPI: 1871577056
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation: Sharp

Memorial Hospital, Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

HUYNH, PAUL D , MD

Provider ID: 245200
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4844 UNIVERSITY AVE STE A
SAN DIEGO, CA 92105-8021
Phone: (619) 283-1303
Fax: (619) 283-1666
After Hours Phone: (619)
283-1303
Provider Gender: Male
License number: A79141
NPI: 1871577056
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility: P, EB, IB, E, R,
T, W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

HUYNH, PAUL D

Provider ID: 40045

Board Certified Specialty: No
ADVANCED EYE LASER CTR
OF CA INC

4844 UNIVERSITY AVE STE A
SAN DIEGO, CA 92105-8021

Phone: (619) 283-1303

Fax:

After Hours Phone: (619)
283-1303

Provider Gender: Male

License number: A79141

NPI: 1871577056

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Tagalog, Vietnamese

Cultural Competency: No

Hospital Affiliation: Sharp
Memorial Hospital, Scripps
Memorial Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,
T, W

Hours: M-F 8AM-5PM, SA
9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

HUYNH, PAUL D

Provider ID: 40046

Board Certified Specialty: No
ADVANCED EYE LASER CTR
OF CA INC

10737 CAMINO RUIZ STE 100
SAN DIEGO, CA 92126-2370

Phone: (858) 549-3200

Fax: (858) 549-3207

After Hours Phone: (858)
549-3200

Provider Gender: Male

License number: A79141

NPI: 1871577056

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Tagalog, Vietnamese

Cultural Competency: No

Hospital Affiliation: Sharp
Memorial Hospital, Scripps
Memorial Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

JAIN, ATUL K

Provider ID: 206150

Board Certified Specialty: Yes
RADY CHILDRENS HEALTH
NETWORK

7695 CARDINAL CT STE 100
SAN DIEGO, CA 92123-3357

Phone: (858) 609-7100

Fax: (858) 609-7106

After Hours Phone: (858)

609-7100

Provider Gender: Male

License number: A92495

NPI: 1194905711

Provider English Spoken: Yes

Provider Language(s) Spoken:

Hindi, Spanish

Cultural Competency: No

Hospital Affiliation: Sharp
Memorial Hospital, Ronald

Reagan UCLA Med Ctr, Scripps
Mercy Hospital, Tri City Medical
Ctr, Rady Childrens Hospital San
Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

KAPOOR, NAMRATA

Provider ID: 241973

Board Certified Specialty: No
HEALTH EXCEL IPA INC
5330 CARROLL CANYON RD
STE 210

SAN DIEGO, CA 92121-3758

Phone: (858) 450-1010

Fax: (858) 450-9451

After Hours Phone: (858)
450-1010

Provider Gender: Female

License number: C135382

NPI: 1710140876

Provider English Spoken: Yes

Provider Language(s) Spoken:

Hindi, Khmer, Spanish, Tagalog

Cultural Competency: No

Hospital Affiliation: Paradise
Valley Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

IPA: Health Excel Ipa Inc

KATZMAN, BARRY

Provider ID: 244922

Board Certified Specialty: Yes

HEALTH EXCEL IPA INC

6945 EL CAJON BLVD

SAN DIEGO, CA 92115-1754

Phone: (800) 898-2020

Fax: (844) 897-3788

After Hours Phone: (800)

898-2020

Provider Gender: Male

License number: A34834

NPI: 1760473797

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Tagalog, Vietnamese

Cultural Competency: No

Hospital Affiliation: Alvarado

Hosp Med Ctr, Sharp Memorial

Hospital, Paradise Valley

Hospital, Alvarado Hospital Llc,

Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, R

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc, Imperial

Health Holdings Medical

Group-Sd

KATZMAN, BARRY, MD

Provider ID: 247366

Board Certified Specialty: Yes

COMMUNITY CARE IPA LLC

6945 EL CAJON BLVD

SAN DIEGO, CA 92115-1754

Phone: (800) 898-2020

Fax: (844) 897-3788

After Hours Phone: (800)

898-2020

Provider Gender: Male

License number: A34834

NPI: 1760473797

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Tagalog, Vietnamese

Cultural Competency: No

Hospital Affiliation: Alvarado

Hosp Med Ctr, Sharp Memorial

Hospital, Paradise Valley

Hospital, Alvarado Hospital Llc,

Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, R

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc, Imperial

Health Holdings Medical

Group-Sd

KATZMAN, BARRY

Provider ID: 262422

Board Certified Specialty: Yes

IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD

6945 EL CAJON BLVD

SAN DIEGO, CA 92115-1754

Phone: (800) 898-2020

Fax: (844) 897-3788

After Hours Phone: (800)

898-2020

Provider Gender: Male

License number: A34834

NPI: 1760473797

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Tagalog, Vietnamese

Cultural Competency: No

Hospital Affiliation: Alvarado

Hosp Med Ctr, Sharp Memorial

Hospital, Paradise Valley

Hospital, Alvarado Hospital Llc,

Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, R

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc, Imperial

Health Holdings Medical

Group-Sd

KIKKAWA, DON O

Provider ID: 64004

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222

Fax:

After Hours Phone: (619)

543-6222

Provider Gender: Male

License number: G65447

NPI: 1932202371

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

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D. Directorio de proveedores de atención especializada

♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KLINE, LANNING B

Provider ID: 239915
Board Certified Specialty: No
UCSD MEDICAL GROUP
4060 4TH AVE STE 610
SAN DIEGO, CA 92103-2144
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: G31557
NPI: 1841227477
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KORN, BOBBY S

Provider ID: 64015
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Male
License number: A81749
NPI: 1174551006
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LEE, JEFFREY E

Provider ID: 64032
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Male
License number: A97291
NPI: 1801943279
Provider English Spoken: Yes
Provider Language(s) Spoken:
Yue Chinese
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None

American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LIU, XIONGFEI

Provider ID: 239817
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A144438
NPI: 1497135156
Provider English Spoken: Yes
Provider Language(s) Spoken:
Chinese, Mandarin
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr, Mercy General
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LIU, YUNXIANG

Provider ID: 210803
Board Certified Specialty: No
RADY CHILDRENS HEALTH

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NETWORK

7910 FROST ST STE 200
SAN DIEGO, CA 92123-2776
Phone: (858) 309-7702

Fax:

After Hours Phone: (858)
309-7702

Provider Gender: Female

License number: A129713

NPI: 1770849804

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Ucsd La Jolla John Sally

Thornton, Ucsd Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

LI, ALEXANDRIA L

Provider ID: 272833

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: A168107

NPI: 1841652864

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

MCGRAW, JOSEPH P , MD

Provider ID: 269702

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

6945 EL CAJON BLVD

SAN DIEGO, CA 92115-1754

Phone: (619) 697-4600

Fax: (619) 465-5526

After Hours Phone: (619)

697-4600

Provider Gender: Male

License number: A155228

NPI: 1588624852

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, R

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

MCGRAW, JOSEPH P , MD

Provider ID: 269704

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

4344 CONVOY ST STE C2

SAN DIEGO, CA 92111-3737

Phone: (800) 898-2020

Fax: (844) 897-3788

After Hours Phone: (800)

898-2020

Provider Gender: Male

License number: A155228

NPI: 1588624852

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

MILLER, DOUGLAS G

Provider ID: 262442

Board Certified Specialty: No

IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD

6945 EL CAJON BLVD

SAN DIEGO, CA 92115-1754

Phone: (619) 697-4600

Fax:

After Hours Phone: (619)

697-4600

Provider Gender: Male

License number: G52627

NPI: 1982636031

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Tagalog, Vietnamese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p><i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> P, EB, IB, E, R <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>	<p>Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p> <p>MILLER, DOUGLAS G , MD <i>Provider ID:</i> 99211 <i>Board Certified Specialty:</i> No WEST COAST EYE CARE ASSOCS 6945 EL CAJON BLVD SAN DIEGO, CA 92115-1754 <i>Phone:</i> (619) 697-4600 <i>Fax:</i> <i>After Hours Phone:</i> (619) 697-4600 <i>Provider Gender:</i> Male <i>License number:</i> G52627 <i>NPI:</i> 1982636031 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Tagalog, Vietnamese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> P, EB, IB, E, R <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>	<p><i>Phone:</i> (858) 565-8822 <i>Fax:</i> <i>After Hours Phone:</i> (858) 565-8822 <i>Provider Gender:</i> Male <i>License number:</i> G52627 <i>NPI:</i> 1982636031 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Tagalog, Vietnamese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> P, EB, IB, E, R <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>
<p>MILLER, DOUGLAS G <i>Provider ID:</i> 262443 <i>Board Certified Specialty:</i> No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 4344 CONVOY ST STE C2 SAN DIEGO, CA 92111-3737 <i>Phone:</i> (858) 565-8822 <i>Fax:</i> <i>After Hours Phone:</i> (858) 565-8822 <i>Provider Gender:</i> Male <i>License number:</i> G52627 <i>NPI:</i> 1982636031 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Tagalog, Vietnamese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> P, EB, IB, E, R <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>	<p>MILLER, DOUGLAS G , MD <i>Provider ID:</i> 99220 <i>Board Certified Specialty:</i> No WEST COAST EYE CARE ASSOCS MED GRP 4344 CONVOY ST STE C2 SAN DIEGO, CA 92111-3737</p>	<p>MOAYEDPARDAZI, HAMIDEH S <i>Provider ID:</i> 99620 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 <i>Phone:</i> (619) 471-9163 <i>Fax:</i> <i>After Hours Phone:</i> (619) 471-9163 <i>Provider Gender:</i> Female <i>License number:</i> A137200 <i>NPI:</i> 1386933240 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Monterey</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Park Hospital, Monterey Park Hospital
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

MOLL, ANGELA M

Provider ID: 205510
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 7910 FROST ST STE 200
 SAN DIEGO, CA 92123-2776
 Phone: (858) 309-7702
 Fax: (858) 966-7403
 After Hours Phone: (858) 309-7702
 Provider Gender: Female
 License number: A105472
 NPI: 1861648602
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Grossmont Hospital, Sharp Memorial Hospital, Childrens Hosp And Resrch Ctr At Oakland, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:

Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network
MOLL, ANGELA M
 Provider ID: 52616
 Board Certified Specialty: No
 RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 7910 FROST ST STE 200
 SAN DIEGO, CA 92123-2776
 Phone: (858) 309-7702
 Fax:
 After Hours Phone: (858) 309-7702
 Provider Gender: Female
 License number: A105472
 NPI: 1861648602
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Grossmont Hospital, Sharp Memorial Hospital, Childrens Hosp And Resrch Ctr At Oakland, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

MORRISON-REYES, JOSHUA A

Provider ID: 107891
 Board Certified Specialty: No
 RETINA INSTITUTE OF CA
 6945 EL CAJON BLVD
 SAN DIEGO, CA 92115-1754
 Phone: (619) 697-4600
 Fax: (619) 464-5526
 After Hours Phone: (619) 697-4600
 Provider Gender: Male
 License number: A125435
 NPI: 1235366782
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Armenian, Cantonese, Chinese, Indonesian, Mandarin, Spanish, Tagalog, Vietnamese
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital, Scripps Memorial Hospital, Sharp Memorial Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: P, EB, IB, E, R
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

MORRISON-REYES, JOSHUA A

Provider ID: 107920
 Board Certified Specialty: No
 WEST COAST EYE CARE ASSOCS MED GRP
 4344 CONVOY ST STE C2
 SAN DIEGO, CA 92111-3737

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 565-8822
Fax: (858) 565-2449
After Hours Phone: (858) 565-8822

Provider Gender: Male
License number: A125435
NPI: 1235366782
Provider English Spoken: Yes
Provider Language(s) Spoken: Armenian, Cantonese, Chinese, Indonesian, Mandarin, Spanish, Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Memorial Hospital, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:

Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

MORRISON-REYES, JOSHUA A , MD

Provider ID: 269178
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
6945 EL CAJON BLVD
SAN DIEGO, CA 92115-1754
Phone: (619) 697-4600
Fax: (619) 464-5526
After Hours Phone: (619) 697-4600
Provider Gender: Male
License number: A125435
NPI: 1235366782

Provider English Spoken: Yes
Provider Language(s) Spoken: Armenian, Cantonese, Chinese, Indonesian, Mandarin, Spanish, Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Memorial Hospital, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:

Email:

Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

MORRISON-REYES, JOSHUA A

Provider ID: 275514
Board Certified Specialty: No
HEALTH EXCEL IPA INC
6945 EL CAJON BLVD
SAN DIEGO, CA 92115-1754
Phone: (619) 697-4600
Fax: (619) 464-5526
After Hours Phone: (619) 697-4600
Provider Gender: Male
License number: A125435
NPI: 1235366782
Provider English Spoken: Yes
Provider Language(s) Spoken: Armenian, Cantonese, Chinese, Indonesian, Mandarin, Spanish, Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation: Grossmont

Hospital, Scripps Memorial Hospital, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:

Email:

Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

MORTON, ASA D

Provider ID: 44922
Board Certified Specialty: No
EYE CARE OF SAN DIEGO MED OFFICE
3939 3RD AVE
SAN DIEGO, CA 92103-3002
Phone: (800) 765-2737
Fax: (619) 692-6228
After Hours Phone: (800) 765-2737
Provider Gender: Male
License number: G68919
NPI: 1780669283

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

Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p><i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p> <p>MOSS, JASON M <i>Provider ID:</i> 285230 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 5555 RESERVOIR DR STE 201 SAN DIEGO, CA 92120-5191 <i>Phone:</i> (619) 365-5501 <i>Fax:</i> (888) 925-0475 <i>After Hours Phone:</i> (619) 365-5501 <i>Provider Gender:</i> Male <i>License number:</i> A130529 <i>NPI:</i> 1386961423 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> El Centro Regional Medical Center, Scripps Memorial Hospital, Sharp Chula Vista Med Ctr, Sharp Memorial Hospital, Scripps Memorial Hospital Encinitas <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc</p> <p>MOVAGHAR, MANSOOR <i>Provider ID:</i> 216412 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 7910 FROST ST STE 200</p>	<p>SAN DIEGO, CA 92123-2776 <i>Phone:</i> (858) 309-7702 <i>Fax:</i> <i>After Hours Phone:</i> (858) 309-7702 <i>Provider Gender:</i> Male <i>License number:</i> A100897 <i>NPI:</i> 1497792220 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network, Ucsd Medical Group</p> <p>NAJAFI, DAVID J <i>Provider ID:</i> 25719 <i>Board Certified Specialty:</i> No LOGAN HEIGHTS FAMILY HEALTH CENTER 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Provider Gender:</i> Male <i>License number:</i> A68124 <i>NPI:</i> 1396715991 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi, Persian, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital, Sharp</p>	<p>Memorial Hospital, Grossmont Hospital, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medical Group(s):</i> Logan Heights Family Health Center <i>IPA:</i></p> <p>NANDURI, PADMA <i>Provider ID:</i> 127871 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 5330 CARROLL CANYON RD STE 210 SAN DIEGO, CA 92121-3758 <i>Phone:</i> (858) 450-1010 <i>Fax:</i> (858) 450-9451 <i>After Hours Phone:</i> (858) 450-1010 <i>Provider Gender:</i> Female <i>License number:</i> A73131 <i>NPI:</i> 1528054640 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Hindi, Spanish, Tamil, Telugu <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i></p>
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D. Directorio de proveedores de atención especializada

IPA: Health Excel Ipa Inc

NG, DIANA

Provider ID: 270011

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
10737 CAMINO RUIZ STE 100
SAN DIEGO, CA 92126-2370
Phone: (858) 549-3200

Fax:

After Hours Phone: (858)
549-3200

Provider Gender: Female

License number: A115695

NPI: 1710112941

Provider English Spoken: Yes

Provider Language(s) Spoken:

Chinese, Yue Chinese

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

NUDLEMAN, ERIC D

Provider ID: 205860

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3750 CONVOY ST STE 301
SAN DIEGO, CA 92111-3741

Phone: (858) 309-7702

Fax: (858) 966-7403

After Hours Phone: (858)

309-7702

Provider Gender: Male

License number: A131592

NPI: 1154582575

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr, Rady Childrens

Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

NUDLEMAN, ERIC D

Provider ID: 94672

Board Certified Specialty: No

RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FN D TN

3750 CONVOY ST STE 301
SAN DIEGO, CA 92111-3741

Phone: (858) 309-7702

Fax: (858) 966-7403

After Hours Phone: (858)

309-7702

Provider Gender: Male

License number: A131592

NPI: 1154582575

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr, Rady Childrens

Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

OBRIEN, CHRISTOPHER P

Provider ID: 84307

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222

Fax:

After Hours Phone: (619)

543-6222

Provider Gender: Male

License number: A116707

NPI: 1629263421

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

OHALLORAN, HENRY S

Provider ID: 205888

Board Certified Specialty: Yes

RADY CHILDRENS HEALTH

NETWORK

7910 FROST ST STE 200

SAN DIEGO, CA 92123-2776

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D. Directorio de proveedores de atención especializada

Phone: (858) 309-7702
Fax: (858) 966-7403
After Hours Phone: (858) 309-7702

Provider Gender: Male
License number: A73282
NPI: 1235287947
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista

Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

OHALLORAN, HENRY S

Provider ID: 52619
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
7910 FROST ST STE 200
SAN DIEGO, CA 92123-2776
Phone: (858) 309-7702

Fax:
After Hours Phone: (858) 309-7702
Provider Gender: Male
License number: A73282
NPI: 1235287947
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont

Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Rady Childrens Health Network

OZZELLO, DANIEL J

Provider ID: 241984
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273

Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A161485
NPI: 1073992731
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

PANSARA, MEGHA L

Provider ID: 277166
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 309-7702
Fax: (858) 966-7403
After Hours Phone: (858) 309-7702

Provider Gender: Female
License number: A143429
NPI: 1184983728
Provider English Spoken: Yes
Provider Language(s) Spoken: Gujarati, Spanish
Cultural Competency: No
Hospital Affiliation: Palomar Medical Center, Pomerado Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PATEL, GITANE

Provider ID: 262316
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
6945 EL CAJON BLVD
SAN DIEGO, CA 92115-1754
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone: (619) 697-4600

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Male
License number: A108603
NPI: 1710171434
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Gujarati, Spanish, Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Paradise Valley Hospital, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

PATEL, GITANE

Provider ID: 262321
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
4344 CONVOY ST STE C2
SAN DIEGO, CA 92111-3737
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800) 898-2020
Provider Gender: Male
License number: A108603
NPI: 1710171434
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Gujarati, Spanish, Tagalog, Vietnamese
Cultural Competency: No

Hospital Affiliation: Grossmont Hospital, Paradise Valley Hospital, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

PATEL, GITANE, MD

Provider ID: 268738
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
6945 EL CAJON BLVD
SAN DIEGO, CA 92115-1754
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone: (619) 697-4600
Provider Gender: Male
License number: A108603
NPI: 1710171434
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Gujarati, Spanish, Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Paradise Valley Hospital, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

PATEL, GITANE, MD

Provider ID: 268743
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4344 CONVOY ST STE C2
SAN DIEGO, CA 92111-3737
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800) 898-2020
Provider Gender: Male
License number: A108603
NPI: 1710171434
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Gujarati, Spanish, Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Paradise Valley Hospital, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

PATEL, SARJAN H

Provider ID: 262402
Board Certified Specialty: Yes
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 6945 EL CAJON BLVD
 SAN DIEGO, CA 92115-1754
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone: (619) 697-4600
Provider Gender: Male
License number: A114976
NPI: 1316199326
Provider English Spoken: Yes
Provider Language(s) Spoken: Gujarati, Hindi, Spanish, Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc, Grossmont Hospital, Scripps Memorial Hospital, Paradise Valley Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ♿ *Accessibility:* P, EB, IB, E, R, W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

PATEL, SARJAN H

Provider ID: 262405
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 4344 CONVOY ST STE C2

SAN DIEGO, CA 92111-3737
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800) 898-2020
Provider Gender: Male
License number: A114976
NPI: 1316199326
Provider English Spoken: Yes
Provider Language(s) Spoken: Gujarati, Hindi, Spanish, Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc, Grossmont Hospital, Scripps Memorial Hospital, Paradise Valley Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

PATEL, SARJAN H , MD

Provider ID: 268798
Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC
 6945 EL CAJON BLVD
 SAN DIEGO, CA 92115-1754
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone: (619) 697-4600
Provider Gender: Male
License number: A114976
NPI: 1316199326
Provider English Spoken: Yes

Provider Language(s) Spoken: Gujarati, Hindi, Spanish, Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc, Grossmont Hospital, Scripps Memorial Hospital, Paradise Valley Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ♿ *Accessibility:* P, EB, IB, E, R, W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

PATEL, SARJAN H , MD

Provider ID: 268801
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 4344 CONVOY ST STE C2
 SAN DIEGO, CA 92111-3737
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800) 898-2020
Provider Gender: Male
License number: A114976
NPI: 1316199326
Provider English Spoken: Yes
Provider Language(s) Spoken: Gujarati, Hindi, Spanish, Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc, Grossmont Hospital, Scripps Memorial Hospital, Paradise Valley Hospital

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

PRABHU, SUJATA P

Provider ID: 244910
Board Certified Specialty: Yes
HEALTH EXCEL IPA INC
6945 EL CAJON BLVD
SAN DIEGO, CA 92115-1754
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800)
898-2020
Provider Gender: Female
License number: A115965
NPI: 1982872552
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Tagalog, Telugu,
Vietnamese
Cultural Competency: No
Hospital Affiliation: Paradise
Valley Hospital, Alvarado
Community Hospital, Scripps
Memorial Hospital, Grossmont
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

PRABHU, SUJATA P

Provider ID: 262389
Board Certified Specialty: Yes
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
6945 EL CAJON BLVD
SAN DIEGO, CA 92115-1754
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800)
898-2020
Provider Gender: Female
License number: A115965
NPI: 1982872552
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Tagalog, Telugu,
Vietnamese
Cultural Competency: No
Hospital Affiliation: Paradise
Valley Hospital, Alvarado
Community Hospital, Scripps
Memorial Hospital, Grossmont
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

PRABHU, SUJATA P

Provider ID: 262392
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
4344 CONVOY ST STE C2
SAN DIEGO, CA 92111-3737
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800)
898-2020
Provider Gender: Female
License number: A115965
NPI: 1982872552
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Tagalog, Telugu,
Vietnamese
Cultural Competency: No
Hospital Affiliation: Paradise
Valley Hospital, Alvarado
Community Hospital, Scripps
Memorial Hospital, Grossmont
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

PRABHU, SUJATA P , MD

Provider ID: 268916
Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC
6945 EL CAJON BLVD
SAN DIEGO, CA 92115-1754

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (800) 898-2020
 Fax: (844) 897-3788
 After Hours Phone: (800) 898-2020
 Provider Gender: Female
 License number: A115965
 NPI: 1982872552
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish, Tagalog, Telugu, Vietnamese
 Cultural Competency: No
 Hospital Affiliation: Paradise Valley Hospital, Alvarado Community Hospital, Scripps Memorial Hospital, Grossmont Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility: P, EB, IB, E, R
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

PRABHU, SUJATA P , MD
 Provider ID: 268919
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 4344 CONVOY ST STE C2
 SAN DIEGO, CA 92111-3737
 Phone: (800) 898-2020
 Fax: (844) 897-3788
 After Hours Phone: (800) 898-2020
 Provider Gender: Female
 License number: A115965
 NPI: 1982872552
 Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish, Tagalog, Telugu, Vietnamese
 Cultural Competency: No
 Hospital Affiliation: Paradise Valley Hospital, Alvarado Community Hospital, Scripps Memorial Hospital, Grossmont Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

ROBINSON, FANE L
 Provider ID: 206038
 Board Certified Specialty: Yes
 RADY CHILDRENS HEALTH NETWORK
 7695 CARDINAL CT STE 100
 SAN DIEGO, CA 92123-3357
 Phone: (858) 609-7100
 Fax: (858) 609-7106
 After Hours Phone: (858) 609-7100
 Provider Gender: Male
 License number: A45990
 NPI: 1295894368
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Afrikaans, Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp Memorial Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18

American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

ROBINSON, FANE L
 Provider ID: 26659
 Board Certified Specialty: No
 SAN DIEGO RETINA ASSOCIATES A MED CORP
 7695 CARDINAL CT STE 100
 SAN DIEGO, CA 92123-3357
 Phone: (858) 609-7100
 Fax:
 After Hours Phone: (858) 609-7100
 Provider Gender: Male
 License number: A45990
 NPI: 1295894368
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Afrikaans, Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp Memorial Hospital
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

SAID, BISHOY
 Provider ID: 64170

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222

Fax:

After Hours Phone: (619)
543-6222

Provider Gender: Male

License number: A110408

NPI: 1861649238

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, Spanish

Cultural Competency: No

Hospital Affiliation: Palomar

Medical Center, Pomerado

Hospital, Sharp Memorial

Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

SATO, MICHELLE A

Provider ID: 84772

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (800) 543-3000

Fax:

After Hours Phone: (800)

543-3000

Provider Gender: Female

License number: A125720

NPI: 1225326580

Provider English Spoken: Yes

Provider Language(s) Spoken:

Japanese

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

SCHER, COLIN A

Provider ID: 206329

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

7910 FROST ST STE 200

SAN DIEGO, CA 92123-2776

Phone: (858) 309-7702

Fax: (858) 966-7403

After Hours Phone: (858)

576-1700

Provider Gender: Male

License number: A42700

NPI: 1396816153

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Rady

Childrens Hospital San Diego,

Palomar Medical Center,

Grossmont Hospital, Tri City

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

SCHER, COLIN A

Provider ID: 52622

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED

FNDTN

7910 FROST ST STE 200

SAN DIEGO, CA 92123-2776

Phone: (858) 309-7702

Fax:

After Hours Phone: (858)

309-7702

Provider Gender: Male

License number: A42700

NPI: 1396816153

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Rady

Childrens Hospital San Diego,

Palomar Medical Center,

Grossmont Hospital, Tri City

Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

SHAW, BLAKE R

Provider ID: 40204

Board Certified Specialty: No

LOGAN HEIGHTS FAMILY

HEALTH CENTER

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300

Fax:
After Hours Phone: (619)
515-2300

Provider Gender: Male
License number: G61394

NPI: 1649206541
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish

Cultural Competency: No
Hospital Affiliation:

Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No

♿ Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org

Email:
Medical Group(s): Logan Heights
Family Health Center
IPA:

SHAW, BLAKE R

Provider ID: 40204
Board Certified Specialty: No
SAN DIEGO AMERICAN INDIAN
HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300

Fax:
After Hours Phone: (619)
515-2300

Provider Gender: Male
License number: G61394

NPI: 1649206541
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish

Cultural Competency: No
Hospital Affiliation:

Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No

♿ Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org

Email:
Medical Group(s): Logan Heights
Family Health Center
IPA:

SLIGHT, JOHN R

Provider ID: 64205
Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222

Fax:
After Hours Phone: (619)
543-6222

Provider Gender: Male
License number: C25107
NPI: 1306971239
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA:

SMITH, MARK D

Provider ID: 206136
Board Certified Specialty: No
RADY CHILDRENS HEALTH

NETWORK
7695 CARDINAL CT STE 100
SAN DIEGO, CA 92123-3357
Phone: (858) 609-7100

Fax: (858) 609-7106
After Hours Phone: (858)
609-7100

Provider Gender: Male
License number: G55641
NPI: 1255490330

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

Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Sharp Memorial

Hospital, Tri City Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18

American Sign Language (ASL):
No
♿ Accessibility:

Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

SMITH, MARK D

Provider ID: 48364
Board Certified Specialty: No
SAN DIEGO RETINA

ASSOCIATES A MED CORP
7695 CARDINAL CT STE 100
SAN DIEGO, CA 92123-3357

Phone: (858) 609-7100
Fax: (858) 609-7106
After Hours Phone: (858)

609-7100
Provider Gender: Male
License number: G55641

NPI: 1255490330
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Tri City Medical Ctr, Scripps Mercy Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

TSAI, FRANK F
Provider ID: 92169
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A130661
NPI: 1043530777
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Sharp Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA:
TUNG, JONATHAN D
Provider ID: 64232
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A110281
NPI: 1649505744
Provider English Spoken: Yes
Provider Language(s) Spoken: Chinese
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

WAINESS, REID M , MD
Provider ID: 254762
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4344 CONVOY ST STE C2
SAN DIEGO, CA 92111-3737
Phone: (800) 898-2020
Fax:
After Hours Phone: (800) 898-2020
Provider Gender: Male
License number: A108766

NPI: 1396935979
Provider English Spoken: Yes
Provider Language(s) Spoken: Armenian, Cantonese, Chinese, Hebrew, Mandarin, Spanish, Vietnamese
Cultural Competency: No
Hospital Affiliation: San Gabriel Valley Med Ctr, Desert Regional Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 5/99
American Sign Language (ASL): No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

WANG, AARON S
Provider ID: 101347
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A136483
NPI: 1790078129
Provider English Spoken: Yes
Provider Language(s) Spoken: Mandarin
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

WU, CHRIS Y

Provider ID: 239583
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A161633
NPI: 1265829345
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

YAMAGATA, ASMANEH S

Provider ID: 84254
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Female
License number: A124917
NPI: 1174754022
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, French
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ZABANEH, ALEXANDER I

Provider ID: 262171
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
4344 CONVOY ST STE C2
SAN DIEGO, CA 92111-3737
Phone: (760) 564-2500
Fax: (858) 565-2449
After Hours Phone: (760)
564-2500
Provider Gender: Male
License number: A154697
NPI: 1346687233
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista, Paradise Valley
Hospital

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

ZABANEH, ALEXANDER I, MD

Provider ID: 269122
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
6945 EL CAJON BLVD
SAN DIEGO, CA 92115-1754
Phone: (619) 697-4600
Fax: (619) 464-5526
After Hours Phone: (619)
697-4600
Provider Gender: Male
License number: A154697
NPI: 1346687233
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista, Paradise Valley
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:* P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

ZHU, FEILIN A

Provider ID: 99924
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Female
License number: A135422
NPI: 1497045041
Provider English Spoken: Yes
Provider Language(s) Spoken:
Mandarin
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ORAL MAXILLOFACIAL SURGEON

BERGER, JOEL S

Provider ID: 205659
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
8008 FROST ST STE 311
SAN DIEGO, CA 92123-4288

Phone: (858) 292-5175
Fax: (858) 292-0305
After Hours Phone: (858)
292-5175
Provider Gender: Male
License number: G45427
NPI: 1841218229
Provider English Spoken: Yes
Provider Language(s) Spoken:
French
Cultural Competency: No
Hospital Affiliation: Scripps
Green Hospital, Rady Childrens
Hospital San Diego, Sharp
Memorial Hospital, Scripps
Memorial Hospital, Scripps
Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

DENTICO-OLIN, MARC

Provider ID: 273663
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
501 WASHINGTON ST STE 710
SAN DIEGO, CA 92103-2231
Phone: (619) 295-6774
Fax: (619) 295-6776
After Hours Phone: (619)
295-6774
Provider Gender: Male
License number: A143794
NPI: 1629205174
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Scripps Green Hospital, Scripps
Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

MACHADO, LESTER

Provider ID: 262388
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
501 WASHINGTON ST STE 710
SAN DIEGO, CA 92103-2231
Phone: (619) 295-6774
Fax: (619) 295-6776
After Hours Phone: (619)
295-6774
Provider Gender: Male
License number: G69984
NPI: 1598733727
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Scripps Mercy Hospital Chula
Vista, Sharp Memorial Hospital,
Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility: W

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

Provider ID: 272565

Board Certified Specialty: Yes
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123-4232

Phone: (858) 309-7701

Fax: (858) 966-8038

After Hours Phone: (858)
309-7701

Provider Gender: Female

License number: A134647

NPI: 1760707657

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Childrens

Hosp Of Los Angeles, Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

OSTEOPATHIC MANIPULATIVE THERAPY

PORTERA, ARIEL M

Provider ID: 273321

Board Certified Specialty: No

UCSD MEDICAL GROUP

9333 GENESEE AVE STE 200

SAN DIEGO, CA 92121-2113

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: 20A16832

NPI: 1841721784

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

OTOLARYNGOLOGY / OTOLOGY / LARYNGOLOGY / RHINOLOGY

BLISS, MORGAN R

BRIGGER, MATTHEW T

Provider ID: 272564

Board Certified Specialty: Yes

RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 1

SAN DIEGO, CA 92123-4232

Phone: (858) 309-7701

Fax: (858) 966-8038

After Hours Phone: (858)

309-7701

Provider Gender: Male

License number: C55473

NPI: 1952490807

Provider English Spoken: Yes

KARI, ELINA

Provider ID: 272524

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 1

SAN DIEGO, CA 92123-4232

Phone: (858) 309-7701

Fax: (858) 966-8038

After Hours Phone: (858)

309-7701

Provider Gender: Female

License number: A116411

NPI: 1780860536

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Childrens

Hosp Of Los Angeles, Pih Health

Hospital - Whittier, Keck Hospital

Of Usc, Usc Kenneth Norris Jr

Cancer Hospital, Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr, Rady Childrens

Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MAGIT, ANTHONY E

Provider ID: 272767
Board Certified Specialty: Yes
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123-4232
Phone: (858) 966-4085
Fax: (858) 966-4062
After Hours Phone: (858) 966-4085
Provider Gender: Male
License number: G71859
NPI: 1891858379
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):

No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

NATION, JAVAN J

Provider ID: 272558
Board Certified Specialty: No
RADY CHILDRENS HEALTH

NETWORK
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123-4232
Phone: (858) 309-7701
Fax: (858) 966-8038
After Hours Phone: (858) 309-7701
Provider Gender: Male
License number: A125279
NPI: 1043478902
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

AMBROSIO, ART A

Provider ID: 272526
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123-4232
Phone: (858) 309-7701
Fax: (858) 966-8038
After Hours Phone: (858) 309-7701
Provider Gender: Male
License number: A113427
NPI: 1205064805

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

AZER, PHILIP

Provider ID: 257513
Board Certified Specialty: Yes
BLUE SHIELD PROMISE HEALTH PLAN DIRECT
3660 CLAIREMONT DR STE 2
SAN DIEGO, CA 92117-5909
Phone: (858) 270-8151
Fax: (858) 270-8121
After Hours Phone: (858) 270-8151
Provider Gender: Male
License number: G13273
NPI: 1871589408
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

IPA: Blue Shield Promise Health Plan Direct

BANTHIA, VISHAL

Provider ID: 283695
Board Certified Specialty: No
HEALTH EXCEL IPA INC
5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121-1700
Phone: (858) 909-0770
Fax: (858) 909-0880
After Hours Phone: (858) 909-0770
Provider Gender: Male
License number: A86814
NPI: 1043396559
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Washington Hospital, Cedars Sinai Medical Center, Scripps Memorial Hospital, Sharp Memorial Hospital, Temecula Valley Hospital Inc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

BRUMUND, KEVIN T

Provider ID: 41180
Board Certified Specialty: No
UCSD OTOLARYNGOLOGY
200 W ARBOR DR
SAN DIEGO, CA 92103-1911

Phone: (858) 657-8590
Fax:
After Hours Phone: (858) 657-8590
Provider Gender: Male
License number: A91099
NPI: 1033193669
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CALIFANO, JOSEPH A

Provider ID: 112511
Board Certified Specialty: No
UCSD OTOLARYNGOLOGY
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (858) 657-8590
Fax:
After Hours Phone: (858) 657-8590
Provider Gender: Male
License number: G138926
NPI: 1881652972
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CARVALHO, DANIELA

Provider ID: 205628
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY STE 109
SAN DIEGO, CA 92123-4226
Phone: (858) 309-7702
Fax:
After Hours Phone: (858) 309-7702
Provider Gender: Female
License number: A94239
NPI: 1154492916
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CARVALHO, DANIELA

Provider ID: 272557
Board Certified Specialty: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123-4232
Phone: (858) 309-7701
Fax: (858) 966-8038
After Hours Phone: (858) 309-7701
Provider Gender: Female
License number: A94239
NPI: 1154492916
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Scripps Memorial Hospital, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

DRISKILL, BRENT R
Provider ID: 265300
Board Certified Specialty: No
HEALTH EXCEL IPA INC
4033 3RD AVE STE 104
SAN DIEGO, CA 92103-2136
Phone: (619) 294-2350
Fax: (619) 296-5719
After Hours Phone: (619) 294-2350
Provider Gender: Male
License number: C146197
NPI: 1477612372
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Sharp Chula Vista Med Ctr, Sharp Memorial Hospital, Alvarado Hosp Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 8/105
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

FRIEDMAN, RICK A
Provider ID: 121290
Board Certified Specialty: No
UCSD OTOLARYNGOLOGY
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (858) 657-8590
Fax:
After Hours Phone: (858) 657-8590
Provider Gender: Male
License number: G67571
NPI: 1982708558
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Good Samaritan Hospital Los Angeles, Childrens Hosp Of Los Angeles, South Coast Global Medical Center Inc, Anaheim Global Medical Center, Orange County Global Medical Center Inc, Chapman Global Medical Center Inc, Ucsd La Jolla John Sally

Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FRIESEN, TZYYNONG L
Provider ID: 272604
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123-4232
Phone: (858) 309-7701
Fax: (858) 966-8038
After Hours Phone: (858) 309-7701
Provider Gender: Female
License number: A152327
NPI: 1952740177
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

GAUDREAU, PHILIP A
Provider ID: 272556
Board Certified Specialty: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123-4232

Phone: (858) 309-7701

Fax: (858) 966-8038

After Hours Phone: (858)
309-7701

Provider Gender: Male

License number: A149585

NPI: 1326207077

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego,

Naval Hsp Camp Pendleton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

GILANI, SAPIDEH

Provider ID: 112447

Board Certified Specialty: Yes

UCSD OTOLARYNGOLOGY

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (858) 657-8590

Fax:

After Hours Phone: (858)

657-8590

Provider Gender: Female

License number: G80720

NPI: 1003825571

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

GREENE, JACQUELINE J

Provider ID: 272959

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: A161242

NPI: 1144583931

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

HAUFF, SAMANTHA J

Provider ID: 268296

Board Certified Specialty: No

HEALTH EXCEL IPA INC

4282 GENESEE AVE STE 202

SAN DIEGO, CA 92117-4989

Phone: (858) 746-7882

Fax: (407) 988-1066

After Hours Phone: (858)

746-7882

Provider Gender: Female

License number: A123547

NPI: 1225395734

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital, Scripps Mercy Hospital

Chula Vista, Scripps Memorial

Hospital, St Lukes Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

JIANG, WEN A

Provider ID: 272660

Board Certified Specialty: Yes

RADY CHILDRENS HEALTH

NETWORK

3030 CHILDRENS WAY FL 1

SAN DIEGO, CA 92123-4232

Phone: (858) 309-7701

Fax: (858) 966-8038

After Hours Phone: (858)

309-7701

Provider Gender: Female

License number: A99198

NPI: 1659305753

Provider English Spoken: Yes

Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Mandarin
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

LEUIN, SHELBY C
Provider ID: 272637
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123-4232
Phone: (858) 309-7701
Fax: (858) 966-8038
After Hours Phone: (858) 309-7701
Provider Gender: Female
License number: A112930
NPI: 1124230909
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Rady Childrens Health Network

NGUYEN, QUYEN T
Provider ID: 64110
Board Certified Specialty: No
UCSD OTOLARYNGOLOGY
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (858) 657-8590
Fax:
After Hours Phone: (858) 657-8590
Provider Gender: Female
License number: A78948
NPI: 1477524452
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Scripps Green Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

OROSCO, RYAN K
Provider ID: 119637
Board Certified Specialty: No
UCSD OTOLARYNGOLOGY
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6631
Fax:
After Hours Phone: (619) 543-6631
Provider Gender: Male

License number: A120515
NPI: 1427290279
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Stanford Health Care, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

RIEDLER, KIERSTEN L , MD
Provider ID: 256203
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
5405 OBERLIN DR
SAN DIEGO, CA 92121-1700
Phone: (858) 909-0770
Fax: (858) 909-0880
After Hours Phone: (858) 909-0770
Provider Gender: Female
License number: A135480
NPI: 1437536216
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas, Sutter Roseville Medical Center, Mercy General Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc</p>	<p><i>Board Certified Specialty:</i> No UCSD OTOLARYNGOLOGY 200 W ARBOR DR SAN DIEGO, CA 92103-1911 <i>Phone:</i> (858) 657-8590 <i>Fax:</i> <i>After Hours Phone:</i> (858) 657-8590 <i>Provider Gender:</i> Female <i>License number:</i> A121814 <i>NPI:</i> 1467720656 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Vietnamese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>	<p><i>Provider Gender:</i> Male <i>License number:</i> A31095 <i>NPI:</i> 1609832633 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Ucsd Medical Group</p>
<p>RIEDLER, KIERSTEN L <i>Provider ID:</i> 275240 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 5405 OBERLIN DR SAN DIEGO, CA 92121-1700 <i>Phone:</i> (858) 909-0770 <i>Fax:</i> (858) 909-0880 <i>After Hours Phone:</i> (858) 909-0770 <i>Provider Gender:</i> Female <i>License number:</i> A135480 <i>NPI:</i> 1437536216 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas, Sutter Roseville Medical Center, Mercy General Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc</p>	<p style="text-align: center;">PATHOLOGY ANATOMIC</p>	<p>FADARE, OLUWOLE <i>Provider ID:</i> 275705 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 <i>Phone:</i> (619) 543-5764 <i>Fax:</i> (619) 543-5249 <i>After Hours Phone:</i> (619) 543-5764 <i>Provider Gender:</i> Male <i>License number:</i> C131462 <i>NPI:</i> 1619955804 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No</p>
<p>WOO, LINDA N <i>Provider ID:</i> 118801</p>	<p>DATNOW, BRIAN <i>Provider ID:</i> 275737 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 <i>Phone:</i> (619) 543-5764 <i>Fax:</i> <i>After Hours Phone:</i> (619) 543-5764</p>	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HANSEN, LAWRENCE A

Provider ID: 275767
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-5764
Fax:
After Hours Phone: (619)
543-5764
Provider Gender: Male
License number: G62538
NPI: 1760407498
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

PARAST, MANA M

Provider ID: 275888
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A102496
NPI: 1629163100
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

POWELL, HENRY C

Provider ID: 275778
Board Certified Specialty: No
UCSD MEDICAL GROUP
4510 EXECUTIVE DR STE 325
SAN DIEGO, CA 92121-3069
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A25597
NPI: 1295778348
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

VALASEK, MARK A

Provider ID: 275836
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A127165
NPI: 1588808448
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

WONG, RICHARD L

Provider ID: 243202
Board Certified Specialty: No
UCSD MEDICAL GROUP
10300 CAMPUS POINT DR
SAN DIEGO, CA 92121-1504

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A136239
NPI: 1275084295
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

PATHOLOGY CLINICAL

KELNER, MICHAEL J
Provider ID: 247601
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: G48254
NPI: 1174679849
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr, El Centro Regional

Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KELNER, MICHAEL J
Provider ID: 247602
Board Certified Specialty: No
UCSD MEDICAL GROUP
10300 CAMPUS POINT DR
SAN DIEGO, CA 92121-1504
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: G48254
NPI: 1174679849
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LE DZUNG, THE
Provider ID: 247599
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR

SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: G71291
NPI: 1770526931
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LE DZUNG, THE
Provider ID: 247600
Board Certified Specialty: No
UCSD MEDICAL GROUP
10300 CAMPUS POINT DR
SAN DIEGO, CA 92121-1504
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: G71291
NPI: 1770526931
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

PEDIATRIC ALLERGY / IMMUNOLOGY

COHEN, GARY A
Provider ID: 206021
Board Certified Specialty: Yes
RADY CHILDRENS HEALTH
NETWORK
9833 PACIFIC HEIGHTS BLVD
STE J
SAN DIEGO, CA 92121-4707
Phone: (858) 458-0940
Fax: (858) 458-3688
After Hours Phone: (858)
458-0940
Provider Gender: Male
License number: G43070
NPI: 1346424462
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Sharp
Coronado Hosp And Healthcare
Ctr, Rady Childrens Hospital San
Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Rady Childrens Health
Network
COLLINS, CATHLEEN A
Provider ID: 206083
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY # 2
SAN DIEGO, CA 92123-4232

Phone: (858) 966-5961
Fax: (858) 966-6791
After Hours Phone: (858)
966-5961
Provider Gender: Female
License number: A122537
NPI: 1205128089
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Lucile Salter Packard Childrens
Hosp, Stanford Health Care
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

GENG, BOB
Provider ID: 205823
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
5776 RUFFIN RD
SAN DIEGO, CA 92123-1013

Phone: (858) 292-1144
Fax: (858) 268-5145
After Hours Phone: (858)
292-1144
Provider Gender: Male
License number: A121364
NPI: 1356570758
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd La Jolla John Sally
Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

GENG, BOB
Provider ID: 205824
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY # 2
SAN DIEGO, CA 92123-4232
Phone: (858) 966-5961
Fax: (858) 966-6791
After Hours Phone: (858)
966-5961
Provider Gender: Male
License number: A121364
NPI: 1356570758
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Ucsd La Jolla John Sally
Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

GREINER, ALEXANDER N
Provider ID: 205697
Board Certified Specialty: Yes
RADY CHILDRENS HEALTH
NETWORK
5776 RUFFIN RD
SAN DIEGO, CA 92123-1013
Phone: (858) 966-4900
Fax: (858) 268-5145
After Hours Phone: (858)
966-4900
Provider Gender: Male
License number: A77327
NPI: 1609801299
Provider English Spoken: Yes
Provider Language(s) Spoken:
French, German, Spanish
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

HOFFMAN, HAROLD M
Provider ID: 206004
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY # 2
SAN DIEGO, CA 92123-4232
Phone: (858) 966-5961
Fax: (858) 966-6791
After Hours Phone: (858)
966-5961
Provider Gender: Male
License number: A53101
NPI: 1326074261
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Rady Childrens Hospital San
Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

LAUBACH, SUSAN S
Provider ID: 205803
Board Certified Specialty: Yes
RADY CHILDRENS HEALTH
NETWORK
5776 RUFFIN RD
SAN DIEGO, CA 92123-1013
Phone: (858) 966-4900
Fax: (858) 268-5145
After Hours Phone: (858)
966-4900
Provider Gender: Female

License number: A114061
NPI: 1366656209
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital,
Childrens Hosp And Resrch Ctr
At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

LAUBACH, SUSAN S
Provider ID: 205804
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5961
Fax: (858) 966-6791
After Hours Phone: (858)
966-5961
Provider Gender: Female
License number: A114061
NPI: 1366656209
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital,
Childrens Hosp And Resrch Ctr
At Oakland
Medi-Cal Open Panel: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

LEIBEL, SYDNEY A

Provider ID: 205724
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
5776 RUFFIN RD
SAN DIEGO, CA 92123-1013
Phone: (858) 292-1144
Fax: (858) 268-5145
After Hours Phone: (858) 292-1144
Provider Gender: Male
License number: A116427
NPI: 1861666919
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

LEIBEL, SYDNEY A

Provider ID: 205725
Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 2 NORTH
SAN DIEGO, CA 92123-4232
Phone: (858) 966-5961
Fax: (858) 966-6791
After Hours Phone: (858) 966-5961
Provider Gender: Male
License number: A116427
NPI: 1861666919
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

LEONARD, STEPHANIE A

Provider ID: 205642
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 2 NORTH
SAN DIEGO, CA 92123-4232
Phone: (858) 966-5961
Fax: (858) 966-6791
After Hours Phone: (858) 966-5961
Provider Gender: Female
License number: A117476
NPI: 1003074469
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PENDLETON, JENNIFER J

Provider ID: 205435
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
2655 CAMINO DEL RIO N STE 120
SAN DIEGO, CA 92108-1633
Phone: (619) 286-6687
Fax: (619) 286-6695
After Hours Phone: (619) 286-6687
Provider Gender: Female
License number: A80748
NPI: 1821054446
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Health Excel Ipa Inc, Rady
Childrens Health Network

STONE, BRIAN D

Provider ID: 206333
Board Certified Specialty: Yes
RADY CHILDRENS HEALTH
NETWORK
2655 CAMINO DEL RIO N STE
120
SAN DIEGO, CA 92108-1633
Phone: (619) 286-6687
Fax: (619) 286-6695
After Hours Phone: (619)
286-6687
Provider Gender: Male
License number: G88917
NPI: 1013907286
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Sharp Memorial
Hospital

Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility: P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

WALTERS, KRISTEN M

Provider ID: 206255
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
5776 RUFFIN RD
SAN DIEGO, CA 92123-1013

Phone: (858) 966-4900
Fax: (858) 966-4051
After Hours Phone: (858)
966-4900
Provider Gender: Female
License number: A129955
NPI: 1437442308
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

PEDIATRIC CARDIOLOGY

BASSI, HARJOT K

Provider ID: 205768
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 576-1700
Fax: (858) 966-7903
After Hours Phone: (858)
576-1700
Provider Gender: Female
License number: A137189
NPI: 1891025565
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego

Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

DAVIS, CHRISTOPHER K

Provider ID: 51909
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FN D TN
8001 FROST ST
SAN DIEGO, CA 92123-2746
Phone: (858) 966-5855
Fax:
After Hours Phone: (858)
966-5855
Provider Gender: Male
License number: A100260
NPI: 1760691950
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Grossmont Hospital, Scripps
Memorial Hospital, Sharp
Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Network

DAVIS, CHRISTOPHER K

Provider ID:

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 966-5855

Fax: (858) 966-7903

After Hours Phone: (858)

966-5855

Provider Gender: Male

License number: A100260

NPI: 1760691950

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego,
Grossmont Hospital, Scripps
Memorial Hospital, Sharp
Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

Phone: (858) 966-5855

Fax:

After Hours Phone: (858)

966-5855

Provider Gender: Female

License number: A83525

NPI: 1932305000

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Foothill

Regional Medical Center, Hoag
Memorial Hospital Presbyterian,
South Coast Global Medical
Center Inc, Hoag Hospital Irvine,

Anaheim Global Medical Center,

Orange County Global Medical

Center Inc, Chapman Global

Medical Center Inc, St Joseph

Hospital Orange, Childrens

Hospital At Mission, Childrens

Hospital Of Orange County

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

Provider Gender: Male

License number: A107618

NPI: 1053545376

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Childrens Hospital At Mission,

Childrens Hospital Of Orange

County

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

EL SAID, HOWAIDA G

Provider ID: 205903

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

3020 CHILDRENS WAY FL 1

SAN DIEGO, CA 92123-4223

Phone: (858) 966-5855

Fax: (858) 571-7903

After Hours Phone: (858)

966-5855

Provider Gender: Female

License number: A93820

NPI: 1619030194

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

DOMICO, MICHELE B

Provider ID: 216855

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

3020 CHILDRENS WAY FL 1

SAN DIEGO, CA 92123-4223

DO, THOMAS B

Provider ID: 206162

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

3020 CHILDRENS WAY FL 1

SAN DIEGO, CA 92123-4223

Phone: (858) 366-5855

Fax: (858) 966-7423

After Hours Phone: (858)

366-5855

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

<p><i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network</p>	<p><i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-5855 <i>Fax:</i> (858) 966-7903 <i>After Hours Phone:</i> (858) 966-5855 <i>Provider Gender:</i> Male <i>License number:</i> A82153 <i>NPI:</i> 1740308550 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> San Gabriel Valley Med Ctr, California Hosp Med Ctr Los Angeles, Emanate Health Inter-Community Hospital, Rady Childrens Hospital San Diego, Huntington Memorial Hospital, Emanate Health Queen Of The Valley Hospital, Childrens Hosp And Resrch Ctr At Oakland, Childrens Hosp Of Los Angeles <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network</p>	<p>SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 576-1700 <i>Fax:</i> (858) 966-7903 <i>After Hours Phone:</i> (858) 576-1700 <i>Provider Gender:</i> Male <i>License number:</i> A82153 <i>NPI:</i> 1740308550 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> San Gabriel Valley Med Ctr, California Hosp Med Ctr Los Angeles, Emanate Health Inter-Community Hospital, Rady Childrens Hospital San Diego, Huntington Memorial Hospital, Emanate Health Queen Of The Valley Hospital, Childrens Hosp And Resrch Ctr At Oakland, Childrens Hosp Of Los Angeles <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network</p>
<p>EL SAID, HOWAIDA G <i>Provider ID:</i> 51913 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3020 CHILDRENS WAY FL 1 SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-5855 <i>Fax:</i> (858) 966-7903 <i>After Hours Phone:</i> (858) 966-5855 <i>Provider Gender:</i> Female <i>License number:</i> A93820 <i>NPI:</i> 1619030194 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Grossmont Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network</p>	<p>FAGAN, BRIAN T <i>Provider ID:</i> 68145 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3020 CHILDRENS WAY</p>	<p>GOMEZ AROSTEGUI, JULIANA <i>Provider ID:</i> 284126 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-5855 <i>Fax:</i> (858) 966-7903 <i>After Hours Phone:</i> (858) 966-5855</p>
<p>FAGAN, BRIAN T <i>Provider ID:</i> 205346</p>	<p>FAGAN, BRIAN T <i>Provider ID:</i> 68145 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3020 CHILDRENS WAY</p>	<p>GOMEZ AROSTEGUI, JULIANA <i>Provider ID:</i> 284126 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-5855 <i>Fax:</i> (858) 966-7903 <i>After Hours Phone:</i> (858) 966-5855</p>

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D. Directorio de proveedores de atención especializada

Provider Gender: Female
License number: A76083
NPI: 1962439141
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish
Cultural Competency: No
Hospital Affiliation: Santa Clara Valley Med Ctr, Good Samaritan Hospital, Lucile Salter Packard Childrens Hosp, El Camino Hospital, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

GROSSFELD, PAUL D

Provider ID: 205615
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY FL 1
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5855
Fax: (858) 571-7903
After Hours Phone: (858) 966-5855
Provider Gender: Male
License number: A52799
NPI: 1225109085
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Ucsd

Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

GROSSFELD, PAUL D

Provider ID: 51917
Board Certified Specialty: No
 RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 3020 CHILDRENS WAY FL 1
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5855
Fax: (858) 966-7903
After Hours Phone: (858) 966-5855
Provider Gender: Male
License number: A52799
NPI: 1225109085
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health

Network

GUPTA, AAMISHA E

Provider ID: 119948
Board Certified Specialty: No
 RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5855
Fax:
After Hours Phone: (858) 966-5855
Provider Gender: Female
License number: A151188
NPI: 1356639595
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

GUPTA, AAMISHA E

Provider ID: 205884
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5855
Fax: (858) 966-7903
After Hours Phone: (858) 966-5855

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D. Directorio de proveedores de atención especializada

Provider Gender: Female
License number: A151188
NPI: 1356639595
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

HALEY, JESSICA E

Provider ID: 205687
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5855
Fax: (858) 966-7903
After Hours Phone: (858)
966-5855
Provider Gender: Female
License number: A125568
NPI: 1023329885
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

HEGDE, SANJEET R

Provider ID: 206079
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY # 5003
MC
SAN DIEGO, CA 92123-4223
Phone: (858) 309-6300
Fax: (858) 966-7903
After Hours Phone: (858)
309-6300
Provider Gender: Male
License number: A112326
NPI: 1306036884
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

HEGDE, SANJEET R

Provider ID: 261963
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 966-5855
Fax: (858) 966-7903
After Hours Phone: (858)
966-5855
Provider Gender: Male
License number: A112326
NPI: 1306036884
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

MCCANDLESS, RACHEL T

Provider ID: 206147
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-4912
Fax: (858) 966-7903
After Hours Phone: (858)
966-4912
Provider Gender: Female
License number: A131801
NPI: 1487821815
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Childrens Hosp And Resrch Ctr
At Oakland

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D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MORCHI, GIRA S
Provider ID: 205369
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5855
Fax: (858) 571-7903
After Hours Phone: (858) 966-5855
Provider Gender: Female
License number: A103210
NPI: 1386790996
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Pih Health Hospital - Whittier, Childrens Hospital Of Orange County, Mission Hospital Regional Med Center

Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

NARAYAN, HARI K
Provider ID: 112874
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 576-1700
Fax:
After Hours Phone: (858) 576-1700
Provider Gender: Male
License number: A144821
NPI: 1376705707
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

NARAYAN, HARI K
Provider ID: 205349
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5855
Fax: (858) 966-7903
After Hours Phone: (858) 966-5855
Provider Gender: Male

License number: A144821
NPI: 1376705707
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PERRY, JAMES C
Provider ID: 205695
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5855
Fax: (858) 966-7903
After Hours Phone: (858) 966-5855
Provider Gender: Male
License number: G76012
NPI: 1861474561
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Childrens Hosp And Resrch Ctr At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:

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D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

PERRY, JAMES C

Provider ID: 51921

Board Certified Specialty: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN

3020 CHILDRENS WAY FL 1 SAN DIEGO, CA 92123-4223

Phone: (858) 966-5855

Fax: (858) 966-7903

After Hours Phone: (858) 966-5855

Provider Gender: Male

License number: G76012

NPI: 1861474561

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Childrens

Hosp And Resrch Ctr At Oakland

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL): No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

POUR MOLKARA, DELARAM

Provider ID: 262423

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

2333 CAMINO DEL RIO S STE 340

SAN DIEGO, CA 92108-3615

Phone: (619) 501-4015

Fax: (619) 501-2977

After Hours Phone: (619) 501-4015

Provider Gender: Female

License number: A94039

NPI: 1306074893

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Chula Vista Med Ctr, Grossmont Hospital, Sharp

Memorial Hospital, Childrens

Hosp And Resrch Ctr At Oakland

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

Medical Group(s):

IPA: Rady Childrens Health Network

Network

Medical Group(s):

IPA: Rady Childrens Health Network

Medical Group(s):

IPA: Rady Childrens Health Network

Network

Medical Group(s):

IPA: Rady Childrens Health Network

Network

Phone: (858) 966-5855

Fax: (858) 966-7903

After Hours Phone: (858) 966-5855

Provider Gender: Female

License number: G88440

Medical Group(s):

IPA: Rady Childrens Health Network

NPI: 1790756518

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego, Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

Network

Medical Group(s):

IPA: Rady Childrens Health Network

Network

Medical Group(s):

IPA: Rady Childrens Health Network

Network

Medical Group(s):

IPA: Rady Childrens Health Network

Network

Phone: (858) 966-5855

Fax: (858) 966-7903

After Hours Phone: (858) 966-5855

Provider Gender: Female

License number: G88440

NPI: 1790756518

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego, Grossmont Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL): No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

Network

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D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

RAO, ROHIT P

Provider ID: 206122

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 966-5855

Fax: (858) 966-7903

After Hours Phone: (858) 966-5855

Provider Gender: Male

License number: C54276

NPI: 1063452779

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

RATNAYAKA, KANISHKA

Provider ID: 103581

Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 576-1700

Fax: (858) 966-7903

After Hours Phone: (858)

576-1700

Provider Gender: Male

License number: C130584

NPI: 1740368687

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

RATNAYAKA, KANISHKA

Provider ID: 205976

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-5855

Fax: (858) 966-7903

After Hours Phone: (858)

966-5855

Provider Gender: Male

License number: C130584

NPI: 1740368687

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

SAH, SERENA P

Provider ID: 206215

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123-4223

Phone: (858) 966-5855

Fax: (858) 966-7423

After Hours Phone: (858)

966-5855

Provider Gender: Female

License number: A113704

NPI: 1295042653

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

SILVA SEPULVEDA, JOSE A

Provider ID: 206297

Board Certified Specialty: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 966-5855

Fax: (858) 966-7903

After Hours Phone: (858)

966-5855

Provider Gender: Male

License number: A120119

NPI: 1417222472

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

STRINGER, JESSE D

Provider ID: 206296

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 966-5855

Fax: (858) 966-7903

After Hours Phone: (858)

966-5855

Provider Gender: Male

License number: A120899

NPI: 1972745388

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

SUN, HEATHER Y

Provider ID: 206146

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123-4223

Phone: (858) 966-5855

Fax: (858) 571-7903

After Hours Phone: (858)

966-5855

Provider Gender: Female

License number: A107943

NPI: 1811173883

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

VAUGHN, GABRIELLE R

Provider ID: 205643

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 576-1700

Fax: (858) 966-7423

After Hours Phone: (858)

576-1700

Provider Gender: Female

License number: A109772

NPI: 1891004461

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Childrens

Hosp And Resrch Ctr At

Oakland, Rady Childrens

Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

WERHO, DAVID K

Provider ID: 206316

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 966-5855

Fax: (858) 966-7903

After Hours Phone: (858)

966-5855

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Male
License number: A135895
NPI: 1235391863
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

WILLIAMS, MATTHEW R

Provider ID: 206287
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5855
Fax: (858) 966-7423
After Hours Phone: (858)
966-5855
Provider Gender: Male
License number: A109398
NPI: 1831423250
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr, Childrens
Hosp And Resrch Ctr At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

PEDIATRIC DERMATOLOGY

METTERLE, LAUREN M

Provider ID: 284660
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123-4232
Phone: (858) 966-6795
Fax: (858) 966-7479
After Hours Phone: (858)
966-6795

Provider Gender: Female
License number: A169271
NPI: 1033572391
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

PEDIATRIC EMERGENCY MEDICINE

AMINLARI, AMIR

Provider ID: 205574
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax:

After Hours Phone: (858)
966-8800

Provider Gender: Male
License number: A94415
NPI: 1316964380
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Grossmont Hospital, Scripps
Mercy Hospital, Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

AUSTIN PAGE, LUKAS R

Provider ID: 205589
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858)
966-8800

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Male
License number: A121721
NPI: 1326301862
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Childrens
Hosp Of Los Angeles, Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/25
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

CAMPBELL, SARA S

Provider ID: 206335
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax:
After Hours Phone: (858)
966-8800
Provider Gender: Female
License number: A135089
NPI: 1841687563
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Childrens
Hosp Of Los Angeles, Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):

No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

CAPELLA, MARINA N

Provider ID: 205721
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax:
After Hours Phone: (858)
966-8800
Provider Gender: Female
License number: A125409
NPI: 1265711709
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas, Tri
City Medical Ctr, Rady Childrens
Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

CHANG, ELIZABETH L

Provider ID: 205649

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858)
966-8800
Provider Gender: Female
License number: A141942
NPI: 1962745745
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

CHAO, DAVID

Provider ID: 205822
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858)
966-8800
Provider Gender: Male
License number: A130713
NPI: 1215120704
Provider English Spoken: Yes
Provider Language(s) Spoken:

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D. Directorio de proveedores de atención especializada

Mandarin
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Southwest Healthcare System
Wildomar, Southwest Healthcare
System Murrieta
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

CHENG, YU TSUN

Provider ID: 205788
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5999
Fax: (858) 966-8519
After Hours Phone: (858)
966-5999
Provider Gender: Male
License number: A98564
NPI: 1992982854
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Southwest Healthcare System
Wildomar, Southwest Healthcare
System Murrieta
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

CONRAD, HEATHER B

Provider ID: 205960
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax:
After Hours Phone: (858)
966-8800
Provider Gender: Female
License number: A84564
NPI: 1205813409
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Southwest Healthcare System
Wildomar, Sharp Chula Vista
Med Ctr, Childrens Hosp And
Resrch Ctr At Oakland,
Southwest Healthcare System
Murrieta
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

COYNE, CHRISTOPHER J
Provider ID: 206117
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 576-1700
Fax: (858) 966-7433
After Hours Phone: (858)
576-1700
Provider Gender: Male
License number: A118054
NPI: 1043590169
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton, Rady Childrens
Hospital San Diego, El Centro
Regional Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

DEL RE, ANGELO

Provider ID: 206081
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

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D. Directorio de proveedores de atención especializada

Phone: (858) 966-8800

Fax: (858) 966-7433

After Hours Phone: (858)
966-8800

Provider Gender: Male

License number: A129572

NPI: 1275761371

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Childrens

Hosp And Resrch Ctr At

Oakland, Scripps Memorial

Hospital Encinitas, Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

⌘ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

DONOFRIO, JOY J

Provider ID: 205375

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-8800

Fax: (858) 966-7433

After Hours Phone: (858)

966-8800

Provider Gender: Female

License number: 20A11581

NPI: 1740571165

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Valley

Childrens Hospital, Southwest

Healthcare System Wildomar,

Southwest Healthcare System

Murrieta, Rady Childrens

Hospital San Diego, Childrens

Hosp And Resrch Ctr At Oakland

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

⌘ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

EKPENYONG, ATIM O

Provider ID: 205722

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 576-1700

Fax: (858) 966-7433

After Hours Phone: (858)

576-1700

Provider Gender: Female

License number: A134969

NPI: 1932318565

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Southwest Healthcare System

Wildomar, Southwest Healthcare

System Murrieta

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

⌘ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

ETKIN, MARC L

Provider ID: 205897

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-8800

Fax: (858) 966-7433

After Hours Phone: (858)

966-8800

Provider Gender: Male

License number: A75092

NPI: 1194896852

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

⌘ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

GARDINER, MICHAEL A

Provider ID: 205728

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY

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D. Directorio de proveedores de atención especializada

SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858) 966-8800
Provider Gender: Male
License number: A124399
NPI: 1205178712
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

GIBONEY, JENNIFER C

Provider ID: 205925
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858)
966-8800
Provider Gender: Female
License number: A130768
NPI: 1275895849
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes

Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

GUTGLASS, DAVID J

Provider ID: 205751
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858)
966-8800
Provider Gender: Male
License number: G77971
NPI: 1952472706
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego, St
Joseph Hospital Orange,
California Pacific Med Ctr,
Southwest Healthcare System
Wildomar, Childrens Hospital Of
Orange County, Childrens Hosp
And Resrch Ctr At Oakland,
Southwest Healthcare System
Murrieta, Providence Little Co Of
Mary Med Ctr Torrance
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

HERSKOVITZ, SCOTT A

Provider ID: 261045
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858)
966-8800
Provider Gender: Male
License number: A155234
NPI: 1225393499
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

HOECKER, CYNTHIA C

Provider ID: 206026
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858) 966-8800
Provider Gender: Female
License number: A53189
NPI: 1770654527
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

HUNTER, WENDY L

Provider ID: 206278
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax:
After Hours Phone: (858)
966-8800
Provider Gender: Female
License number: A94607
NPI: 1053515551
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Childrens
Hosp And Resrch Ctr At
Oakland, Rady Childrens
Hospital San Diego

Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

ISHIMINE, PAUL T

Provider ID: 206236
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858)
966-8800
Provider Gender: Male
License number: A79142
NPI: 1437184421
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

JOSHI, WEENA E

Provider ID: 262232
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858)
966-8800
Provider Gender: Female
License number: A91208
NPI: 1376862177
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Pomerado Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

JOSHI, WEENA E

Provider ID: 262234
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105-1690
Phone: (619) 280-2905
Fax: (619) 283-1614
After Hours Phone: (619)
280-2905
Provider Gender: Female
License number: A91208

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1376862177
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Pomerado Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

KANEGAYE, JOHN T
Provider ID: 206153
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858)
966-8800
Provider Gender: Male
License number: G67670
NPI: 1689745432
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Rady Childrens Health
Network
KANTHARIA, TINA H
Provider ID: 206291
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105-1690
Phone: (619) 280-2905
Fax: (619) 283-1614
After Hours Phone: (619)
280-2905
Provider Gender: Female
License number: A126911
NPI: 1659632362
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network
KANTHARIA, TINA H
Provider ID: 262247
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 309-7701
Fax: (858) 966-8038
After Hours Phone: (858)
309-7701
Provider Gender: Female
License number: A126911
NPI: 1659632362
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

KAO, DANIEL J
Provider ID: 206406
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105-1690
Phone: (619) 280-2905
Fax: (619) 280-2905
After Hours Phone: (619)
280-2905
Provider Gender: Male
License number: A90174
NPI: 1982917894
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility: P, EB, IB, E, W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

KAO, DANIEL J

Provider ID: 206408
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax:
After Hours Phone: (858) 966-8800
Provider Gender: Male
License number: A90174
NPI: 1982917894
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18

American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

LUCIO, SIMON J

Provider ID: 206040
Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858) 966-8800
Provider Gender: Male
License number: G72884
NPI: 1306917158
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta
Medi-Cal Open Panel: Yes

Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

METCALF, ASHLEY M

Provider ID: 205348
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax:
After Hours Phone: (858) 966-8800
Provider Gender: Female
License number: 20A14115
NPI: 1073740205

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MURRAY, MATTHEW P

Provider ID: 205759
Board Certified Specialty: Yes
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax:
After Hours Phone: (858) 966-8800
Provider Gender: Male
License number: A115958
NPI: 1215103023
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

<p>♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network</p>	<p>NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-8800 <i>Fax:</i> (858) 966-7433 <i>After Hours Phone:</i> (858) 966-8800 <i>Provider Gender:</i> Female <i>License number:</i> A98529 <i>NPI:</i> 1366612848 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Childrens Hospital Of Orange County, Rady Childrens Hospital San Diego, Southwest Healthcare System Murrieta <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network</p>	<p><i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Childrens Hosp And Resrch Ctr At Oakland, Rady Childrens Hospital San Diego, Scripps Memorial Hospital Encinitas <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network</p>
<p>PADE, KATHRYN H <i>Provider ID:</i> 262411 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-8800 <i>Fax:</i> (858) 966-7433 <i>After Hours Phone:</i> (858) 966-8800 <i>Provider Gender:</i> Female <i>License number:</i> A126029 <i>NPI:</i> 1215375183 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Stanford Health Care, Lucile Salter Packard Childrens Hosp, Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network</p>	<p>PRITCHARD, AMY M <i>Provider ID:</i> 205973 <i>Board Certified Specialty:</i> Yes RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-8800 <i>Fax:</i> (858) 966-7433 <i>After Hours Phone:</i> (858) 966-8800 <i>Provider Gender:</i> Female <i>License number:</i> 20A13216 <i>NPI:</i> 1710140819 <i>Provider English Spoken:</i> Yes</p>	<p>RANASURIYA, DUNISHA G <i>Provider ID:</i> 216970 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-8800 <i>Fax:</i> <i>After Hours Phone:</i> (858) 966-8800 <i>Provider Gender:</i> Female <i>License number:</i> C161114 <i>NPI:</i> 1740468057 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i></p>
<p>PATEL, BEENA H <i>Provider ID:</i> 205583 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH</p>		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Email:
Medical Group(s):
IPA: Rady Childrens Health Network

RATNAYAKE, KRISTIN J

Provider ID: 206034
Board Certified Specialty: Yes
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY # 5075 MC
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858) 966-8800
Provider Gender: Female
License number: A113599
NPI: 1679716658
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Southwest Healthcare System Wildomar, Childrens Hosp And Resrch Ctr At Oakland, Southwest Healthcare System Murrieta, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No

Ⓜ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

RIVERA, GASPAR

Provider ID: 205979
Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858) 966-8800

Provider Gender: Male
License number: A132585
NPI: 1053754499
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Childrens Hosp And Resrch Ctr At Oakland, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18

American Sign Language (ASL): No
Ⓜ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SALEH, FAREED R

Provider ID: 206216
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858) 966-8800
Provider Gender: Male
License number: A149736
NPI: 1366691115

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Ⓜ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SCHWARTZ, KRISTY L

Provider ID: 206169
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858) 966-8800
Provider Gender: Female
License number: A121299
NPI: 1497080808
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Southwest Healthcare System Wildomar, Childrens Hosp And Resrch Ctr At Oakland, Southwest Healthcare System Murrieta, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

TAMAS, VANESSA L

Provider ID: 206212
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 576-1700
Fax: (858) 966-7433
After Hours Phone: (858) 576-1700
Provider Gender: Female
License number: A101991
NPI: 1326225368
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Southwest Healthcare System Wildomar, Childrens Hosp Of Los Angeles, Southwest Healthcare System Murrieta
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

TRAUT, JOEL

Provider ID: 205475

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 576-1700
Fax: (858) 966-7433
After Hours Phone: (858) 576-1700
Provider Gender: Male
License number: C51079
NPI: 1982792065
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

ULRICH, STACEY L

Provider ID: 205847
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8036
Fax: (858) 966-7433
After Hours Phone: (858) 966-8036
Provider Gender: Female
License number: A76660
NPI: 1619049236
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

VANE, JACKSON

Provider ID: 205883
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax:
After Hours Phone: (858) 966-8800
Provider Gender: Male
License number: A120394
NPI: 1952608580
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

VARGAS, JACLYN

Provider ID: 285934
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5841
Fax: (858) 966-6728
After Hours Phone: (858) 966-5841
Provider Gender: Female
License number: A144447
NPI: 1619359718
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Lac Usc Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

VARGAS, JACLYN

Provider ID: 285935
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123-4223
Phone: (858) 576-1700
Fax: (858) 966-8479
After Hours Phone: (858) 576-1700
Provider Gender: Female

License number: A144447
NPI: 1619359718
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Lac Usc Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

VAYNGORTIN, TATYANA

Provider ID: 263012
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858) 966-8800
Provider Gender: Female
License number: A128532
NPI: 1578967907
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Childrens
Hosp And Resrch Ctr At
Oakland, Childrens Hosp Of Los
Angeles, Rady Childrens
Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):

No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

WAI, SHANNON S

Provider ID: 205640
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY # 5075
MC
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858) 966-8800
Provider Gender: Female
License number: A122459
NPI: 1528395282
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Southwest Healthcare System
Murrieta, Southwest Healthcare
System Wildomar
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

WANG, YVETTE L

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D. Directorio de proveedores de atención especializada

Provider ID: 263416
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858) 966-8800
Provider Gender: Female
License number: A132451
NPI: 1710321278
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

YAPHOCKUN, KAREN K
Provider ID: 206184
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 576-1700
Fax: (858) 966-7433
After Hours Phone: (858) 576-1700
Provider Gender: Female
License number: 20A13298
NPI: 1861880817
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PEDIATRIC ENDOCRINOLOGY

DEMETERCO BERGGREN, CARLA
Provider ID: 206161
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 4 NORTH
SAN DIEGO, CA 92123-4232
Phone: (858) 966-4032
Fax: (858) 966-6227
After Hours Phone: (858) 966-4032
Provider Gender: Female
License number: A98629
NPI: 1619130655
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network
GOTTSCHALK, MICHAEL E
Provider ID: 205777
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 4 NORTH
SAN DIEGO, CA 92123-4232
Phone: (858) 966-4032
Fax: (858) 966-6227
After Hours Phone: (858) 966-4032
Provider Gender: Male
License number: G55424
NPI: 1033280888
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

KIM, JANE J
Provider ID: 206194
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 4 NORTH

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D. Directorio de proveedores de atención especializada

SAN DIEGO, CA 92123-4232

Phone: (858) 966-4032

Fax: (858) 966-6227

After Hours Phone: (858) 966-4032

Provider Gender: Female

License number: C51620

NPI: 1235200098

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego, Medical Ctr At Ucsf

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

KLEIN, KAREN O

Provider ID: 206269

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 4 NORTH

SAN DIEGO, CA 92123-4232

Phone: (858) 966-4032

Fax: (858) 966-6227

After Hours Phone: (858) 966-4032

Provider Gender: Female

License number: G76034

NPI: 1760553515

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Rady Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

MARINKOVIC, MAJA

Provider ID: 206139

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 4 NORTH

SAN DIEGO, CA 92123-4232

Phone: (858) 966-4032

Fax: (858) 966-6227

After Hours Phone: (858) 966-4032

Provider Gender: Female

License number: A95251

NPI: 1053469767

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Childrens

Hosp And Resrch Ctr At

Oakland, Rady Childrens

Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

NEWFIELD, RON S

Provider ID: 205372

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 4 NORTH

SAN DIEGO, CA 92123-4232

Phone: (858) 966-4032

Fax: (858) 966-6227

After Hours Phone: (858) 966-4032

Provider Gender: Male

License number: A73875

NPI: 1679644421

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp Memorial Hospital, Ucsd Medical Ctr, Rady Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

PATTERSON, MARY E

Provider ID: 206059

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 4 NORTH

SAN DIEGO, CA 92123-4232

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 966-4032
Fax: (858) 966-6227
After Hours Phone: (858) 966-4032
Provider Gender: Female
License number: A104058
NPI: 1912112020
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

PHILLIPS, SUSAN A

Provider ID: 205579
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY FL 4
NORTH
SAN DIEGO, CA 92123-4232
Phone: (858) 966-4032
Fax: (858) 966-6227
After Hours Phone: (858)
966-4032
Provider Gender: Female
License number: G85921
NPI: 1588735336
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes

Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

VARGAS TRUJILLO,

MARCELA

Provider ID: 205605
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123-4232
Phone: (858) 966-4032
Fax: (858) 966-4032
After Hours Phone: (858)
966-4032
Provider Gender: Female
License number: A139213
NPI: 1952534091
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18

American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

PEDIATRIC

GASTROENTEROLOGY

CASTANO, DANIELA

Provider ID: 242976
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123-4232
Phone: (858) 966-4003
Fax: (858) 560-6798
After Hours Phone: (858)
966-4003
Provider Gender: Female
License number: A132006
NPI: 1851616478
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

CHOGLE, ASHISH

Provider ID: 278852
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123-4232
Phone: (858) 966-4003
Fax: (858) 560-6798
After Hours Phone: (858)
966-4003

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Male
License number: C134863
NPI: 1023273141
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, University Of California Irvine Med Ctr, Childrens Hospital Of Orange County
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CHU, ANGELA L

Provider ID: 284173
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123-4232
Phone: (858) 966-4003
Fax: (858) 560-6798
After Hours Phone: (858) 966-4003
Provider Gender: Female
License number: A146137
NPI: 1013396126
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18

American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

DOHIL, RANJAN

Provider ID: 205418
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 2
SOUTH
SAN DIEGO, CA 92123-4232
Phone: (858) 966-4003
Fax: (858) 966-8592
After Hours Phone: (858) 576-1700
Provider Gender: Male
License number: A73858
NPI: 1396816146
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Scripps Memorial Hospital, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

Provider ID: 205418
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 2
SOUTH
SAN DIEGO, CA 92123-4232
Phone: (858) 966-4003
Fax: (858) 560-6798
After Hours Phone: (858) 966-4003

FELDSTEIN, ARIEL E

Provider ID: 205808
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 2
SOUTH
SAN DIEGO, CA 92123-4232
Phone: (858) 966-4003
Fax: (858) 560-6798
After Hours Phone: (858) 966-4003
Provider Gender: Male
License number: C54991
NPI: 1174587281
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

GOYAL, NIDHI P

Provider ID: 205598
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 2
SOUTH
SAN DIEGO, CA 92123-4232
Phone: (858) 966-4003
Fax: (858) 560-6798
After Hours Phone: (858) 966-4003

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D. Directorio de proveedores de atención especializada

Provider Gender: Female
License number: A111133
NPI: 1598029332
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Childrens Hosp And Resrch Ctr
At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

NEWTON, KIMBERLY P

Provider ID: 205361
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY # 2
SAN DIEGO, CA 92123-4232
Phone: (858) 966-4003
Fax: (858) 560-6798
After Hours Phone: (858)
966-4003
Provider Gender: Female
License number: A101980
NPI: 1912071655
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr, Naval Medical
Ctr Sd Rbe
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18

American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

ORDONEZ NARANJO, MARIA P

Provider ID: 205582
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY # 2
SAN DIEGO, CA 92123-4232
Phone: (858) 966-4003
Fax: (858) 560-6798
After Hours Phone: (858)
966-4003

Provider Gender: Female
License number: A95983
NPI: 1275764458
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Childrens Hosp And Resrch Ctr
At Oakland, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

SCHWARZ, KATHLEEN B

Provider ID: 205885
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123-4232
Phone: (858) 966-4003
Fax: (858) 560-6798
After Hours Phone: (858)
966-4003
Provider Gender: Female
License number: G152263
NPI: 1265465918
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

SCHWIMMER, JEFFREY B

Provider ID: 205414
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY # 2
SAN DIEGO, CA 92123-4232
Phone: (858) 966-4003
Fax: (858) 560-6798
After Hours Phone: (858)
966-4003
Provider Gender: Male
License number: A60461
NPI: 1932270782

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp
 Memorial Hospital, Naval Medical
 Ctr Sd Rbe
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

SIVAGNANAM, MAMATA

Provider ID: 206323
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3030 CHILDRENS WAY FL 2
 SOUTH
 SAN DIEGO, CA 92123-4232
Phone: (858) 966-4003
Fax: (858) 560-6798
After Hours Phone: (858)
 966-4003
Provider Gender: Female
License number: A86863
NPI: 1932328747
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Ucsd Medical Ctr, Sharp
 Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ♿ *Accessibility:*

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

YU, ELIZABETH L

Provider ID: 206312
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3030 CHILDRENS WAY FL 2
 SOUTH
 SAN DIEGO, CA 92123-4232
Phone: (858) 966-4003
Fax: (858) 560-6798
After Hours Phone: (858)
 966-4003
Provider Gender: Female
License number: A102372
NPI: 1538485586
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Childrens Hosp And Resrch Ctr
 At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

PEDIATRIC HEMATOLOGY / ONCOLOGY

ANDERSON, ERIC J

Provider ID: 205705
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3010 CHILDRENS WAY # 2W
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858)
 966-5811
Provider Gender: Male
License number: A91428
NPI: 1346312964
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

ARISTIZABAL, MARIA P

Provider ID: 205762
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3010 CHILDRENS WAY # 2W
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858)
 966-5811
Provider Gender: Female
License number: A127586
NPI: 1154662583
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken: IPA: Rady Childrens Health
Cultural Competency: No Network
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

CHOO, SUN H

Provider ID: 206115
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3010 CHILDRENS WAY #
2-WEST
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858)
966-5811
Provider Gender: Female
License number: A112219
NPI: 1700047628
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Rady Childrens Health
Network

DING, HILDA H

Provider ID: 206173
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3010 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858)
966-5811
Provider Gender: Female
License number: A144295
NPI: 1780813923
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

ELSTER, JENNIFER D

Provider ID: 205769
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3010 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858)
966-5811

Provider Gender: Female
License number: A144876
NPI: 1588866115
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

GANESAN, ANUSHA P

Provider ID: 205882
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3010 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858)
966-5811
Provider Gender: Female
License number: A147249
NPI: 1982091740
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

GLOUDE, NICHOLAS J

Provider ID: 205927
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
8001 FROST ST
SAN DIEGO, CA 92123-2746
Phone: (858) 966-5811
Fax:
After Hours Phone: (858) 966-5811
Provider Gender: Male
License number: A119146
NPI: 1447527833
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

KIM, JENNY M

Provider ID: 206235
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3010 CHILDRENS WAY # 2-WEST
SAN DIEGO, CA 92123-4223

Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858) 966-5811
Provider Gender: Female
License number: A80257
NPI: 1255402012
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

KUO, DENNIS J

Provider ID: 205433
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3010 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858) 966-5811
Provider Gender: Male
License number: A84128
NPI: 1750492146
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18

American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

ROBERTS, WILLIAM D

Provider ID: 206045
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3010 CHILDRENS WAY # 2-WEST
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858) 966-5811
Provider Gender: Male
License number: A46026
NPI: 1245302561
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SCHIFF, DEBORAH E

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D. Directorio de proveedores de atención especializada

Provider ID: 206127
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3010 CHILDRENS WAY # 2W
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858) 966-5811
Provider Gender: Female
License number: G68457
NPI: 1922179779
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Rady Childrens Hospital San Diego, Scripps Green Hospital, Childrens Hosp And Resrch Ctr At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

THORNBURG, COURTNEY D

Provider ID: 206165
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3010 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858) 966-5811

Provider Gender: Female
License number: C55985
NPI: 1538222310
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

WONG, VICTOR

Provider ID: 206149
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3010 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858) 966-5811
Provider Gender: Male
License number: A119433
NPI: 1154692473
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

YOON, JANET M

Provider ID: 206270
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3010 CHILDRENS WAY # 2W
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858) 966-5811
Provider Gender: Female
License number: A81191
NPI: 1518166966
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Uc Davis Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

YU, JENNIFER C

Provider ID: 206148
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3010 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858) 966-5811
Provider Gender: Female
License number: A110445
NPI: 1326315599
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

ZAGE, PETER E

Provider ID: 206315
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3010 CHILDRENS WAY # 2W
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858)
966-5811
Provider Gender: Male
License number: C141853
NPI: 1912003161
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18

American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

PEDIATRIC INFECTIOUS DISEASES

BRADLEY, JOHN S

Provider ID: 205983
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123-4232
Phone: (858) 966-7785
Fax: (858) 966-8658
After Hours Phone: (858)
966-7785
Provider Gender: Male
License number: G35234
NPI: 1740351592
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

CANNAVINO, CHRISTOPHER R

Provider ID: 205358
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123-4232
Phone: (858) 966-7785
Fax: (858) 966-8658
After Hours Phone: (858)
966-7785
Provider Gender: Male
License number: A86636
NPI: 1831260595
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital, Ucsd
Medical Ctr, Childrens Hosp And
Resrch Ctr At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

CANNAVINO, CHRISTOPHER R

Provider ID: 205359
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY # 5041
SAN DIEGO, CA 92123-4223

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (885) 966-7785

Fax:

After Hours Phone: (885)
966-7785

Provider Gender: Male

License number: A86636

NPI: 1831260595

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital, Ucsd
Medical Ctr, Childrens Hosp And
Resrch Ctr At Oakland

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

PONG, ALICE

Provider ID: 205626

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123-4232

Phone: (858) 966-7785

Fax: (858) 966-8658

After Hours Phone: (858)
966-7785

Provider Gender: Female

License number: G75974

NPI: 1568533313

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital, Ucsd
Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

SPECTOR, STEPHEN A

Provider ID: 206301

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

330 LEWIS ST
SAN DIEGO, CA 92103-2108

Phone: (619) 543-8089

Fax: (619) 298-2698

After Hours Phone: (619)
543-8089

Provider Gender: Male

License number: G32467

NPI: 1790857316

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr, Scripps Mercy
Hospital, Childrens Hosp And
Resrch Ctr At Oakland

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

SPECTOR, STEPHEN A

Provider ID: 206302

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123-4232

Phone: (858) 966-7785

Fax: (858) 966-8658

After Hours Phone: (858)
966-7785

Provider Gender: Male

License number: G32467

NPI: 1790857316

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr, Scripps Mercy
Hospital, Childrens Hosp And
Resrch Ctr At Oakland

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

TREMOULET, ADRIANA H

Provider ID: 205392

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 246-0157
Fax: (858) 246-0156
After Hours Phone: (858) 246-0157
Provider Gender: Female
License number: A76788
NPI: 1013015445
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Scripps Mercy Hospital, Sharp Mary Birch Hosp For Women And Newborns, Scripps Memorial Hospital Encinitas, Childrens Hosp And Resrch Ctr At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

TREMOULET, ADRIANA H

Provider ID: 205393
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123-4232
Phone: (858) 966-7785
Fax: (858) 966-8658
After Hours Phone: (858) 966-7785
Provider Gender: Female

License number: A76788
NPI: 1013015445
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Scripps Mercy Hospital, Sharp Mary Birch Hosp For Women And Newborns, Scripps Memorial Hospital Encinitas, Childrens Hosp And Resrch Ctr At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PEDIATRIC NEPHROLOGY

BENADOR, NADINE M

Provider ID: 205908
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
8001 FROST ST
SAN DIEGO, CA 92123-2746
Phone: (858) 966-8052
Fax:
After Hours Phone: (858) 966-8052
Provider Gender: Female
License number: A84483
NPI: 1366513129
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CARTER, CAITLIN E

Provider ID: 205641
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
8001 FROST ST
SAN DIEGO, CA 92123-2746
Phone: (858) 966-8052
Fax: (858) 966-7789
After Hours Phone: (858) 966-8052
Provider Gender: Female
License number: A93600
NPI: 1255514618
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Scripps Green Hospital, Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Rady Childrens Health Network

GUNTA, SUJANA S

Provider ID: 205947
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
8001 FROST ST
SAN DIEGO, CA 92123-2746
Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Provider Gender: Female
License number: A109056
NPI: 1932304342
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Marathi, Spanish, Telugu
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Tri City Medical Ctr

Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

INGULLI, ELIZABETH G

Provider ID: 206322
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
8001 FROST ST # 10
SAN DIEGO, CA 92123-2746

Phone: (858) 966-8052
Fax: (858) 966-7789
After Hours Phone: (858) 966-8052
Provider Gender: Female
License number: G87981
NPI: 1811919244
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

KIMBALL, AMY L

Provider ID: 262149
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5818
Fax: (858) 966-7483
After Hours Phone: (858) 966-5818
Provider Gender: Female
License number: A87696
NPI: 1932255668
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego,

Scripps Memorial Hospital Encinitas, Ucsd Medical Ctr, Scripps Mercy Hospital, Southwest Healthcare System Wildomar, Scripps Mercy Hospital Chula Vista, Southwest Healthcare System Murrieta
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

NOURBAKHSH, NOUREDDIN D

Provider ID: 205604
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
8001 FROST ST
SAN DIEGO, CA 92123-2746
Phone: (858) 966-8052
Fax: (858) 966-7789
After Hours Phone: (858) 966-8052
Provider Gender: Male
License number: 20A11746
NPI: 1801082003
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Childrens Hosp And Resrch Ctr At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

PANNELL, JEFFREY S

Provider ID: 262369

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

7910 FROST ST STE 120
SAN DIEGO, CA 92123-2776

Phone: (858) 966-8574

Fax: (858) 966-7930

After Hours Phone: (858)
966-8574

Provider Gender: Male

License number: A120161

NPI: 1346426996

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr, Rady Childrens
Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

⌘ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network, Ucsd Medical Group

PERENS, ELLIOT A

Provider ID: 205726

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

8001 FROST ST

SAN DIEGO, CA 92123-2746

Phone: (858) 966-8052

Fax: (858) 966-7789

After Hours Phone: (858)
966-8052

Provider Gender: Male

License number: A108840

NPI: 1922328947

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego,
Childrens Hosp And Resrch Ctr
At Oakland, Medical Ctr At Ucsf

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

⌘ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

YORGIN, PETER D

Provider ID: 206225

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

8001 FROST ST # 1

ENTRANCE

SAN DIEGO, CA 92123-2746

Phone: (858) 966-8052

Fax: (858) 966-7789

After Hours Phone: (858)
966-8052

Provider Gender: Male

License number: G64029

NPI: 1023039831

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego,
Scripps Memorial Hospital, Sharp
Memorial Hospital, Childrens
Hosp And Resrch Ctr At Oakland

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

⌘ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

PEDIATRIC ORTHOPEDICS

CHAMBERS, HENRY G

Provider ID: 205793

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 576-5999

Fax: (858) 576-8412

After Hours Phone: (858)
576-5999

Provider Gender: Male

License number: A44985

NPI: 1205907060

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

⌘ Accessibility: W

Hours: M-SA 9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CHAMBERS, HENRY G

Provider ID: 217680
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123-4232
Phone: (858) 966-6789
Fax: (858) 966-6706
After Hours Phone: (858) 966-6789
Provider Gender: Male
License number: A44985
NPI: 1205907060
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

EDMONDS, ERIC W

Provider ID: 205492
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY STE 410
SAN DIEGO, CA 92123-4228

Phone: (858) 966-6789
Fax: (858) 966-6706
After Hours Phone: (858) 966-6789
Provider Gender: Male
License number: A86165
NPI: 1013048412
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

EDMONDS, ERIC W

Provider ID: 205494
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
7910 FROST ST STE 190
SAN DIEGO, CA 92123-2731
Phone: (858) 966-9360
Fax: (858) 966-8519
After Hours Phone: (858) 966-9360
Provider Gender: Male
License number: A86165
NPI: 1013048412
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego,

Childrens Hosp And Resrch Ctr At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

EDMONDS, ERIC W

Provider ID: 205495
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5999
Fax: (858) 576-8412
After Hours Phone: (858) 966-5999
Provider Gender: Male
License number: A86165
NPI: 1013048412
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Network

EDMONDS, ERIC W

Provider ID: 260841

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123-4232

Phone: (858) 966-6789

Fax: (858) 966-6706

After Hours Phone: (858)

966-6789

Provider Gender: Male

License number: A86165

NPI: 1013048412

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,
Childrens Hosp And Resrch Ctr
At Oakland

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

NEWTON, PETER O

Provider ID: 242970

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123-4232

Phone: (858) 966-6789

Fax:

After Hours Phone: (858)
966-6789

Provider Gender: Male

License number: A45168

NPI: 1023189883

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,
Doctors Hospital Of Riverside Llc

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

PENNOCK, ANDREW T

Provider ID: 262451

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123-4232

Phone: (858) 966-6789

Fax: (858) 966-6706

After Hours Phone: (858)

966-6789

Provider Gender: Male

License number: A90049

NPI: 1619151685

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,
Childrens Hosp And Resrch Ctr

At Oakland

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

PRING, MAYA E

Provider ID: 205779

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 966-5999

Fax: (858) 576-8412

After Hours Phone: (858)

966-5999

Provider Gender: Female

License number: A77003

NPI: 1104997964

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

PRING, MAYA E

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider ID: 205781
Board Certified Specialty: Yes
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY STE 410
SAN DIEGO, CA 92123-4228
Phone: (858) 966-6789
Fax: (858) 966-6706
After Hours Phone: (858) 966-6789
Provider Gender: Female
License number: A77003
NPI: 1104997964
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

RICKERT, KATHLEEN D

Provider ID: 205977
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY # 3
SAN DIEGO, CA 92123-4232
Phone: (858) 966-6789
Fax: (858) 966-6706
After Hours Phone: (858) 966-6789
Provider Gender: Female
License number: A140439
NPI: 1023308921

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

UPASANI, VIDYADHAR V

Provider ID: 205914
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5999
Fax: (858) 966-8519
After Hours Phone: (858) 966-5999
Provider Gender: Male
License number: A97603
NPI: 1548417652
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Rady Childrens Health Network

UPASANI, VIDYADHAR V

Provider ID: 205916
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY STE 410
SAN DIEGO, CA 92123-4228
Phone: (858) 966-6789
Fax: (858) 966-6706
After Hours Phone: (858) 966-6789
Provider Gender: Male
License number: A97603
NPI: 1548417652
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

UPASANI, VIDYADHAR V

Provider ID: 260953
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123-4232

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 966-6789
Fax: (858) 966-6706
After Hours Phone: (858) 966-6789
Provider Gender: Male
License number: A97603
NPI: 1548417652
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

WALLACE, CHARLES D
Provider ID: 205661
Board Certified Specialty: Yes
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY STE
410
SAN DIEGO, CA 92123-4228
Phone: (858) 966-6789
Fax: (858) 966-6706
After Hours Phone: (858)
966-6789
Provider Gender: Male
License number: G67953
NPI: 1144229600
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Parkview Community Hospital

Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

WALLACE, CHARLES D
Provider ID: 205662
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
7910 FROST ST STE 190
SAN DIEGO, CA 92123-2731
Phone: (858) 966-9360
Fax: (858) 966-8519
After Hours Phone: (858)
966-9360
Provider Gender: Male
License number: G67953
NPI: 1144229600
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Doctors Hospital Of Riverside Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

WALLACE, CHARLES D
Provider ID: 205663
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5999
Fax: (858) 576-8412
After Hours Phone: (858)
966-5999
Provider Gender: Male
License number: G67953
NPI: 1144229600
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Doctors Hospital Of Riverside Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

PEDIATRIC PATHOLOGY

MO, JUN Q
Provider ID: 205432
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY # 5007
MC
SAN DIEGO, CA 92123-4223

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D. Directorio de proveedores de atención especializada

Phone: (858) 966-5944
Fax: (858) 966-8087
After Hours Phone: (858) 966-5944
Provider Gender: Female
License number: A72760
NPI: 1952402786
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

NEWBURY, ROBERT O

Provider ID: 205613
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5944
Fax: (858) 966-8087
After Hours Phone: (858)
966-5944
Provider Gender: Male
License number: A49890
NPI: 1205907961
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital
Medi-Cal Open Panel: Yes

Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

TUCKER, SUZANNE M

Provider ID: 205378
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5944
Fax: (858) 966-8087
After Hours Phone: (858)
966-5944
Provider Gender: Female
License number: A149311
NPI: 1326210527
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

PEDIATRIC PULMONOLOGY

AKONG, KATHRYN A

Provider ID: 205673
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY # 2
SAN DIEGO, CA 92123-4232
Phone: (858) 966-5846
Fax: (858) 966-8457
After Hours Phone: (858)
966-5846
Provider Gender: Female
License number: A96565
NPI: 1912169061
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

BHATTACHARJEE, RAKESH

Provider ID: 102439
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDRN
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123-4232
Phone: (858) 966-4003
Fax:
After Hours Phone: (858)
966-4003
Provider Gender: Male
License number: C138339
NPI: 1588781173

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

BHATTACHARJEE, RAKESH

Provider ID: 205950
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY FL 2
NORTH
SAN DIEGO, CA 92123-4232
Phone: (858) 966-5846
Fax: (858) 966-8457
After Hours Phone: (858)
966-5846
Provider Gender: Male
License number: C138339
NPI: 1588781173
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Rady Childrens Health
Network
BHATTACHARJEE, RAKESH
Provider ID: 246060
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 576-1700
Fax:
After Hours Phone: (858)
576-1700
Provider Gender: Male
License number: C138339
NPI: 1588781173

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

CERNELC KOHAN, MATEJKA

Provider ID: 243041
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123-4232

Phone: (858) 966-5846
Fax: (858) 966-8457
After Hours Phone: (858)
966-5846
Provider Gender: Female
License number: A116947
NPI: 1871752451
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Childrens
Hosp And Resrch Ctr At
Oakland, Rady Childrens
Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

CERNELC KOHAN, MATEJKA

Provider ID: 243042
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5846
Fax: (858) 966-8457
After Hours Phone: (858)
966-5846
Provider Gender: Female
License number: A116947
NPI: 1871752451
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Childrens
Hosp And Resrch Ctr At

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Oakland, Rady Childrens
Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

CHENG, EULALIA R

Provider ID: 205827
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY # 2
SAN DIEGO, CA 92123-4232
Phone: (858) 966-5846
Fax: (858) 966-8457
After Hours Phone: (858)
966-5846
Provider Gender: Female
License number: C142765
NPI: 1750394862
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

DUONG, THU A

Provider ID: 260354
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY FL 2
NORTH
SAN DIEGO, CA 92123-4232
Phone: (858) 966-5846
Fax: (858) 569-8457
After Hours Phone: (858)
966-5846
Provider Gender: Female
License number: A127187
NPI: 1326309881
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

DUONG, THU A

Provider ID: 260356
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105-1690
Phone: (619) 280-2905
Fax: (619) 283-1614
After Hours Phone: (619)
280-2905

Provider Gender: Female
License number: A127187
NPI: 1326309881
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

LANDEO GUTIERREZ, JEREMY S

Provider ID: 284176
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5846
Fax: (858) 569-9052
After Hours Phone: (858)
966-5846
Provider Gender: Male
License number: A172945
NPI: 1255750360
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

LANDEO GUTIERREZ, JEREMY S

Provider ID: 284177

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123-4232

Phone: (858) 966-5846

Fax: (858) 966-8457

After Hours Phone: (858)

966-5846

Provider Gender: Male

License number: A172945

NPI: 1255750360

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

LESSER, DANIEL J

Provider ID: 205890

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 2
NORTH

SAN DIEGO, CA 92123-4232

Phone: (858) 966-5846

Fax: (858) 569-5847

After Hours Phone: (858)

966-5846

Provider Gender: Male

License number: A89883

NPI: 1427274679

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego,
Childrens Hosp Of Los Angeles

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

LIM, MEERANA

Provider ID: 206039

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 2
NORTH

SAN DIEGO, CA 92123-4232

Phone: (858) 966-5846

Fax: (858) 569-5847

After Hours Phone: (858)

966-5846

Provider Gender: Female

License number: A79998

NPI: 1073684833

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

RAO, APARNA R

Provider ID: 118515

Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FN D TN

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 966-5846

Fax:

After Hours Phone: (858)

966-5846

Provider Gender: Female

License number: C54275

NPI: 1649222340

Provider English Spoken: Yes

Provider Language(s) Spoken:

Hindi

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

IPA: Rady Childrens Health Network

RAO, APARNA R

Provider ID: 206123
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5846
Fax: (858) 569-9052
After Hours Phone: (858) 966-5846
Provider Gender: Female
License number: C54275
NPI: 1649222340
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

RAO, APARNA R

Provider ID: 206124
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123-4232

Phone: (858) 966-5846
Fax: (858) 966-5847
After Hours Phone: (858) 966-5846
Provider Gender: Female
License number: C54275
NPI: 1649222340
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

RYU, JULIE

Provider ID: 206218
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 2 NORTH
SAN DIEGO, CA 92123-4232
Phone: (858) 966-5846
Fax: (858) 569-5847
After Hours Phone: (858) 966-5846
Provider Gender: Female
License number: A94343
NPI: 1568533321
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Rady Childrens Hospital San

Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

TANTISIRA, KELAN G

Provider ID: 277183
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5846
Fax: (858) 569-9052
After Hours Phone: (858) 966-5846
Provider Gender: Male
License number: G67143
NPI: 1760420434
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PEDIATRIC RADIOLOGY

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

GROVER, RYAN S

Provider ID: 206104

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

9730 SUMMERS RIDGE RD
SAN DIEGO, CA 92121-3101

Phone: (858) 549-7400

Fax:

After Hours Phone: (858)
549-7400

Provider Gender: Male

License number: A81474

NPI: 1346251287

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,
Scripps Memorial Hospital,
Scripps Green Hospital, Sharp
Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

PUGMIRE, BRIAN S

Provider ID: 285401

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A138998

NPI: 1609190578

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Valley

Childrens Hospital, Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

PUGMIRE, BRIAN S

Provider ID: 285403

Board Certified Specialty: No
UCSD MEDICAL GROUP

330 LEWIS ST # 202

SAN DIEGO, CA 92103-2108

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A138998

NPI: 1609190578

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Valley

Childrens Hospital, Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

PEDIATRIC RHEUMATOLOGY

CHIRASEVEENUPRAPUND, PETER

Provider ID: 205936

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

7920 FROST ST STE 200

SAN DIEGO, CA 92123-4289

Phone: (858) 966-7484

Fax: (858) 966-6791

After Hours Phone: (858)

966-7484

Provider Gender: Male

License number: A68277

NPI: 1467518209

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,
Childrens Hosp And Resrch Ctr
At Oakland

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, R, T

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

SHEETS, ROBERT M

Provider ID: 255900

Board Certified Specialty: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123-4232
Phone: (858) 966-8082
Fax: (858) 966-6791
After Hours Phone: (858) 966-8082
Provider Gender: Male
License number: G31567
NPI: 1013088772
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/21
American Sign Language (ASL): No
Ⓜ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PEDIATRICS

AJAYI, TOLUWALASE A
Provider ID: 205719
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5841
Fax: (858) 966-6728
After Hours Phone: (858) 966-5841
Provider Gender: Female
License number: A121454
NPI: 1316175912

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital, Rady Childrens Hospital San Diego, Scripps Mercy Hospital Chula Vista, Scripps Green Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Ⓜ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

ALAGIRI, MADHU
Provider ID: 206387
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
7920 FROST ST STE 200
SAN DIEGO, CA 92123-4289
Phone: (858) 966-7484
Fax: (858) 966-4064
After Hours Phone: (858) 966-7484
Provider Gender: Male
License number: G83089
NPI: 1619083961
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No

Ⓜ Accessibility: P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

AMATYA, SUDHA
Provider ID: 122458
Board Certified Specialty: No
CITY HEIGHTS FAMILY HEALTH CENTERS INC
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619) 515-2400
Provider Gender: Female
License number: A51563
NPI: 1790830511

Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Ⓜ Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): City Heights Family Health Centers Inc
IPA:

AYSON, NICOLE M
Provider ID: 110023
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

3665 KEARNY VILLA RD # 501
SAN DIEGO, CA 92123-1953
Phone: (858) 966-5803

Fax:
After Hours Phone: (858)
966-5803

Provider Gender: Female
License number: A128091
NPI: 1013278704

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady

Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

AYSON, NICOLE M

Provider ID: 110025
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5841

Fax:
After Hours Phone: (858)
966-5841

Provider Gender: Female
License number: A128091
NPI: 1013278704

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

AYSON, NICOLE M

Provider ID: 110512
Board Certified Specialty: No
FAMILY HLTH CTR SAN
DIEGO- CITY COLLEGE
1550 BROADWAY # 2
SAN DIEGO, CA 92101-5713

Phone: (619) 515-2525
Fax:
After Hours Phone: (619)
515-2525

Provider Gender: Female
License number: A128091
NPI: 1013278704

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady

Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

Website: www.fhcsd.org
Email:
Medical Group(s): Family Hlth Ctr

San Diego- City College
IPA: Rady Childrens Health
Network

AYSON, NICOLE M

Provider ID: 205685
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3665 KEARNY VILLA RD # 501
SAN DIEGO, CA 92123-1953
Phone: (858) 966-5803

Fax: (858) 966-5992
After Hours Phone: (858)
966-5803

Provider Gender: Female
License number: A128091
NPI: 1013278704

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady

Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

AYSON, NICOLE M

Provider ID: 205686
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5841

Fax: (858) 966-6728
After Hours Phone: (858)
966-5841

Provider Gender: Female
License number: A128091

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1013278704
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

BAI-TONG, SHIYU S

Provider ID: 283285
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5818
Fax:
After Hours Phone: (858)
966-5818
Provider Gender: Female
License number: A155419
NPI: 1528454188
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Rady Childrens Health
Network

BEAUCHAMP WALTERS, JULIA

Provider ID: 270063
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5841
Fax: (858) 966-6728
After Hours Phone: (858)
966-5841
Provider Gender: Female
License number: A60054
NPI: 1457420713
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/25
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

BEAUCHAMP WALTERS, JULIA

Provider ID: 52775
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FN D T N
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 966-5841
Fax: (858) 966-6728
After Hours Phone: (858)
966-5841
Provider Gender: Female
License number: A60054
NPI: 1457420713
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

BROWN, MACKENZIE E

Provider ID: 272818
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123-4232
Phone: (858) 966-8974
Fax: (858) 966-6721
After Hours Phone: (858)
966-8974
Provider Gender: Female
License number: 20A14180
NPI: 1275812323
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

American Sign Language (ASL): No
Accessibility: ☯
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CAMERON, MELISSA A

Provider ID: 205965
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5841
Fax: (858) 966-6728
After Hours Phone: (858) 966-5841
Provider Gender: Female
License number: A125249
NPI: 1902983752
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Palomar Health Downtown Campus, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18

American Sign Language (ASL): No
Accessibility: ☯
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CAMERON, MELISSA A

Provider ID: 79851
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 576-1700
Fax:
After Hours Phone: (858) 576-1700

Provider Gender: Female
License number: A125249
NPI: 1902983752
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Palomar Medical Center
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CANTU, ALICIA O

Provider ID: 205752
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858) 966-8800
Provider Gender: Female
License number: A72946

NPI: 1922179688
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility: ☯
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CANTU, ALICIA O

Provider ID: 205753
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY STE 300
SAN DIEGO, CA 92123-4228
Phone: (858) 966-8974
Fax: (858) 966-6721
After Hours Phone: (858) 966-8974
Provider Gender: Female
License number: A72946
NPI: 1922179688
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility: ☯
Hours: M-SA 9AM-5PM
Website:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CANTU, ALICIA O

Provider ID: 52787
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5841
Fax: (858) 966-6728
After Hours Phone: (858) 966-5841
Provider Gender: Female
License number: A72946
NPI: 1922179688

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CARROLL, JEANNE M

Provider ID: 108883
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 966-5818
Fax:
After Hours Phone: (858) 966-5818

Provider Gender: Female
License number: A118050
NPI: 1386928224
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CASTANO, DANIELA

Provider ID: 121183
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123-4232
Phone: (858) 966-4003

Fax:
After Hours Phone: (858) 966-4003

Provider Gender: Female
License number: A132006
NPI: 1851616478
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No

Min/Max Age: None
American Sign Language (ASL): No

♿ *Accessibility:* W
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CHEN, JENNIFER K

Provider ID: 205729
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5841
Fax: (858) 966-6728

After Hours Phone: (858) 966-5841

Provider Gender: Female
License number: A141057
NPI: 1255785150

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18

American Sign Language (ASL): No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CHIRASEVEENUPRAPUND, PETER

Provider ID: 86506

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D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 7920 FROST ST STE 200
 SAN DIEGO, CA 92123-4289
Phone: (858) 966-7484
Fax:
After Hours Phone: (858) 966-7484
Provider Gender: Male
License number: A68277
NPI: 1467518209
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* P, EB, IB, E, R, T, W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CHONG, AMY

Provider ID: 259993
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5803
Fax: (858) 966-5992
After Hours Phone: (858) 966-5803
Provider Gender: Female

License number: A133965
NPI: 1720423288
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

COHENMEYER, CASEY L

Provider ID: 52560
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5841
Fax: (858) 966-7433
After Hours Phone: (858) 966-5841
Provider Gender: Female
License number: A80114
NPI: 1033286430
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Scripps Memorial Hospital, Ucsd Medical Ctr, Southwest Healthcare System Wildomar, Scripps Memorial Hospital Encinitas, Southwest Healthcare System Murrieta, Sharp

Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CORDES, WILLIAM D

Provider ID: 122494
Board Certified Specialty: No
LOGAN HEIGHTS FAMILY HEALTH CENTER
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Provider Gender: Male
License number: 20A15743
NPI: 1174942544
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Logan Heights Family Health Center
IPA:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

DE LA ROSA, IVONNE E

Provider ID: 206027
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5841
Fax: (858) 966-6728
After Hours Phone: (858) 966-5841
Provider Gender: Female
License number: A49734
NPI: 1174695795
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Sharp Memorial Hospital, Rady Childrens Hospital San Diego, El Centro Regional Medical Center, Valley Childrens Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

DEL RE, ANGELO

Provider ID: 82886
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223

Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858) 966-8800
Provider Gender: Male
License number: A129572
NPI: 1275761371
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

DOSHI, AMI P

Provider ID: 205329
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5841
Fax: (858) 966-6728
After Hours Phone: (858) 966-5841
Provider Gender: Female
License number: A95217
NPI: 1801099676
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Gujarati, Spanish

Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Palomar Health Downtown Campus, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

DOSHI, AMI P

Provider ID: 205330
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY STE 300
 SAN DIEGO, CA 92123-4228
Phone: (858) 966-8974
Fax: (858) 966-6721
After Hours Phone: (858) 966-8974
Provider Gender: Female
License number: A95217
NPI: 1801099676
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Gujarati, Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Palomar Health Downtown Campus, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

<p>No ☯ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network</p>	<p><i>Provider ID:</i> 103011 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 4305 UNIVERSITY AVE STE 150 SAN DIEGO, CA 92105-1690 <i>Phone:</i> (619) 280-2905 <i>Fax:</i> <i>After Hours Phone:</i> (619) 280-2905 <i>Provider Gender:</i> Female <i>License number:</i> A127187 <i>NPI:</i> 1326309881 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> P, EB, IB, E, W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network</p>	<p><i>NPI:</i> 1427443803 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network</p>
<p>DO, THOMAS B <i>Provider ID:</i> 101284 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 576-1700 <i>Fax:</i> <i>After Hours Phone:</i> (858) 576-1700 <i>Provider Gender:</i> Male <i>License number:</i> A107618 <i>NPI:</i> 1053545376 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Childrens Hospital At Mission, Childrens Hospital Of Orange County <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network</p>	<p>EDMUNDS, MICHELLE A <i>Provider ID:</i> 102047 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 576-1700 <i>Fax:</i> (858) 966-6728 <i>After Hours Phone:</i> (858) 576-1700 <i>Provider Gender:</i> Female <i>License number:</i> A129816 <i>NPI:</i> 1881958064 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i></p>	<p>DWORSKY, ZEPHYR D <i>Provider ID:</i> 272293 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-5841 <i>Fax:</i> (858) 966-6728 <i>After Hours Phone:</i> (858) 966-5841 <i>Provider Gender:</i> Female <i>License number:</i> A144121</p>
<p>DUONG, THU A</p>		

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D. Directorio de proveedores de atención especializada

Email:
Medical Group(s):
IPA: Rady Childrens Health Network

EDMUNDS, MICHELLE A
Provider ID: 205864
Board Certified Specialty: Yes
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5841
Fax: (858) 966-6728
After Hours Phone: (858) 966-5841
Provider Gender: Female
License number: A129816
NPI: 1881958064
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

EKPENYONG, ATIM O
Provider ID: 97424
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 966-8800
Fax:
After Hours Phone: (858) 966-8800
Provider Gender: Female
License number: A134969
NPI: 1932318565
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

ELSTER, JENNIFER D
Provider ID: 109562
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
3010 CHILDRENS WAY # 2W
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5811
Fax:
After Hours Phone: (858) 966-5811
Provider Gender: Female
License number: A144876
NPI: 1588866115
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

ETKIN, MARC L
Provider ID: 51983
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858) 966-8800
Provider Gender: Male
License number: A75092
NPI: 1194896852
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

FEIGENBAUM, ANNETTE S

Provider ID: 205595
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY # 4
SAN DIEGO, CA 92123-4232
Phone: (858) 966-5840
Fax: (858) 966-7942
After Hours Phone: (858) 966-5840
Provider Gender: Female
License number: C54803
NPI: 1902187859
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

FISHER, ERIN R

Provider ID: 205906
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY STE
300
SAN DIEGO, CA 92123-4228
Phone: (858) 966-8974
Fax: (858) 966-6721
After Hours Phone: (858)
966-8974
Provider Gender: Female

License number: G66360
NPI: 1841361508
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

FISHER, ERIN R

Provider ID: 205907
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY
SAN DIEGO, CA 92123-4232
Phone: (858) 966-5841
Fax:
After Hours Phone: (858)
966-5841
Provider Gender: Female
License number: G66360
NPI: 1841361508
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

FISHER, ERIN R

Provider ID: 260913
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5841
Fax: (858) 966-6728
After Hours Phone: (858)
966-5841
Provider Gender: Female
License number: G66360
NPI: 1841361508
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

FLEMING, SARAH E

Provider ID: 104812
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED
FNDRN

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

4077 5TH AVE
SAN DIEGO, CA 92103-2105
Phone: (619) 260-7046
Fax: (619) 686-3843
After Hours Phone: (619)
260-7046
Provider Gender: Female
License number: A89838
NPI: 1679809826
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

FORTUNE, ERIN L
Provider ID: 38555
Board Certified Specialty: No
LOGAN HEIGHTS FAMILY
HEALTH CENTER
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Provider Gender: Male
License number: A95577
NPI: 1801088422
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No

Hospital Affiliation: Grossmont
Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Logan Heights
Family Health Center
IPA:

GAHAGAN, SHEILA
Provider ID: 214387
Board Certified Specialty: No
UCSD MEDICAL GROUP
7910 FROST ST STE 230
SAN DIEGO, CA 92123-2776
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: C53666
NPI: 1053327221
Provider English Spoken: Yes
Provider Language(s) Spoken:
French
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

GANESAN, ANUSHA P
Provider ID: 114913
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN
3010 CHILDRENS WAY # 2W
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5811
Fax:
After Hours Phone: (858)
966-5811
Provider Gender: Female
License number: A147249
NPI: 1982091740
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

GHAFOURI, NAZLI
Provider ID: 257249
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax:
After Hours Phone: (858)
966-8800
Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: A94326
NPI: 1942325113
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: California Pacific Med Ctr Pacific Campus, California Pacific Medical Center - Mission Bernal Campus, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

GIST, LAUREN

Provider ID: 214433
Board Certified Specialty: No
UCSD MEDICAL GROUP
7910 FROST ST STE 230
SAN DIEGO, CA 92123-2776
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A81381
NPI: 1023105335
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18

American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network, Ucsd Medical Group

GLENN, TARA J

Provider ID: 283159
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5818
Fax: (858) 966-7483
After Hours Phone: (858) 966-5818
Provider Gender: Female
License number: A170207
NPI: 1992060974
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

GOLEMBESKI, DAVID J

Provider ID: 83625
Board Certified Specialty: No
RADY CHILDRENS

SPECIALISTS SAN DIEGO MED FNDTN
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-3759
Fax:
After Hours Phone: (619) 543-3759
Provider Gender: Male
License number: G63111
NPI: 1376614131
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Scripps Memorial Hospital Encinitas, Pomerado Hospital, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Palomar Medical Center, Scripps Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

GOTTSCHALK, MICHAEL E

Provider ID: 52040
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123-4232

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 966-4003

Fax:

After Hours Phone: (858)
966-4003

Provider Gender: Male

License number: G55424

NPI: 1033280888

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

GREENBERG, MARK

Provider ID: 63927

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222

Fax:

After Hours Phone: (619)
543-6222

Provider Gender: Male

License number: G63733

NPI: 1710906375

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla
John Sally Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

GUNTA, SUJANA S

Provider ID: 80521

Board Certified Specialty: No
RADY CHILDRENS

SPECIALISTS SAN DIEGO MED
FNDDTN

3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123-4232

Phone: (858) 966-4003

Fax:

After Hours Phone: (858)

966-4003

Provider Gender: Female

License number: A109056

NPI: 1932304342

Provider English Spoken: Yes

Provider Language(s) Spoken:

Hindi, Marathi, Spanish, Telugu

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego, Tri

City Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

HEGDE, SANJEET R

Provider ID: 74643

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED
FNDDTN

3020 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123-4223

Phone: (858) 966-5855

Fax: (858) 966-7903

After Hours Phone: (858)

966-5855

Provider Gender: Male

License number: A112326

NPI: 1306036884

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

HERSHEY, DANIEL W

Provider ID: 205990

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 966-8800

Fax: (858) 966-7433

After Hours Phone: (858)

966-8800

Provider Gender: Male

License number: A82477

NPI: 1063435055

Provider English Spoken: Yes

Provider Language(s) Spoken:

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D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

HERSHEY, DANIEL W
Provider ID: 205994
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY STE 300
SAN DIEGO, CA 92123-4228
Phone: (858) 966-8974
Fax: (858) 966-6721
After Hours Phone: (858) 966-8974
Provider Gender: Male
License number: A82477
NPI: 1063435055
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Rady Childrens Health Network
HONOLD, JOSE A
Provider ID: 52532
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5841
Fax: (858) 966-7483
After Hours Phone: (858) 966-5841
Provider Gender: Male
License number: A51798
NPI: 1093886855
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Pioneers Memorial Hospital, El Centro Regional Medical Center, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network
HSIEH, LESLIE Q

Provider ID: 122435
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
7920 FROST ST STE 200
SAN DIEGO, CA 92123-4289
Phone: (858) 966-7484
Fax:
After Hours Phone: (858) 966-7484
Provider Gender: Female
License number: A120282
NPI: 1326207283
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T, W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network
HSIEH, LESLIE Q
Provider ID: 206031
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
7920 FROST ST STE 200
SAN DIEGO, CA 92123-4289
Phone: (858) 966-7484
Fax: (858) 966-4064
After Hours Phone: (858) 966-7484
Provider Gender: Female

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D. Directorio de proveedores de atención especializada

License number: A120282
NPI: 1326207283
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

HUANG, MARIA Z
Provider ID: 102388
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5841
Fax: (858) 966-6728
After Hours Phone: (858)
966-5841
Provider Gender: Female
License number: A137270
NPI: 1770841140
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

HUANG, MARIA Z
Provider ID: 205974
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5841
Fax: (858) 966-6728
After Hours Phone: (858)
966-5841
Provider Gender: Female
License number: A137270
NPI: 1770841140
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

HUNTER, WENDY L
Provider ID: 52857
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN
3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223
Phone: (858) 576-1700
Fax:
After Hours Phone: (858)
576-1700
Provider Gender: Female
License number: A94607
NPI: 1053515551
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Childrens
Hosp And Resrch Ctr At
Oakland, Rady Childrens
Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

JONES, KENNETH L
Provider ID: 52307
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN
7920 FROST ST STE 200
SAN DIEGO, CA 92123-4289
Phone: (858) 966-7484
Fax: (858) 966-4064
After Hours Phone: (858)
966-7484
Provider Gender: Male
License number: G29045
NPI: 1962550673
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

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D. Directorio de proveedores de atención especializada

Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T, W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network, Ucsd Medical Group

JONES, MARILYN C

Provider ID: 52308
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
7920 FROST ST STE 200
SAN DIEGO, CA 92123-4289
Phone: (858) 966-7484
Fax: (858) 966-4064
After Hours Phone: (858) 966-7484
Provider Gender: Female
License number: G30850
NPI: 1295806040
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T, W

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network, Ucsd Medical Group

KANTHARIA, TINA H

Provider ID: 109309
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 576-1700
Fax:

After Hours Phone: (858) 576-1700
Provider Gender: Female
License number: A126911
NPI: 1659632362
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

KAO, DANIEL J

Provider ID: 52887
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax:
After Hours Phone: (858) 966-8800
Provider Gender: Male
License number: A90174
NPI: 1982917894
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

KARMAKAR, KANKA

Provider ID: 116261
Board Certified Specialty: No
OPERATION SAMAHAN - MIRA MESA
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126-2375
Phone: (844) 200-2426
Fax:
After Hours Phone: (844) 200-2426
Provider Gender: Female
License number: C54941
NPI: 1972536654
Provider English Spoken: Yes
Provider Language(s) Spoken: Bengali, Hindi, Polish, Spanish, Tagalog
Cultural Competency: No

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D. Directorio de proveedores de atención especializada

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-F 8AM-4:30PM, SA 9AM-5PM

Website:

www.operationsamahan.org

Email:

Medical Group(s): Operation

Samahan - Mira Mesa

IPA: Community Care Ipa Llc

KARMAKAR, KANKA, MD

Provider ID: 213847

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

10737 CAMINO RUIZ STE 235

SAN DIEGO, CA 92126-2375

Phone: (844) 200-2426

Fax:

After Hours Phone: (844)

200-2426

Provider Gender: Female

License number: C54941

NPI: 1972536654

Provider English Spoken: Yes

Provider Language(s) Spoken:

Bengali, Hindi, Polish, Spanish,

Tagalog

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

KAUFHOLD, MARILYN J

Provider ID: 206213

Board Certified Specialty: Yes

RADY CHILDRENS HEALTH

NETWORK

3665 KEARNY VILLA RD # 501

SAN DIEGO, CA 92123-1953

Phone: (858) 966-5803

Fax: (858) 966-5992

After Hours Phone: (858)

966-5803

Provider Gender: Female

License number: C33767

NPI: 1295806057

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Childrens Hosp And Resrch

Ctr At Oakland, Rady Childrens

Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

KAUFHOLD, MARILYN J

Provider ID: 206214

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-5841

Fax: (858) 966-6728

After Hours Phone: (858)

966-5841

Provider Gender: Female

License number: C33767

NPI: 1295806057

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Childrens Hosp And Resrch

Ctr At Oakland, Rady Childrens

Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

KHARE, MANASWITHA

Provider ID: 109081

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED

FNDTN

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-5841

Fax: (858) 966-6728

After Hours Phone: (858)

966-5841

Provider Gender: Female

License number: A140062

NPI: 1912345307

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	FNDTN 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-5841 <i>Fax:</i> <i>After Hours Phone:</i> (858) 966-5841 <i>Provider Gender:</i> Female <i>License number:</i> A87696 <i>NPI:</i> 1932255668 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Scripps Memorial Hospital Encinitas, Ucsd Medical Ctr, Southwest Healthcare System Wildomar, Scripps Mercy Hospital Chula Vista, Southwest Healthcare System Murrieta, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	<i>Phone:</i> (858) 966-5811 <i>Fax:</i> (858) 966-8035 <i>After Hours Phone:</i> (858) 966-5811 <i>Provider Gender:</i> Female <i>License number:</i> A80257 <i>NPI:</i> 1255402012 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network
KHARE, MANASWITHA <i>Provider ID:</i> 206289 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-5841 <i>Fax:</i> (858) 966-6728 <i>After Hours Phone:</i> (858) 966-5841 <i>Provider Gender:</i> Female <i>License number:</i> A140062 <i>NPI:</i> 1912345307 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	KIM, JENNY M <i>Provider ID:</i> 52313 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3010 CHILDRENS WAY # 2W SAN DIEGO, CA 92123-4223	KLEIN, KAREN O <i>Provider ID:</i> 52052 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3030 CHILDRENS WAY FL 2 SAN DIEGO, CA 92123-4232 <i>Phone:</i> (858) 966-4003 <i>Fax:</i> <i>After Hours Phone:</i> (858) 966-4003 <i>Provider Gender:</i> Female <i>License number:</i> G76034 <i>NPI:</i> 1760553515 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Rady Childrens Hospital San Diego
KIMBALL, AMY L <i>Provider ID:</i> 52537 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

KUELBS, CYNTHIA L

Provider ID: 205341
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-1726
Fax: (858) 966-6271
After Hours Phone: (858) 966-1726
Provider Gender: Female
License number: G58415
NPI: 1932270691
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

KUO, DENNIS J

Provider ID: 91889

Board Certified Specialty: No
CHILDRENS HOSP SAN DIEGO
CHADWICK CTR
3010 CHILDRENS WAY # 2W
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5811
Fax:
After Hours Phone: (858) 966-5811
Provider Gender: Male
License number: A84128
NPI: 1750492146
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

LAMBERTI, JOHN J

Provider ID: 205612
Board Certified Specialty: Yes
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY STE 202
SAN DIEGO, CA 92123-4227
Phone: (858) 966-8030
Fax: (858) 966-8032
After Hours Phone: (858) 966-8030
Provider Gender: Male
License number: G19503
NPI: 1518038371
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Sharp Memorial Hospital, Childrens Hospital Of Orange County, Childrens Hosp And Resrch Ctr At Oakland, Lucile Salter Packard Childrens Hosp, Stanford Health Care
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

LANE, BRIAN P

Provider ID: 52539
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5841
Fax: (858) 966-7483
After Hours Phone: (858) 966-5841
Provider Gender: Male
License number: A73829
NPI: 1427129287
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Scripps Memorial Hospital Encinitas, Scripps Memorial

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital, Sharp Chula Vista Med Ctr, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Rady Childrens Health Network

LANGLEY, GREGORY H

Provider ID: 205698
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800

Fax: (858) 966-7433
After Hours Phone: (858) 966-8800

Provider Gender: Male
License number: G88047
NPI: 1427049675

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Rady Childrens Health Network

LANGLEY, GREGORY H

Provider ID: 52899
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 309-6290

Fax:
After Hours Phone: (858) 309-6290

Provider Gender: Male
License number: G88047
NPI: 1427049675

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None

American Sign Language (ASL): No

♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Rady Childrens Health Network

LARROW, ANNIE N

Provider ID: 276013
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 966-5841
Fax: (858) 966-6728
After Hours Phone: (858) 966-5841

Provider Gender: Female
License number: A147181
NPI: 1417344128
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18

American Sign Language (ASL): No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Rady Childrens Health Network

LAUB, NATALIE

Provider ID: 274665
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5841

Fax: (858) 966-6728
After Hours Phone: (858) 966-5841

Provider Gender: Female
License number: A168555
NPI: 1336448083

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

LAUB, NATALIE

Provider ID: 274666
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3665 KEARNY VILLA RD # 500
SAN DIEGO, CA 92123-1953
Phone: (858) 966-5980
Fax: (858) 966-8535
After Hours Phone: (858) 966-5980
Provider Gender: Female
License number: A168555
NPI: 1336448083
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

LEE, BEGEM

Provider ID: 205923

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5841
Fax: (858) 966-6728
After Hours Phone: (858) 966-5841
Provider Gender: Female
License number: A126770
NPI: 1053672444
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Childrens Hosp And Resrch Ctr At Oakland, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

LEIBEL, SANDRA L

Provider ID: 103580
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 576-1700
Fax:
After Hours Phone: (858) 576-1700
Provider Gender: Female
License number: A121976

NPI: 1407024995
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Polish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

LEIBEL, SYDNEY A

Provider ID: 106806
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
5776 RUFFIN RD
SAN DIEGO, CA 92123-1013
Phone: (858) 292-1144
Fax: (858) 268-5145
After Hours Phone: (858) 292-1144
Provider Gender: Male
License number: A116427
NPI: 1861666919
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	<i>Provider ID:</i> 205978 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-5841 <i>Fax:</i> <i>After Hours Phone:</i> (858) 966-5841 <i>Provider Gender:</i> Female <i>License number:</i> C143617 <i>NPI:</i> 1497982227 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> French, German <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, University Hsp Of San Diego Co <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	<i>NPI:</i> 1699937250 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Cedars Sinai Medical Center, Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network
LENZEN, CHRISTIANE <i>Provider ID:</i> 112872 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 576-1700 <i>Fax:</i> <i>After Hours Phone:</i> (858) 576-1700 <i>Provider Gender:</i> Female <i>License number:</i> C143617 <i>NPI:</i> 1497982227 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> French, German <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, University Hsp Of San Diego Co, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	LE, CRYSTAL N <i>Provider ID:</i> 52540 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-5818 <i>Fax:</i> <i>After Hours Phone:</i> (858) 966-5818 <i>Provider Gender:</i> Female <i>License number:</i> A97634 <i>NPI:</i> 1003028416 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas <i>Medi-Cal Open Panel:</i> No	LE, CRYSTAL N <i>Provider ID:</i> 52540 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-5818 <i>Fax:</i> <i>After Hours Phone:</i> (858) 966-5818 <i>Provider Gender:</i> Female <i>License number:</i> A97634 <i>NPI:</i> 1003028416 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, University Hsp Of San Diego Co, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network
LENZEN, CHRISTIANE	LEVY, MICHAEL <i>Provider ID:</i> 206053 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-5841 <i>Fax:</i> <i>After Hours Phone:</i> (858) 966-5841 <i>Provider Gender:</i> Male <i>License number:</i> A112901	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

LE, JOAN T

Provider ID: 206524
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3030 CHILDRENS WAY STE
 300
 SAN DIEGO, CA 92123-4228
 Phone: (858) 966-8974
 Fax: (858) 966-6721
 After Hours Phone: (858)
 966-8974
 Provider Gender: Female
 License number: A99391
 NPI: 1447460050
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Vietnamese
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Doctors Hospital Of Riverside
 Llc, Childrens Hosp And Resrch
 Ctr At Oakland
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health

Network, Ucsd Medical Group
LUJAN, ARLEEN G
 Provider ID: 25649
 Board Certified Specialty: No
 LOGAN HEIGHTS FAMILY
 HEALTH CENTER
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2300
 Fax:

After Hours Phone: (619)
 515-2300
 Provider Gender: Female
 License number: A61687
 NPI: 1760412431
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy
 Hospital, Scripps Mercy Hospital
 Chula Vista
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: ME
 Hours: M-SA 9AM-5PM
 Website: www.fhcsd.org
 Email:
 Medical Group(s): Logan Heights
 Family Health Center
 IPA:

MANNINO AVILA, ELIZABETH E

Provider ID: 262161
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223

Phone: (858) 966-5841
 Fax: (858) 966-6728
 After Hours Phone: (858)
 966-5841
 Provider Gender: Female
 License number: A117906
 NPI: 1164747127
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Childrens
 Hosp And Resrch Ctr At
 Oakland, Rady Childrens
 Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

MANNINO AVILA, ELIZABETH E

Provider ID: 74656
 Board Certified Specialty: No
 RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDTN
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-5841
 Fax: (858) 966-6728
 After Hours Phone: (858)
 966-5841
 Provider Gender: Female
 License number: A117906
 NPI: 1164747127
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Childrens Hosp And Resrch Ctr At Oakland, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

MARDOUM, RIAD

Provider ID: 103913

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED

FNDTN

4077 5TH AVE

SAN DIEGO, CA 92103-2105

Phone: (619) 260-7046

Fax:

After Hours Phone: (619)

260-7046

Provider Gender: Male

License number: A36720

NPI: 1417050584

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital, Rady Childrens

Hospital San Diego, Scripps

Mercy Hospital Chula Vista, Ucsd

Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

MARDOUM, RIAD

Provider ID: 103916

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED

FNDTN

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-5841

Fax:

After Hours Phone: (858)

966-5841

Provider Gender: Male

License number: A36720

NPI: 1417050584

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital, Rady Childrens

Hospital San Diego, Scripps

Mercy Hospital Chula Vista, Ucsd

Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

MARIETTI SHEPHERD, SARAH

R

Provider ID: 206244

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

7930 FROST ST STE 407

SAN DIEGO, CA 92123-4286

Phone: (858) 279-8527

Fax:

After Hours Phone: (858)

279-8527

Provider Gender: Female

License number: A106447

NPI: 1801094115

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Childrens Hosp And Resrch Ctr

At Oakland

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

METCALF, ASHLEY M

Provider ID: 101237

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED

FNDTN

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-8800

Fax:

After Hours Phone: (858)

966-8800

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: 20A14115
 NPI: 1073740205
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Southwest Healthcare System
 Wildomar, Southwest Healthcare
 System Murrieta
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

MISHRA-OCCHINO, SEEMA S
 Provider ID: 52907
 Board Certified Specialty: No
 RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNFTN
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-8800
 Fax:
 After Hours Phone: (858)
 966-8800
 Provider Gender: Female
 License number: A100307
 NPI: 1689612830
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):

No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

MOBLEY, WILLIAM C
 Provider ID: 128124
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4510 EXECUTIVE DR STE 325
 SAN DIEGO, CA 92121-3069
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 License number: G36551
 NPI: 1902941743
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

MOYER, LAUREL B
 Provider ID: 109470
 Board Certified Specialty: No
 RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNFTN
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223

Phone: (858) 966-5818
 Fax:
 After Hours Phone: (858)
 966-5818
 Provider Gender: Female
 License number: C144070
 NPI: 1598970378
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Scripps Mercy Hospital, Scripps
 Mercy Hospital Chula Vista
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

NELSON, THEODORA J
 Provider ID: 257259
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 7910 FROST ST STE 230
 SAN DIEGO, CA 92123-2776
 Phone: (858) 496-4800
 Fax:
 After Hours Phone: (858)
 496-4800
 Provider Gender: Female
 License number: G75021
 NPI: 1326130584
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

NEWFIELD, RON S

Provider ID: 52057

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED

FNDTN

3030 CHILDRENS WAY FL 2

SAN DIEGO, CA 92123-4232

Phone: (858) 966-4003

Fax:

After Hours Phone: (858)

966-4003

Provider Gender: Male

License number: A73875

NPI: 1679644421

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Sharp Memorial Hospital, Ucsd

Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

NGUYEN, MARGARET B

Provider ID: 83870

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED

FNDTN

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-8800

Fax:

After Hours Phone: (858)

966-8800

Provider Gender: Female

License number: A131847

NPI: 1942485248

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Childrens

Hosp And Resrch Ctr At

Oakland, Rady Childrens

Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

NIENOW, SHALON M

Provider ID: 127354

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED

FNDTN

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-5841

Fax:

After Hours Phone: (858)

966-5841

Provider Gender: Female

License number: A155289

NPI: 1255592465

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

University Of New Mexico

Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

NIENOW, SHALON M

Provider ID: 262189

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

3665 KEARNY VILLA RD # 501

SAN DIEGO, CA 92123-1953

Phone: (858) 966-5990

Fax: (858) 966-5992

After Hours Phone: (858)

966-5990

Provider Gender: Female

License number: A155289

NPI: 1255592465

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

<p>University Of New Mexico Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network</p> <p>NIENOW, SHALON M <i>Provider ID:</i> 262190 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 576-1700 <i>Fax:</i> (858) 966-6728 <i>After Hours Phone:</i> (858) 576-1700 <i>Provider Gender:</i> Female <i>License number:</i> A155289 <i>NPI:</i> 1255592465 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, University Of New Mexico Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health</p>	<p>Network</p> <p>ODONNELL, F JANE D <i>Provider ID:</i> 52506 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FN D TN 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-5841 <i>Fax:</i> (858) 966-7483 <i>After Hours Phone:</i> (858) 966-5841 <i>Provider Gender:</i> Female <i>License number:</i> G81056 <i>NPI:</i> 1477625325 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Southwest Healthcare System Wildomar, Childrens Hosp And Resrch Ctr At Oakland, Southwest Healthcare System Murrieta, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network</p> <p>PARDEE, PERRIE E <i>Provider ID:</i> 205767 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH</p>	<p>NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 576-1700 <i>Fax:</i> (858) 966-6782 <i>After Hours Phone:</i> (858) 576-1700 <i>Provider Gender:</i> Female <i>License number:</i> A123826 <i>NPI:</i> 1578850988 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network</p> <p>PARKER, PAUL C <i>Provider ID:</i> 205755 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-5841 <i>Fax:</i> (858) 966-6728 <i>After Hours Phone:</i> (858) 966-5841 <i>Provider Gender:</i> Male <i>License number:</i> A54747 <i>NPI:</i> 1841202710 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i></p>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Marian Regional Medical Center, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PATEL, AARTI R
Provider ID: 205865
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5841
Fax: (858) 966-6728
After Hours Phone: (858) 966-5841
Provider Gender: Female
License number: A142110
NPI: 1871813105
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

Network
PHILLIPS, SUSAN A
Provider ID: 52151
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123-4232
Phone: (858) 966-4003
Fax:
After Hours Phone: (858) 966-4003
Provider Gender: Female
License number: G85921
NPI: 1588735336
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PIERCE, HEATHER C
Provider ID: 205701
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5841
Fax: (858) 966-6728
After Hours Phone: (858) 966-5841

Provider Gender: Female
License number: A103389
NPI: 1699955542
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PIERCE, HEATHER C
Provider ID: 52797
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5841
Fax: (858) 966-6728
After Hours Phone: (858) 966-5841
Provider Gender: Female
License number: A103389
NPI: 1699955542
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

RAMOS, CARLOS G

Provider ID: 102158

Board Certified Specialty: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN

200 W ARBOR DR
SAN DIEGO, CA 92103-1911

Phone: (619) 543-3759

Fax:

After Hours Phone: (619) 543-3759

Provider Gender: Male

License number: A91944

NPI: 1205047545

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr, El Centro Regional Medical Center, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Rady Childrens Hospital San Diego, Ucsd La Jolla John Sally Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL): No

⌘ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

RHEE, KYUNG E

Provider ID: 206114

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 966-5841

Fax: (858) 966-6728

After Hours Phone: (858)

966-5841

Provider Gender: Female

License number: A112676

NPI: 1013996529

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Palomar Medical Center, Palomar Health Downtown Campus

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

⌘ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

RIES, DAVID C

Provider ID: 206082

Board Certified Specialty: Yes
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 966-5841

Fax:

After Hours Phone: (858) 966-5841

Provider Gender: Male

License number: A127233

NPI: 1376705483

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr, Rady Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

⌘ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

ROBERTS, WILLIAM D

Provider ID: 52318

Board Certified Specialty: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN

3010 CHILDRENS WAY # 2W
SAN DIEGO, CA 92123-4223

Phone: (858) 966-5811

Fax:

After Hours Phone: (858) 966-5811

Provider Gender: Male

License number: A46026

NPI: 1245302561

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Childrens Hosp And Resrch Ctr
At Oakland

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

RODRIGUEZ, JAVIER

Provider ID: 46966

Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC
INC

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

Phone: (619) 255-9155

Fax:

After Hours Phone: (619)
255-9155

Provider Gender: Male

License number: A82639

NPI: 1013059385

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: P, EB, IB, E, W

Hours: M-F 8AM-5PM, SA
9AM-5PM

Website: www.lamaestra.org

Email:

Medical Group(s): La Maestra
Family Clinic Inc

IPA:

RUNGVIVATJARUS, TIRANUN

Provider ID: 206319

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 966-5841

Fax: (858) 966-6728

After Hours Phone: (858)

966-5841

Provider Gender: Female

License number: A141353

NPI: 1407276363

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

SAJTI, ENIKO C

Provider ID: 117483

Board Certified Specialty: No

RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN

200 W ARBOR DR
SAN DIEGO, CA 92103-1911

Phone: (619) 543-3759

Fax: (619) 543-3812

After Hours Phone: (619)

543-3759

Provider Gender: Female

License number: A115973

NPI: 1649433103

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Childrens

Hosp And Resrch Ctr At
Oakland, Rady Childrens

Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

SAJTI, ENIKO C

Provider ID: 83875

Board Certified Specialty: No

RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-5818

Fax: (858) 966-7483

After Hours Phone: (858)

966-5818

Provider Gender: Female

License number: A115973

NPI: 1649433103

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Childrens

Hosp And Resrch Ctr At
Oakland, Rady Childrens

Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: None

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Rady Childrens Health Network

SANTIAGO-LASTRA, YAHIR A

Provider ID: 206413
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 7920 FROST ST STE 200
 SAN DIEGO, CA 92123-4289
Phone: (858) 966-7484
Fax: (858) 966-4064
After Hours Phone: (858) 966-7484
Provider Gender: Female
License number: A143504
NPI: 1699936609
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Rady Childrens Health Network

SANTIAGO-LASTRA, YAHIR A

Provider ID: 206414
Board Certified Specialty: No
 RADY CHILDRENS HEALTH

NETWORK
 3030 CHILDRENS WAY FL 3
 SAN DIEGO, CA 92123-4232
Phone: (858) 966-6789
Fax: (858) 966-6706
After Hours Phone: (858) 966-6789
Provider Gender: Female
License number: A143504
NPI: 1699936609
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Rady Childrens Health Network

SAWYER, CAROLYN M

Provider ID: 270318
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 7910 FROST ST STE 350
 SAN DIEGO, CA 92123-2753
Phone: (858) 496-4800
Fax: (858) 496-4850
After Hours Phone: (858) 496-4800
Provider Gender: Female
License number: A149116
NPI: 1043653249
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr

Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Ucsd Medical Group

SCHIFF, DEBORAH E

Provider ID: 52321
Board Certified Specialty: No
 RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 3010 CHILDRENS WAY # 2W
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858) 966-5811
Provider Gender: Female
License number: G68457
NPI: 1922179779
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Rady Childrens Hospital San Diego, Scripps Green Hospital, Childrens Hosp And Resrch Ctr At Oakland
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Rady Childrens Health

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Network

SCHNEIDER, SARAH M

Provider ID: 284224

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 966-5841

Fax: (858) 966-6728

After Hours Phone: (858)

966-5841

Provider Gender: Female

License number: A151631

NPI: 1508210311

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

SCHWARZ, KATHLEEN B

Provider ID: 125422

Board Certified Specialty: No
RADY CHILDRENS

SPECIALISTS SAN DIEGO MED
FNDTN

3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123-4232

Phone: (858) 966-4003

Fax:

After Hours Phone: (858)

966-4003

Provider Gender: Female

License number: G152263

NPI: 1265465918

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

SEBSO, JODI

Provider ID: 46712

Board Certified Specialty: No
LOGAN HEIGHTS FAMILY

HEALTH CENTER

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Provider Gender: Female

License number: A103099

NPI: 1538484316

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Logan Heights

Family Health Center

IPA:

SONG, RICHARD S

Provider ID: 70909

Board Certified Specialty: No

RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-5818

Fax: (858) 966-7483

After Hours Phone: (858)

966-5818

Provider Gender: Male

License number: A112147

NPI: 1881893477

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Pomerado Hospital, Southwest

Healthcare System Wildomar,

Southwest Healthcare System

Murrieta, Scripps Memorial

Hospital, Scripps Memorial

Hospital Encinitas, Palomar

Medical Center

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

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D. Directorio de proveedores de atención especializada

Network

SPECTOR, STEPHEN A

Provider ID: 52328

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED

FNDTN

3030 CHILDRENS WAY FL 2

SAN DIEGO, CA 92123-4232

Phone: (858) 966-4003

Fax:

After Hours Phone: (858)

966-4003

Provider Gender: Male

License number: G32467

NPI: 1790857316

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Ucsd Medical Ctr, Scripps Mercy

Hospital, Childrens Hosp And

Resrch Ctr At Oakland

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

SPECTOR, STEPHEN A

Provider ID: 52329

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED

FNDTN

330 LEWIS ST

SAN DIEGO, CA 92103-2108

Phone: (619) 543-8089

Fax: (619) 298-2698

After Hours Phone: (619)

543-8089

Provider Gender: Male

License number: G32467

NPI: 1790857316

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Ucsd Medical Ctr, Scripps Mercy

Hospital, Childrens Hosp And

Resrch Ctr At Oakland

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

SPEZIALE, MARK V

Provider ID: 52555

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED

FNDTN

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-5818

Fax: (858) 966-7483

After Hours Phone: (858)

966-5818

Provider Gender: Male

License number: G78658

NPI: 1801978143

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Scripps

Mercy Hospital Chula Vista,

Rady Childrens Hospital San

Diego, Southwest Healthcare

System Wildomar, Southwest

Healthcare System Murrieta,

Scripps Mercy Hospital, Ucsd

Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

SPITZER, MARSHA D

Provider ID: 25654

Board Certified Specialty: No

LOGAN HEIGHTS FAMILY

HEALTH CENTER

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Provider Gender: Female

License number: A76785

NPI: 1851323315

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital, Scripps Mercy Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

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D. Directorio de proveedores de atención especializada

♿ *Accessibility:* ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Logan Heights
 Family Health Center
IPA:

STOVER, LAURIE B

Provider ID: 206196
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5841
Fax:
After Hours Phone: (858) 966-5841
Provider Gender: Female
License number: A71978
NPI: 1659442317
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

STRAIT, MARIE I

Provider ID: 273471
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223
Phone: (858) 966-5818
Fax:
After Hours Phone: (858) 966-5818
Provider Gender: Female
License number: C167351
NPI: 1669633012
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

STRAIT, MARIE I

Provider ID: 273473
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-3759
Fax:
After Hours Phone: (619) 543-3759
Provider Gender: Female
License number: C167351
NPI: 1669633012
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):

No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

SURESH, PREMI T

Provider ID: 217863
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3685 KEARNY VILLA RD
 SAN DIEGO, CA 92123-1950
Phone: (858) 966-5990
Fax: (858) 966-6728
After Hours Phone: (858) 966-5990
Provider Gender: Female
License number: A89651
NPI: 1558408559
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Ucsd Medical Ctr, Childrens
 Hosp And Resrch Ctr At
 Oakland, Palomar Medical
 Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

SURESH, PREMI T

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D. Directorio de proveedores de atención especializada

Provider ID: 265149
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 576-1700
Fax: (858) 966-6728
After Hours Phone: (858) 576-1700
Provider Gender: Female
License number: A89651
NPI: 1558408559
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Ucsd Medical Ctr, Childrens
 Hosp And Resrch Ctr At
 Oakland, Palomar Medical
 Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

SURESH, PREMI T

Provider ID: 265150
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3665 KEARNY VILLA RD # 501
SAN DIEGO, CA 92123-1953
Phone: (858) 966-5990
Fax: (858) 966-7508
After Hours Phone: (858) 966-5990

Provider Gender: Female
License number: A89651
NPI: 1558408559
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Ucsd Medical Ctr, Childrens
 Hosp And Resrch Ctr At
 Oakland, Palomar Medical
 Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

SURESH, PREMI T

Provider ID: 283161
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3665 KEARNY VILLA RD # 500
SAN DIEGO, CA 92123-1953
Phone: (858) 966-5980
Fax: (858) 966-5992
After Hours Phone: (858) 966-5980
Provider Gender: Female
License number: A89651
NPI: 1558408559
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Ucsd Medical Ctr, Childrens
 Hosp And Resrch Ctr At

Oakland, Palomar Medical
 Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

SUTTNER, DENISE M

Provider ID: 52558
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5841
Fax:
After Hours Phone: (858) 966-5841
Provider Gender: Female
License number: A52313
NPI: 1457433799
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Ucsd Medical Ctr, Scripps Mercy
 Hospital Chula Vista, Scripps
 Memorial Hospital Encinitas,
 Southwest Healthcare System
 Wildomar, Southwest Healthcare
 System Murrieta, Scripps
 Memorial Hospital, Scripps
 Mercy Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):

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D. Directorio de proveedores de atención especializada

<p>No <i>♿ Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network</p>	<p><i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 576-1700 <i>Fax:</i> <i>After Hours Phone:</i> (858) 576-1700 <i>Provider Gender:</i> Female <i>License number:</i> A101991 <i>NPI:</i> 1326225368 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Southwest Healthcare System Wildomar, Childrens Hosp Of Los Angeles, Southwest Healthcare System Murrieta <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network</p>	<p><i>Provider Gender:</i> Female <i>License number:</i> C55985 <i>NPI:</i> 1538222310 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network</p>
<p>SWEENEY, NATHALY M <i>Provider ID:</i> 127345 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-5818 <i>Fax:</i> <i>After Hours Phone:</i> (858) 966-5818 <i>Provider Gender:</i> Female <i>License number:</i> A110761 <i>NPI:</i> 1164572632 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Palomar Medical Center, Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No</p>	<p>THORNBURG, COURTNEY D <i>Provider ID:</i> 70905 <i>Board Certified Specialty:</i> No CHILDRENS HOSP SAN DIEGO CHADWICK CTR 3010 CHILDRENS WAY # 2W SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-5811 <i>Fax:</i> <i>After Hours Phone:</i> (858) 966-5811</p>	<p>TOVAR PADUA, LEIDY J <i>Provider ID:</i> 128013 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-8800 <i>Fax:</i> <i>After Hours Phone:</i> (858) 966-8800 <i>Provider Gender:</i> Female <i>License number:</i> A130894 <i>NPI:</i> 1033491311 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Childrens Hosp Of Los Angeles, Long Beach Memorial Med Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i></p>
<p>TAMAS, VANESSA L <i>Provider ID:</i> 109195</p>	<p>THORNBURG, COURTNEY D <i>Provider ID:</i> 70905 <i>Board Certified Specialty:</i> No CHILDRENS HOSP SAN DIEGO CHADWICK CTR 3010 CHILDRENS WAY # 2W SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-5811 <i>Fax:</i> <i>After Hours Phone:</i> (858) 966-5811</p>	<p>TOVAR PADUA, LEIDY J <i>Provider ID:</i> 128013 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-8800 <i>Fax:</i> <i>After Hours Phone:</i> (858) 966-8800 <i>Provider Gender:</i> Female <i>License number:</i> A130894 <i>NPI:</i> 1033491311 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Childrens Hosp Of Los Angeles, Long Beach Memorial Med Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i></p>

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D. Directorio de proveedores de atención especializada

<p>No ☯ <i>Accessibility: W</i> <i>Hours: M-SA 9AM-5PM</i> <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA: Rady Childrens Health Network</i></p>	<p><i>IPA: Rady Childrens Health Network</i></p> <p>VAUCHER, YVONNE E <i>Provider ID: 107742</i> <i>Board Certified Specialty: No</i> RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN</p>	<p><i>Phone: (619) 260-7046</i> <i>Fax:</i> <i>After Hours Phone: (619) 260-7046</i> <i>Provider Gender: Female</i> <i>License number: G25444</i> <i>NPI: 1275615510</i> <i>Provider English Spoken: Yes</i> <i>Provider Language(s) Spoken:</i> <i>Cultural Competency: No</i> <i>Hospital Affiliation: Ucsd Medical Ctr</i> <i>Medi-Cal Open Panel: No</i> <i>Min/Max Age: None</i> <i>American Sign Language (ASL): No</i></p>
<p>TREMOULET, ADRIANA H <i>Provider ID: 121500</i> <i>Board Certified Specialty: No</i> RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3030 CHILDRENS WAY FL 2 SAN DIEGO, CA 92123-4232 <i>Phone: (858) 966-7785</i> <i>Fax:</i> <i>After Hours Phone: (858) 966-7785</i> <i>Provider Gender: Female</i> <i>License number: A76788</i> <i>NPI: 1013015445</i> <i>Provider English Spoken: Yes</i> <i>Provider Language(s) Spoken: Spanish</i> <i>Cultural Competency: No</i> <i>Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Scripps Mercy Hospital, Sharp Mary Birch Hosp For Women And Newborns, Scripps Memorial Hospital Encinitas, Childrens Hosp And Resrch Ctr At Oakland</i> <i>Medi-Cal Open Panel: No</i> <i>Min/Max Age: None</i> <i>American Sign Language (ASL): No</i> ☯ <i>Accessibility: W</i> <i>Hours: M-SA 9AM-5PM</i> <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i></p>	<p>4168 FRONT ST SAN DIEGO, CA 92103-2030 <i>Phone: (619) 543-3771</i> <i>Fax: (619) 543-7543</i> <i>After Hours Phone: (619) 543-3771</i> <i>Provider Gender: Female</i> <i>License number: G25444</i> <i>NPI: 1275615510</i> <i>Provider English Spoken: Yes</i> <i>Provider Language(s) Spoken:</i> <i>Cultural Competency: No</i> <i>Hospital Affiliation: Ucsd Medical Ctr</i> <i>Medi-Cal Open Panel: No</i> <i>Min/Max Age: None</i> <i>American Sign Language (ASL): No</i> ☯ <i>Accessibility: W</i> <i>Hours: M-SA 9AM-5PM</i> <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA: Rady Childrens Health Network</i></p> <p>VAUCHER, YVONNE E <i>Provider ID: 52559</i> <i>Board Certified Specialty: No</i> RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 4077 5TH AVE SAN DIEGO, CA 92103-2105</p>	<p><i>Phone: (619) 543-3771</i> <i>Fax: (619) 543-7543</i> <i>After Hours Phone: (619) 543-3771</i> <i>Provider Gender: Female</i> <i>License number: G25444</i> <i>NPI: 1275615510</i> <i>Provider English Spoken: Yes</i> <i>Provider Language(s) Spoken:</i> <i>Cultural Competency: No</i> <i>Hospital Affiliation: Ucsd Medical Ctr</i> <i>Medi-Cal Open Panel: No</i> <i>Min/Max Age: None</i> <i>American Sign Language (ASL): No</i> ☯ <i>Accessibility: W</i> <i>Hours: M-SA 9AM-5PM</i> <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA: Rady Childrens Health Network</i></p> <p>VILLARROEL, SARAH A <i>Provider ID: 205861</i> <i>Board Certified Specialty: No</i> RADY CHILDRENS HEALTH NETWORK 3665 KEARNY VILLA RD # 501 SAN DIEGO, CA 92123-1953 <i>Phone: (858) 966-5980</i> <i>Fax: (858) 966-5992</i> <i>After Hours Phone: (858) 966-5980</i> <i>Provider Gender: Female</i> <i>License number: 20A9338</i> <i>NPI: 1336205558</i> <i>Provider English Spoken: Yes</i> <i>Provider Language(s) Spoken:</i> <i>Cultural Competency: No</i> <i>Hospital Affiliation: Childrens Hosp And Resrch Ctr At Oakland, Rady Childrens Hospital San Diego, Ucsd</i></p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network</p>	<p>Network WAI, SHANNON S <i>Provider ID:</i> 70903 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-8800 <i>Fax:</i> (858) 966-7433 <i>After Hours Phone:</i> (858) 966-8800 <i>Provider Gender:</i> Female <i>License number:</i> A122459 <i>NPI:</i> 1528395282 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network</p>	<p><i>Phone:</i> (858) 966-8800 <i>Fax:</i> <i>After Hours Phone:</i> (858) 966-8800 <i>Provider Gender:</i> Female <i>License number:</i> A89393 <i>NPI:</i> 1427142363 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Memorial Hospital, Scripps Memorial Hospital Encinitas, Rady Childrens Hospital San Diego, Scripps Memorial Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network</p>
<p>VILLARROEL, SARAH A <i>Provider ID:</i> 205862 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-5841 <i>Fax:</i> (858) 966-6728 <i>After Hours Phone:</i> (858) 966-5841 <i>Provider Gender:</i> Female <i>License number:</i> 20A9338 <i>NPI:</i> 1336205558 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Childrens Hosp And Resrch Ctr At Oakland, Rady Childrens Hospital San Diego, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health</p>	<p>WANG, EMILY J <i>Provider ID:</i> 126801 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223</p>	<p>WANG, EMILY J <i>Provider ID:</i> 126804 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 4305 UNIVERSITY AVE STE 150 SAN DIEGO, CA 92105-1690 <i>Phone:</i> (619) 280-2905 <i>Fax:</i> <i>After Hours Phone:</i> (619) 280-2905 <i>Provider Gender:</i> Female <i>License number:</i> A89393 <i>NPI:</i> 1427142363 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i></p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Scripps Memorial Hospital Encinitas, Rady Childrens Hospital San Diego, Scripps Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♻️ *Accessibility:* P, EB, IB, E, W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

WELCH, MICHAEL J

Provider ID: 51907
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
5776 RUFFIN RD
SAN DIEGO, CA 92123-1013
Phone: (858) 292-1144
Fax:
After Hours Phone: (858) 292-1144
Provider Gender: Male
License number: G34844
NPI: 1699794222
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♻️ *Accessibility:* W
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network
YAPHOCKUN, KAREN K
Provider ID: 113245
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 576-1700
Fax:
After Hours Phone: (858) 576-1700

Provider Gender: Female
License number: 20A13298
NPI: 1861880817
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♻️ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

YORGIN, PETER D

Provider ID: 52573
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
8001 FROST ST

SAN DIEGO, CA 92123-2746
Phone: (858) 966-5855
Fax:
After Hours Phone: (858) 966-5855
Provider Gender: Male
License number: G64029
NPI: 1023039831
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Scripps Memorial Hospital, Sharp Memorial Hospital, Childrens Hosp And Resrch Ctr At Oakland
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♻️ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

YU, ELIZABETH L

Provider ID: 80373
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123-4232
Phone: (858) 966-4003
Fax:
After Hours Phone: (858) 966-4003
Provider Gender: Female
License number: A102372
NPI: 1538485586
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Childrens Hosp And Resrch Ctr
 At Oakland

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
 No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
 Network

ZAGULI, MARVIN J

Provider ID: 98958

Board Certified Specialty: No

RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDTN

12036 SCRIPPS HIGHLANDS
 DR # 102

SAN DIEGO, CA 92131-5155

Phone: (858) 566-4444

Fax:

After Hours Phone: (858)
 566-4444

Provider Gender: Male

License number: G38188

NPI: 1508837501

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,
 Sharp Memorial Hospital, Sharp
 Mary Birch Hosp For Women
 And Newborns

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

ZANDKARIMI, FARIBA

Provider ID: 25659

Board Certified Specialty: No

LOGAN HEIGHTS FAMILY
 HEALTH CENTER

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)
 515-2300

Provider Gender: Female

License number: A46161

NPI: 1356373674

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi, Persian, Spanish

Cultural Competency: No

Hospital Affiliation: Mercy

General Hospital, Rady Childrens
 Hospital San Diego, Scripps
 Mercy Hospital, Scripps Mercy
 Hospital Chula Vista, Ucsd
 Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Logan Heights
 Family Health Center

IPA:

PHYSICAL MEDICINE / REHABILITATION

ALGRA, JEFFREY

Provider ID: 205730

Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK

3030 CHILDRENS WAY STE
 300

SAN DIEGO, CA 92123-4228

Phone: (858) 966-8974

Fax: (858) 966-6721

After Hours Phone: (858)

966-8974

Provider Gender: Male

License number: A121138

NPI: 1457664518

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
 No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
 Network

BIFFL, SUSAN E

Provider ID: 205958

Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK

3030 CHILDRENS WAY STE
 300

SAN DIEGO, CA 92123-4228

Phone: (858) 966-8974

Fax: (858) 966-6721

After Hours Phone: (858)

966-8974

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: C151768
NPI: 1366589640
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

BULLOCK, ANDREW C

Provider ID: 257588
Board Certified Specialty: No
BLUE SHIELD PROMISE
HEALTH PLAN DIRECT
1855 1ST AVE STE 200
SAN DIEGO, CA 92101-2650
Phone: (619) 379-6579
Fax: (619) 501-3846
After Hours Phone: (619)
379-6579
Provider Gender: Male
License number: 20A6842
NPI: 1295743045
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Fataleka, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health
Plan Direct, Community Care Ipa
Llc

CHEN, JEFFREY L

Provider ID: 63845
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Male
License number: A102762
NPI: 1811183700
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Pomerado
Hospital, Ucsd Medical Ctr, Ucsd
La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CLARKE, DARIUS N

Provider ID: 282138
Board Certified Specialty: No
HEALTH EXCEL IPA INC
10251 VISTA SORRENTO
PKWY STE 280
SAN DIEGO, CA 92121-3776

Phone: (818) 575-6351
Fax: (289) 236-3022
After Hours Phone: (818)
575-6351
Provider Gender: Male
License number: A113912
NPI: 1073574497
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 50/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

DALAL, PRITHA B

Provider ID: 206033
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY STE
300
SAN DIEGO, CA 92123-4228
Phone: (858) 966-8974
Fax: (858) 966-6721
After Hours Phone: (858)
966-8974
Provider Gender: Female
License number: A132097
NPI: 1609017532
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Childrens Hosp And Resrch Ctr
At Oakland

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>Medi-Cal Open Panel: Yes Min/Max Age: 0/18 American Sign Language (ASL): No ☯ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network</p>	<p>6699 ALVARADO RD STE 2302 SAN DIEGO, CA 92120-5241 Phone: (619) 578-2518 Fax: After Hours Phone: (619) 578-2518 Provider Gender: Male License number: A74418 NPI: 1952496291 Provider English Spoken: Yes Provider Language(s) Spoken: Russian, Spanish Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ☯ Accessibility: W Hours: M-F 8:30AM-5PM, SA 9AM-5PM Website: Email: Medical Group(s): IPA:</p>	<p>American Sign Language (ASL): No ☯ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Health Excel Ipa Inc</p>
<p>GAVRILYUK, OLEG M Provider ID: 270574 Board Certified Specialty: No HEALTH EXCEL IPA INC 6699 ALVARADO RD STE 2302 SAN DIEGO, CA 92120-5241 Phone: (619) 578-2518 Fax: (619) 501-6498 After Hours Phone: (619) 578-2518 Provider Gender: Male License number: A74418 NPI: 1952496291 Provider English Spoken: Yes Provider Language(s) Spoken: Russian, Spanish Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: No Min/Max Age: 0/999 American Sign Language (ASL): No ☯ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:</p>	<p>HURSCHMAN, ALAN B Provider ID: 259518 Board Certified Specialty: No HEALTH EXCEL IPA INC 5395 RUFFIN RD STE 204 SAN DIEGO, CA 92123-1338 Phone: (858) 571-3630 Fax: (858) 430-3146 After Hours Phone: (858) 571-3630 Provider Gender: Male License number: C155336 NPI: 1326031980 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: Yes Min/Max Age: 0/999</p>	<p>KELLEHER, NICOLE C Provider ID: 277089 Board Certified Specialty: No HEALTH EXCEL IPA INC 10251 VISTA SORRENTO PKWY STE 280 SAN DIEGO, CA 92121-3776 Phone: (818) 575-6351 Fax: (289) 236-3022 After Hours Phone: (818) 575-6351 Provider Gender: Female License number: A165046 NPI: 1972946747 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: Yes Min/Max Age: 50/999 American Sign Language (ASL): No ☯ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Health Excel Ipa Inc</p>
<p>GAVRILYUK, OLEG M Provider ID: 34930 Board Certified Specialty: No OLEG M GAVRILYUK MD PC</p>	<p>LEE, HAEWON Provider ID: 256226 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911</p>	

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D. Directorio de proveedores de atención especializada

Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A161567
NPI: 1447661657
Provider English Spoken: Yes
Provider Language(s) Spoken: Korean
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LE, JOAN T

Provider ID: 243378
Board Certified Specialty: No
UCSD MEDICAL GROUP
4510 EXECUTIVE DR STE 325
SAN DIEGO, CA 92121-3069
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A99391
NPI: 1447460050
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Parkview Community Hospital

Medical Center, Childrens Hosp And Resrch Ctr At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network, Ucsd Medical Group

LUTFY, PATRICIA M

Provider ID: 265506
Board Certified Specialty: No
HEALTH EXCEL IPA INC
7525 METROPOLITAN DR STE 302
SAN DIEGO, CA 92108-4404
Phone: (619) 325-1161
Fax: (619) 325-1717
After Hours Phone: (619) 325-1161
Provider Gender: Female
License number: A133725
NPI: 1497024061
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

Provider ID: 120585
Board Certified Specialty: No
UCSD MEDICAL GROUP
9333 GENESEE AVE STE 200
SAN DIEGO, CA 92121-2113
Phone: (858) 657-8600
Fax:
After Hours Phone: (858) 657-8600
Provider Gender: Male
License number: 20A12464
NPI: 1255627691
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MIGNOSA, ROGER J

Provider ID: 203477
Board Certified Specialty: No
UCSD MEDICAL GROUP
9909 MIRA MESA BLVD STE 200
SAN DIEGO, CA 92131-1061
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: 20A12464
NPI: 1255627691
Provider English Spoken: Yes
Provider Language(s) Spoken:

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D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MIGNOSA, ROGER J
Provider ID: 203478
Board Certified Specialty: No
UCSD MEDICAL GROUP
9333 GENESEE AVE STE 200
SAN DIEGO, CA 92121-2113
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: 20A12464
NPI: 1255627691
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

RICHARDSON, HENRY A
Provider ID: 265359
Board Certified Specialty: No
HEALTH EXCEL IPA INC
7525 METROPOLITAN DR STE 302
SAN DIEGO, CA 92108-4404
Phone: (619) 325-1161
Fax: (619) 325-1717
After Hours Phone: (619) 325-1161
Provider Gender: Male
License number: A105294
NPI: 1407052459
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

ROUFF, MARK A
Provider ID: 279155
Board Certified Specialty: No
HEALTH EXCEL IPA INC
3703 CAMINO DEL RIO S STE 210
SAN DIEGO, CA 92108-4033
Phone: (619) 640-5555
Fax: (619) 640-5550
After Hours Phone: (619) 640-5555
Provider Gender: Male

License number: A169330
NPI: 1609255512
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

ROUFF, MARK A
Provider ID: 280211
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
3703 CAMINO DEL RIO S STE 210
SAN DIEGO, CA 92108-4033
Phone: (619) 640-5555
Fax: (619) 640-5550
After Hours Phone: (619) 640-5555
Provider Gender: Male
License number: A169330
NPI: 1609255512
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

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D. Directorio de proveedores de atención especializada

Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

RYAN, KYLE

Provider ID: 275659
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123-4232
Phone: (858) 966-8974
Fax: (858) 966-6721
After Hours Phone: (858)
966-8974
Provider Gender: Male
License number: A170177
NPI: 1447645742
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/25
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

SCOTT-WYARD, PHOEBE R

Provider ID: 205362
Board Certified Specialty: Yes
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY STE
300
SAN DIEGO, CA 92123-4228

Phone: (858) 966-8974
Fax: (858) 966-6721
After Hours Phone: (858)
966-8974
Provider Gender: Female
License number: 20A11699
NPI: 1336356203
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Childrens
Hosp Of Los Angeles, Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

SKALSKY, ANDREW J

Provider ID: 206273
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY STE
300
SAN DIEGO, CA 92123-4228
Phone: (858) 966-8974
Fax: (858) 966-6721
After Hours Phone: (858)
966-8974
Provider Gender: Male
License number: A90003
NPI: 1487635272
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego

Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

THOMPSON, SHARRON L

Provider ID: 278396
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
3703 CAMINO DEL RIO S STE
210
SAN DIEGO, CA 92108-4033
Phone: (619) 640-5555
Fax: (619) 640-5550
After Hours Phone: (619)
640-5555
Provider Gender: Female
License number: G55454
NPI: 1669462883
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

THOMPSON, SHARRON L

Provider ID: 279131

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D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
HEALTH EXCEL IPA INC
3703 CAMINO DEL RIO S STE
210
SAN DIEGO, CA 92108-4033
Phone: (619) 640-5555
Fax: (619) 640-5550
After Hours Phone: (619)
640-5555
Provider Gender: Female
License number: G55454
NPI: 1669462883
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 16/99
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

PHYSICIANS ASSISTANT

AINSWORTH, DELISSA M
Provider ID: 243367
Board Certified Specialty: No
UCSD MEDICAL GROUP
4510 EXECUTIVE DR
SAN DIEGO, CA 92121-3021
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: PA53570
NPI: 1750734893
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Southwest
Healthcare System Wildomar,
Southwest Healthcare System
Murrieta, Ucsd Medical Ctr, Ucsd
La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

ALBRIGHT, KELSEY A
Provider ID: 284763
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 923-8273
Fax: (888) 539-8781
After Hours Phone: (800)
923-8273
Provider Gender: Female
License number: PA57996
NPI: 1235653148
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Ucsd Medical Group
ALVARADO, EDMUND R
Provider ID: 115061
Board Certified Specialty: No
LOGAN HEIGHTS FAMILY
HEALTH CENTER
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Provider Gender: Male
License number: PA20888
NPI: 1720303340
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Logan Heights
Family Health Center
IPA:

ALYAS, ALISIA
Provider ID: 279973
Board Certified Specialty: No
HEALTH EXCEL IPA INC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608
Phone: (619) 255-9155
Fax: (619) 795-9849
After Hours Phone: (619)
255-9155
Provider Gender: Female
License number: PA58466

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D. Directorio de proveedores de atención especializada

NPI: 1437768017
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

ALYAS, ALISIA

Provider ID: 279974
Board Certified Specialty: No
HEALTH EXCEL IPA INC
4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1609
Phone: (619) 269-1269
Fax: (619) 269-1271
After Hours Phone: (619)
269-1269
Provider Gender: Female
License number: PA58466
NPI: 1437768017
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

ARMEEN, GARY P

Provider ID: 247035
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: PA21505
NPI: 1760774863
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

ARMENDARIZ DIAZ, ARTURO A

Provider ID: 208800
Board Certified Specialty: No
HEALTH EXCEL IPA INC
3802 NATIONAL AVE
SAN DIEGO, CA 92113-3223
Phone: (619) 264-2591
Fax: (619) 264-4116
After Hours Phone: (619)
264-2591
Provider Gender: Male
License number: PA55678
NPI: 1992286231
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

ARMENDARIZ, ARTURO A

Provider ID: 208798
Board Certified Specialty: No
HEALTH EXCEL IPA INC
3802 NATIONAL AVE
SAN DIEGO, CA 92113-3223
Phone: (619) 264-2591
Fax: (619) 264-4116
After Hours Phone: (619)
264-2591
Provider Gender: Male
License number: PA18311
NPI: 1568488195
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

ARMENTA, JORGE

Provider ID: 279156
Board Certified Specialty: No
HEALTH EXCEL IPA INC

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D. Directorio de proveedores de atención especializada

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608
Phone: (619) 255-9155
Fax: (619) 795-9852
After Hours Phone: (619)
255-9155
Provider Gender: Male
License number: PA13694
NPI: 1346382611
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

ASARO, AMANDA M

Provider ID: 260258
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY STE
410
SAN DIEGO, CA 92123-4228
Phone: (858) 966-6789
Fax:
After Hours Phone: (858)
966-6789
Provider Gender: Female
License number: PA18493
NPI: 1306961313
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes

Min/Max Age: 0/21
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

ASARO, AMANDA M

Provider ID: 260260
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5999
Fax: (858) 576-8412
After Hours Phone: (858)
966-5999
Provider Gender: Female
License number: PA18493
NPI: 1306961313
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

ASARO, AMANDA M

Provider ID: 280620
Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123-4232
Phone: (858) 966-6789
Fax: (858) 966-6706
After Hours Phone: (858)
966-6789
Provider Gender: Female
License number: PA18493
NPI: 1306961313
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

BABIS, CARLY R

Provider ID: 238478
Board Certified Specialty: No
HEALTH EXCEL IPA INC
3900 5TH AVE STE 110
SAN DIEGO, CA 92103-3122
Phone: (858) 554-1212
Fax: (858) 554-1222
After Hours Phone: (858)
554-1212
Provider Gender: Female
License number: PA54747
NPI: 1679090625
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:

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D. Directorio de proveedores de atención especializada

<p>Medi-Cal Open Panel: No Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Health Excel Ipa Inc</p>	<p>SAN DIEGO, CA 92123-4223 Phone: (858) 966-5846 Fax: (858) 569-9052 After Hours Phone: (858) 966-5846 Provider Gender: Female License number: PA58662 NPI: 1154846012 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: No Min/Max Age: 0/18 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network</p>	<p>No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network</p>
<p>BABIS, CARLY R Provider ID: 238479 Board Certified Specialty: No HEALTH EXCEL IPA INC 555 W C ST STE 102 SAN DIEGO, CA 92101-8470 Phone: (858) 554-1212 Fax: (858) 554-1222 After Hours Phone: (858) 554-1212 Provider Gender: Female License number: PA54747 NPI: 1679090625 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: No Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Health Excel Ipa Inc</p>	<p>BARKER, ALEXANDRA E Provider ID: 276600 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 3030 CHILDRENS WAY FL 2 SAN DIEGO, CA 92123-4232 Phone: (858) 966-5846 Fax: (858) 966-8457 After Hours Phone: (858) 966-5846 Provider Gender: Female License number: PA58662 NPI: 1154846012 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: No Min/Max Age: 0/18 American Sign Language (ASL):</p>	<p>BAUTISTA, MARIE ANGELA M Provider ID: 113403 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 Phone: (619) 543-6222 Fax: After Hours Phone: (619) 543-6222 Provider Gender: Female License number: PA18241 NPI: 1225258445 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:</p>
<p>BARKER, ALEXANDRA E Provider ID: 276599 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY</p>	<p>BARKER, ALEXANDRA E Provider ID: 276600 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 3030 CHILDRENS WAY FL 2 SAN DIEGO, CA 92123-4232 Phone: (858) 966-5846 Fax: (858) 966-8457 After Hours Phone: (858) 966-5846 Provider Gender: Female License number: PA58662 NPI: 1154846012 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: No Min/Max Age: 0/18 American Sign Language (ASL):</p>	<p>BAYER, STEVEN R Provider ID: 278755 Board Certified Specialty: No HEALTH EXCEL IPA INC 10251 VISTA SORRENTO PKWY STE 280 SAN DIEGO, CA 92121-3776</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (818) 575-6351
Fax: (289) 236-3022
After Hours Phone: (818)
575-6351

Provider Gender: Male
License number: PA55202
NPI: 1750896502

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 50/120
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

BEALE, EVAN J

Provider ID: 210205
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9339 GENESEE AVE STE 350
SAN DIEGO, CA 92121-2150
Phone: (858) 454-4300
Fax: (858) 454-5088
After Hours Phone: (858)
454-4300

Provider Gender: Male
License number: PA55344
NPI: 1689174146

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

BEALE, EVAN J

Provider ID: 216961
Board Certified Specialty: No
HEALTH EXCEL IPA INC
4060 4TH AVE STE 415
SAN DIEGO, CA 92103-2121
Phone: (619) 298-9809

Fax: (619) 298-9823
After Hours Phone: (619)
298-9809

Provider Gender: Male
License number: PA55344
NPI: 1689174146

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

BEALE, EVAN J , NPA

Provider ID: 271080
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9339 GENESEE AVE STE 350
SAN DIEGO, CA 92121-2150

Phone: (858) 454-4300

Fax: (858) 454-5088

After Hours Phone: (858)
454-4300

Provider Gender: Male
License number: PA55344
NPI: 1689174146

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

BEALE, EVAN J , NPA

Provider ID: 271081
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4060 4TH AVE STE 415
SAN DIEGO, CA 92103-2121
Phone: (619) 298-9809
Fax: (619) 298-9823

After Hours Phone: (619)
298-9809

Provider Gender: Male
License number: PA55344
NPI: 1689174146

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ Accessibility:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

BOYD, LISA N

Provider ID: 217649

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: PA20326

NPI: 1871859421

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

BRAND, KELLY R

Provider ID: 262160

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

3030 CHILDRENS WAY STE

202

SAN DIEGO, CA 92123-4227

Phone: (858) 966-8030

Fax: (858) 966-8032

After Hours Phone: (858)

966-8030

Provider Gender: Female

License number: PA19840

NPI: 1528215993

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: 0/99

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

BRANGOCCIO, KELSEY R

Provider ID: 238260

Board Certified Specialty: No

HEALTH EXCEL IPA INC

3737 MORAGA AVE STE B103

SAN DIEGO, CA 92117-5352

Phone: (858) 554-1212

Fax: (858) 554-1222

After Hours Phone: (858)

554-1212

Provider Gender: Female

License number: PA55679

NPI: 1396255477

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital

Medi-Cal Open Panel: No

Min/Max Age: 18/99

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

BRANGOCCIO, KELSEY R

Provider ID: 238261

Board Certified Specialty: No

HEALTH EXCEL IPA INC

555 W C ST STE 102

SAN DIEGO, CA 92101-8470

Phone: (858) 554-1212

Fax: (858) 554-1222

After Hours Phone: (858)

554-1212

Provider Gender: Female

License number: PA55679

NPI: 1396255477

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital

Medi-Cal Open Panel: No

Min/Max Age: 18/99

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

BRUECKNER, TAMMIE N

Provider ID: 255558

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: PA57558
NPI: 1407212376
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CASO, STEPHEN C

Provider ID: 213577
Board Certified Specialty: No
HEALTH EXCEL IPA INC
3737 MORAGA AVE STE B103
SAN DIEGO, CA 92117-5352
Phone: (858) 554-1212
Fax: (858) 554-1222
After Hours Phone: (858)
554-1212
Provider Gender: Male
License number: PA21365
NPI: 1083916985
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc
CASTILLO, PATRICIA
Provider ID: 115068
Board Certified Specialty: No
NORTH PARK FAMILY HEALTH
CENTERS
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619)
515-2424
Provider Gender: Female
License number: PA17220
NPI: 1376550657
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): North Park
Family Health Centers
IPA: Blue Shield Promise Health
Plan Direct

♿ Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): North Park
Family Health Centers
IPA: Blue Shield Promise Health
Plan Direct

CASTILLO, PATRICIA

Provider ID: 257530
Board Certified Specialty: No
BLUE SHIELD PROMISE
HEALTH PLAN DIRECT
3544 30TH ST
SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424
Fax:
After Hours Phone: (619)
515-2424
Provider Gender: Female
License number: PA17220
NPI: 1376550657
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health
Plan Direct

CERIALE, CHRISTOPHER H

Provider ID: 269867
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
7526 CLAIREMONT MESA
BLVD
SAN DIEGO, CA 92111-1504
Phone: (888) 743-7526
Fax:
After Hours Phone: (888)
743-7526
Provider Gender: Male
License number: PA54651
NPI: 1255858221
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

CHAVOYA, KRISTI ROSE J

Provider ID: 279602
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858) 966-8800
Provider Gender: Female
License number: PA57744
NPI: 1821630617
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Loma Linda University Med Ctr, Southwest Healthcare System Wildomar
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):

No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CLARK, YVONNE L

Provider ID: 260062
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 4

SAN DIEGO, CA 92123-4232
Phone: (888) 996-6795
Fax:
After Hours Phone: (888) 996-6795
Provider Gender: Female
License number: PA20447
NPI: 1629302476
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CORNEJO, DANIEL A

Provider ID: 265375
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858) 966-8800
Provider Gender: Male
License number: PA57695
NPI: 1508423492
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
American Sign Language (ASL): No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

DANESHVAR, ABRAHAM D , NPA

Provider ID: 271004
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9610 GRANITE RIDGE DR STE B
SAN DIEGO, CA 92123-2684
Phone: (858) 558-8150
Fax: (858) 346-1024
After Hours Phone: (858) 558-8150
Provider Gender: Male
License number: PA52905
NPI: 1245359140
Provider English Spoken: Yes
Provider Language(s) Spoken: Turkish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

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D. Directorio de proveedores de atención especializada

DAVID, MARVIC T

Provider ID: 115065
Board Certified Specialty: No
LOGAN HEIGHTS FAMILY HEALTH CENTER
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300

Fax:
After Hours Phone: (619) 515-2300

Provider Gender: Male
License number: PA53748
NPI: 1750832317

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:

Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No

♿ *Accessibility:* ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:

Medical Group(s): Logan Heights Family Health Center
IPA:

DEFRANCESCHI, ELINA R

Provider ID: 127899
Board Certified Specialty: No
UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222

Fax:
After Hours Phone: (619) 543-6222

Provider Gender: Female
License number: PA55320
NPI: 1750789798

Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Ucsd Medical Group

DEFRANCESCHI, ELINA R

Provider ID: 201997
Board Certified Specialty: No
UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273

Fax:
After Hours Phone: (800) 926-8273

Provider Gender: Female
License number: PA55320
NPI: 1750789798

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Ucsd Medical Group

DENEVAN, ANDREW J

Provider ID: 83352
Board Certified Specialty: No

UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222

Fax:
After Hours Phone: (619) 543-6222

Provider Gender: Male
License number: PA23100
NPI: 1811324726

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA:

DICKINSON, ALLISON J

Provider ID: 260622
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5999

Fax: (858) 576-8412
After Hours Phone: (858) 966-5999

Provider Gender: Female
License number: PA17163
NPI: 1972655389

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady

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D. Directorio de proveedores de atención especializada

Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

DICKINSON, ALLISON J

Provider ID: 260623
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
7910 FROST ST STE 190
SAN DIEGO, CA 92123-2731
Phone: (858) 966-9360
Fax: (858) 966-8519
After Hours Phone: (858)
966-9360
Provider Gender: Female
License number: PA17163
NPI: 1972655389
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

DICKINSON, ALLISON J

Provider ID: 260624
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY STE
410
SAN DIEGO, CA 92123-4228
Phone: (858) 966-6789
Fax: (858) 966-6706
After Hours Phone: (858)
966-6789
Provider Gender: Female
License number: PA17163
NPI: 1972655389
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

DODSON, EMILY E

Provider ID: 260705
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123-4232
Phone: (858) 966-7711
Fax: (858) 966-7712
After Hours Phone: (858)
966-7711
Provider Gender: Female
License number: PA57548
NPI: 1952708695

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

DODSON, EMILY E

Provider ID: 285750
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
7920 FROST ST STE 200
SAN DIEGO, CA 92123-4289
Phone: (858) 966-7484
Fax: (858) 966-4064
After Hours Phone: (858)
966-7484
Provider Gender: Female
License number: PA57548
NPI: 1952708695
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

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D. Directorio de proveedores de atención especializada

IPA: Rady Childrens Health Network

ENCE, EMILY C

Provider ID: 213608
Board Certified Specialty: No
HEALTH EXCEL IPA INC
3900 5TH AVE STE 110
SAN DIEGO, CA 92103-3122
Phone: (858) 554-1212
Fax: (858) 554-1222
After Hours Phone: (858) 554-1212
Provider Gender: Female
License number: PA52084
NPI: 1063784478
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

ESTES, SAMANTHA K

Provider ID: 214066
Board Certified Specialty: No
HEALTH EXCEL IPA INC
3969 4TH AVE STE 208
SAN DIEGO, CA 92103-3165
Phone: (619) 849-5777
Fax: (619) 849-5776
After Hours Phone: (619) 849-5777
Provider Gender: Male
License number: PA53086
NPI: 1528424330
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/120
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

FINK, ELLEN E

Provider ID: 124646
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: PA52655
NPI: 1689962946
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FINK, PATRICK M

Provider ID: 107145
Board Certified Specialty: No

FAMILY HLTH CTR SAN DIEGO-BEACH AREA
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2444
Fax:
After Hours Phone: (619) 515-2444
Provider Gender: Male
License number: PA52704
NPI: 1922380328
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-W,F 8:30AM-5:30PM, TH 9AM-6PM, SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Family Hlth Ctr San Diego-Beach Area
IPA:

FLOCO, VIRGINIA A

Provider ID: 272562
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123-4232
Phone: (858) 309-7701
Fax: (858) 966-8038
After Hours Phone: (858) 309-7701
Provider Gender: Female
License number: PA20788
NPI: 1982798112
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

GAIDADJIEV, TEODORA
Provider ID: 276737
Board Certified Specialty: No
UCSD MEDICAL GROUP
203 W F ST
SAN DIEGO, CA 92101-6016
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: PA53021
NPI: 1235502162
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

GUTH, CARA A
Provider ID: 282155
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9333 GENESEE AVE STE 350
SAN DIEGO, CA 92121-2103
Phone: (858) 455-6460
Fax: (858) 455-5362
After Hours Phone: (858)
455-6460
Provider Gender: Female
License number: PA56966
NPI: 1992177182

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/21
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

HAGEN, HILARY A
Provider ID: 122337
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Female
License number: PA52034
NPI: 1174920805
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HALTER, KENNETH N
Provider ID: 102100
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Male
License number: PA22613
NPI: 1053745059
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HAMILTON, JAMES N
Provider ID: 104629
Board Certified Specialty: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Male
License number: PA51679
NPI: 1003221078
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HARRIS, CHRISTINA V
Provider ID: 104660
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Female
License number: PA51525
NPI: 1720053846
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No

Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HASEGAWA, CHRIS
Provider ID: 247206
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: PA56884
NPI: 1225698962
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HOFFMAN, JULIE A
Provider ID: 238337
Board Certified Specialty: Yes
HEALTH EXCEL IPA INC
3900 5TH AVE STE 110

SAN DIEGO, CA 92103-3122
Phone: (858) 554-1212
Fax: (858) 795-1195
After Hours Phone: (858)
554-1212
Provider Gender: Female
License number: PA55348
NPI: 1538534805
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

HOFFMAN, JULIE A
Provider ID: 252895
Board Certified Specialty: No
HEALTH EXCEL IPA INC
3900 5TH AVE STE 300
SAN DIEGO, CA 92103-3138
Phone: (858) 554-1212
Fax: (858) 795-1195
After Hours Phone: (858)
554-1212
Provider Gender: Female
License number: PA55348
NPI: 1538534805
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: 0/999
American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

HOLM, TYLER A , NPA

Provider ID: 241020
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9333 GENESEE AVE # 350A
SAN DIEGO, CA 92121-2111
Phone: (858) 455-6460
Fax: (858) 455-7197
After Hours Phone: (858)
455-6460
Provider Gender: Male
License number: PA55864
NPI: 1326524299
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/99
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

KASIAN, ELIZA B

Provider ID: 262241
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123-4232

Phone: (858) 966-6795
Fax: (858) 966-7479
After Hours Phone: (858)
966-6795
Provider Gender: Male
License number: PA52368
NPI: 1780071399
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

KHALEGHI, MANI

Provider ID: 259512
Board Certified Specialty: No
HEALTH EXCEL IPA INC
5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123-1338
Phone: (858) 571-3630
Fax: (858) 430-3146
After Hours Phone: (858)
571-3630
Provider Gender: Male
License number: PA54238
NPI: 1275072423
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

KRASOVIC, ERYNN E

Provider ID: 262185
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY STE
410
SAN DIEGO, CA 92123-4228
Phone: (858) 966-6789
Fax: (858) 966-6706
After Hours Phone: (858)
966-6789
Provider Gender: Female
License number: PA52779
NPI: 1992173124
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/99
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

LAKHANPAL, SONIA

Provider ID: 110210
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 543-6222

Fax:

After Hours Phone: (619)
543-6222

Provider Gender: Female

License number: PA16823

NPI: 1285796458

Provider English Spoken: Yes

Provider Language(s) Spoken:
Hindi, Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

LAMBERT, GAGE I

Provider ID: 214788

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)
926-8273

Provider Gender: Male

License number: PA53792

NPI: 1144672494

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Scripps Memorial

Hospital, Scripps Memorial
Hospital Encinitas, Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

LAPINA, LORI L

Provider ID: 77863

Board Certified Specialty: No

NORTH PARK FAMILY HEALTH
CENTERS

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax:

After Hours Phone: (619)
515-2424

Provider Gender: Female

License number: PA23231

NPI: 1245670413

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): North Park
Family Health Centers

IPA:

LAZAR, ANITA A

Provider ID: 272531

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123-4232

Phone: (858) 309-7701

Fax: (858) 966-8038

After Hours Phone: (858)
309-7701

Provider Gender: Female

License number: PA55984

NPI: 1609208198

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

LEBOWITZ, STEVEN

Provider ID: 283732

Board Certified Specialty: No
RADY CHILDRENS HEALTH

NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 966-5818

Fax: (858) 966-7483

After Hours Phone: (858)
966-5818

Provider Gender: Male

License number: PA51721

NPI: 1497714828

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Palomar

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Center, Rady Childrens Hospital San Diego, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

LINDEMANN, CHRISTINA R

Provider ID: 283760
Board Certified Specialty: No
UCSD MEDICAL GROUP
4510 EXECUTIVE DR STE 325
SAN DIEGO, CA 92121-3069
Phone: (800) 926-8273
Fax: (858) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: PA57053
NPI: 1194373514
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LONGOBARDO, FRANCESCA

A , NPA
Provider ID: 241372
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9333 GENESEE AVE # 350A
SAN DIEGO, CA 92121-2111
Phone: (858) 455-6460
Fax: (858) 455-7197
After Hours Phone: (858) 455-6460
Provider Gender: Female
License number: PA52844
NPI: 1407224157
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MCADAMS, JOSEPH
Provider ID: 280611
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: PA58420
NPI: 1104371251
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MCCAULEY, KRISTINA R

Provider ID: 262245
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY
SAN DIEGO, CA 92123-4232
Phone: (858) 309-7701
Fax: (858) 966-8038
After Hours Phone: (858) 309-7701
Provider Gender: Female
License number: PA52100
NPI: 1063819944
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/99
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MCCLAFFERTY, STEPHANIE N

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider ID: 262297
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123-4232
Phone: (858) 966-6795
Fax:
After Hours Phone: (858) 966-6795
Provider Gender: Female
License number: PA52575
NPI: 1609209238
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MERCER, KELLY C
Provider ID: 257506
Board Certified Specialty: No
BLUE SHIELD PROMISE HEALTH PLAN DIRECT
5671 BALBOA AVE
SAN DIEGO, CA 92111-2705
Phone: (858) 800-2880
Fax:
After Hours Phone: (858) 800-2880
Provider Gender: Female
License number: PA21625
NPI: 1154609790
Provider English Spoken: Yes
Provider Language(s) Spoken:

Arabic
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health Plan Direct, Health Excel Ipa Inc

MERCER, KELLY C
Provider ID: 278473
Board Certified Specialty: No
HEALTH EXCEL IPA INC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608
Phone: (619) 255-9155
Fax: (619) 795-9849
After Hours Phone: (619) 255-9155
Provider Gender: Female
License number: PA21625
NPI: 1154609790
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic

Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
Accessibility: P, EB, IB, E
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health Plan Direct, Health Excel Ipa Inc

MERCER, KELLY C
Provider ID: 278474
Board Certified Specialty: No
HEALTH EXCEL IPA INC
4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1609
Phone: (619) 269-1269
Fax: (619) 269-1271
After Hours Phone: (619) 269-1269
Provider Gender: Female
License number: PA21625
NPI: 1154609790
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health Plan Direct, Health Excel Ipa Inc

MERRILL, COREY M
Provider ID: 258040
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: PA56995
NPI: 1386032308
Provider English Spoken: Yes

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

MUNCH, LINH D

Provider ID: 260085

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY STE 410

SAN DIEGO, CA 92123-4228

Phone: (858) 966-6789

Fax: (858) 966-6706

After Hours Phone: (858)

966-6789

Provider Gender: Female

License number: PA14223

NPI: 1679792725

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

MUNCH, LINH D

Provider ID: 260086

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

7910 FROST ST STE 190

SAN DIEGO, CA 92123-2731

Phone: (858) 966-9360

Fax: (858) 966-8519

After Hours Phone: (858)

966-9360

Provider Gender: Female

License number: PA14223

NPI: 1679792725

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

MUNCH, LINH D

Provider ID: 260087

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-5999

Fax: (858) 576-8412

After Hours Phone: (858)

966-5999

Provider Gender: Female

License number: PA14223

NPI: 1679792725

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

NAKAMITSU, ABIGAIL L

Provider ID: 268666

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 3

SAN DIEGO, CA 92123-4232

Phone: (858) 966-6789

Fax: (858) 966-8519

After Hours Phone: (858)

966-6789

Provider Gender: Female

License number: PA22344

NPI: 1932459179

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

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D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Rady Childrens Health Network

NASSAR, JEANNE A

Provider ID: 112529
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: PA21089
NPI: 1760704761
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

NELMS, MICHAEL J , NPA

Provider ID: 242771
Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC
4060 4TH AVE STE 415
SAN DIEGO, CA 92103-2121
Phone: (619) 298-9809
Fax:
After Hours Phone: (619) 298-9809
Provider Gender: Male
License number: PA14379

NPI: 1235113580
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

NELMS, MICHAEL J

Provider ID: 36201
Board Certified Specialty: Yes
WEST DERMATOLOGY AND SURG MED GRP
4060 4TH AVE STE 415
SAN DIEGO, CA 92103-2121
Phone: (619) 298-9809
Fax:
After Hours Phone: (619) 298-9809
Provider Gender: Male
License number: PA14379
NPI: 1235113580
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

NGUYEN, VIVIAN I

Provider ID: 272430
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: PA55483
NPI: 1225581754
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

O'MARA, ROBERT J

Provider ID: 80431
Board Certified Specialty: No
NORTH PARK FAMILY HEALTH CENTERS
3544 30TH ST
SAN DIEGO, CA 92104-4120

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D. Directorio de proveedores de atención especializada

Phone: (619) 515-2424
 Fax:
 After Hours Phone: (619) 515-2424
 Provider Gender: Male
 License number: PA14526
 NPI: 1336174382
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: ME
 Hours: M-SA 9AM-5PM
 Website: www.fhcsd.org
 Email:
 Medical Group(s): North Park Family Health Centers
 IPA:

OCONNOR, ALYSON B

Provider ID: 262343
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 7920 FROST ST STE 200
 SAN DIEGO, CA 92123-4289
 Phone: (858) 966-5999
 Fax: (858) 966-8394
 After Hours Phone: (858) 966-5999
 Provider Gender: Female
 License number: PA55497
 NPI: 1053855239
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: 0/18
 American Sign Language (ASL):

No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

PAIK, CHRISTINA N

Provider ID: 262428
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY STE 410
 SAN DIEGO, CA 92123-4228
 Phone: (858) 966-6789
 Fax: (858) 966-6706
 After Hours Phone: (858) 966-6789
 Provider Gender: Female
 License number: PA21680
 NPI: 1174811475
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: No
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

PAIK, CHRISTINA N

Provider ID: 262429
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH

NETWORK
 7910 FROST ST STE 190
 SAN DIEGO, CA 92123-2731
 Phone: (858) 966-9360
 Fax: (858) 966-8519
 After Hours Phone: (858) 966-9360
 Provider Gender: Female
 License number: PA21680
 NPI: 1174811475
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: No
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

PERREAULT, MARK R

Provider ID: 283585
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4520 EXECUTIVE DR
 SAN DIEGO, CA 92121-3018
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: PA57736
 NPI: 1356749451
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes

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D. Directorio de proveedores de atención especializada

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

PERREAULT, MARK R

Provider ID: 283586

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)
926-8273

Provider Gender: Male

License number: PA57736

NPI: 1356749451

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

PINEDA, RUSSEL V

Provider ID: 259575

Board Certified Specialty: No
HEALTH EXCEL IPA INC

5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123-1338

Phone: (858) 571-3630

Fax: (858) 430-3146

After Hours Phone: (858)
571-3630

Provider Gender: Male

License number: PA57473

NPI: 1528533007

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

QUICK, ELISABETH A

Provider ID: 87611

Board Certified Specialty: No
DTFHC AT CONNECTIONS

1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368

Phone: (619) 515-2430

Fax:

After Hours Phone: (619)
515-2430

Provider Gender: Female

License number: PA21591

NPI: 1790055010

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

RAI, GEORGINA

Provider ID: 270053

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
7526 CLAIREMONT MESA
BLVD

SAN DIEGO, CA 92111-1504

Phone: (858) 743-7526

Fax:

After Hours Phone: (858)
743-7526

Provider Gender: Female

License number: PA54629

NPI: 1467974915

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

RAI, PHILIPPA

Provider ID: 238505

Board Certified Specialty: Yes
HEALTH EXCEL IPA INC

3900 5TH AVE STE 110
SAN DIEGO, CA 92103-3122

Phone: (858) 554-1212

Fax: (858) 795-1195

After Hours Phone: (858)

554-1212

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D. Directorio de proveedores de atención especializada

Provider Gender: Female
License number: PA56698
NPI: 1174083836
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

RAMIREZ, ANDREA E

Provider ID: 283575
Board Certified Specialty: No
HEALTH EXCEL IPA INC
555 W C ST STE 102
SAN DIEGO, CA 92101-8470
Phone: (858) 554-1212
Fax: (858) 795-1195
After Hours Phone: (858) 554-1212
Provider Gender: Female
License number: PA58350
NPI: 1245874767
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Green Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Health Excel Ipa Inc
RIDGWAY, CATHERINE A
Provider ID: 110465
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222

Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: PA17175
NPI: 1184887408
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ROET, AFRA M

Provider ID: 99993
Board Certified Specialty: No
DIGESTIVE DISEASE ASSOCS INC
292 EUCLID AVE STE 115
SAN DIEGO, CA 92114-3629
Phone: (619) 266-3332
Fax:
After Hours Phone: (619) 266-3332
Provider Gender: Female
License number: PA11803
NPI: 1962548263

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T, W
Hours: M-F 9AM-5PM, SA 9AM-5PM
Website: www.3dcinc.com
Email:
Medical Group(s):
IPA:

SANCHEZ, RAQUEL

Provider ID: 262626
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY STE 410
SAN DIEGO, CA 92123-4228
Phone: (858) 966-6789
Fax:
After Hours Phone: (858) 966-6789
Provider Gender: Female
License number: PA14357
NPI: 1356560650
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:

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D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Rady Childrens Health Network

SANCHEZ, RAQUEL

Provider ID: 262627
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
7910 FROST ST STE 190
SAN DIEGO, CA 92123-2731
Phone: (858) 966-9360
Fax: (858) 966-8519
After Hours Phone: (858) 966-9360
Provider Gender: Female
License number: PA14357
NPI: 1356560650
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SANCHEZ, RAQUEL

Provider ID: 262628
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 966-5999
Fax: (858) 567-8412
After Hours Phone: (858) 966-5999
Provider Gender: Female
License number: PA14357
NPI: 1356560650
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SCHELLIE, SCOTT A

Provider ID: 109933
Board Certified Specialty: No
FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE
1550 BROADWAY # 2
SAN DIEGO, CA 92101-5713
Phone: (619) 515-2525
Fax:
After Hours Phone: (619) 515-2525
Provider Gender: Male
License number: PA53288
NPI: 1699053843
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):

No
Accessibility:
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Family Hlth Ctr San Diego- City College
IPA:

SCHMITT, EVA V

Provider ID: 264174
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
7910 FROST ST STE 140
SAN DIEGO, CA 92123-2712
Phone: (858) 966-6710
Fax: (858) 966-6266
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: PA19324
NPI: 1174715106
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SCHMITT, EVA V

Provider ID: 264175
Board Certified Specialty: No
RADY CHILDRENS HEALTH

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D. Directorio de proveedores de atención especializada

NETWORK

7910 FROST ST STE 430
SAN DIEGO, CA 92123-2795
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858)
966-6710
Provider Gender: Female
License number: PA19324
NPI: 1174715106
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

SCHMITT, EVA V

Provider ID: 264176
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858)
966-8800
Provider Gender: Female
License number: PA19324
NPI: 1174715106
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady

Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

SCHMITT, EVA V

Provider ID: 69390
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FN D T N
7910 FROST ST STE 430
SAN DIEGO, CA 92123-2795
Phone: (858) 966-6710
Fax:
After Hours Phone: (858)
966-6710
Provider Gender: Female
License number: PA19324
NPI: 1174715106
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

SCHROEDER, JENNIFER K

Provider ID: 124617
Board Certified Specialty: No
UCSD MEDICAL GROUP
4510 EXECUTIVE DR
SAN DIEGO, CA 92121-3021
Phone: (858) 453-1792
Fax:
After Hours Phone: (858)
453-1792
Provider Gender: Female
License number: PA19644
NPI: 1780851253
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SCHROEDER, JENNIFER K

Provider ID: 256639
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (858) 453-1469
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: PA19644
NPI: 1780851253
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p><i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group</p> <p>SCHROEDER, JENNIFER K <i>Provider ID:</i> 256640 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 4520 EXECUTIVE DR SAN DIEGO, CA 92121-3018 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female <i>License number:</i> PA19644 <i>NPI:</i> 1780851253 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group</p> <p>SCHULZ, STEFAN K <i>Provider ID:</i> 243419 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR</p>	<p>SAN DIEGO, CA 92103-1911 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Male <i>License number:</i> PA21712 <i>NPI:</i> 1316102163 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group</p> <p>SHAPIRO, RACHEL M <i>Provider ID:</i> 110912 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 <i>Phone:</i> (619) 543-6222 <i>Fax:</i> <i>After Hours Phone:</i> (619) 543-6222 <i>Provider Gender:</i> Female <i>License number:</i> PA52539 <i>NPI:</i> 1720488836 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i></p>	<p>No <i>♿ Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p> <p>SHAUL, SHERA M <i>Provider ID:</i> 247974 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 4520 EXECUTIVE DR STE 111 SAN DIEGO, CA 92121-3019 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female <i>License number:</i> PA56786 <i>NPI:</i> 1336659507 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group</p> <p>SILVER, NIKKI R <i>Provider ID:</i> 214094 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 9333 GENESEE AVE # 350A SAN DIEGO, CA 92121-2111</p>
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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>Phone: (858) 455-6460 Fax: (858) 455-7197 After Hours Phone: (858) 455-6460 Provider Gender: Female License number: PA55325 NPI: 1811439789 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista Medi-Cal Open Panel: No Min/Max Age: 18/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc</p>	<p>Hospital, Scripps Mercy Hospital Chula Vista Medi-Cal Open Panel: No Min/Max Age: 16/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc</p> <p>SNOWDEN, KELLY A Provider ID: 238533 Board Certified Specialty: No HEALTH EXCEL IPA INC 3900 5TH AVE STE 110 SAN DIEGO, CA 92103-3122 Phone: (858) 554-1212 Fax: (858) 795-1195 After Hours Phone: (858) 554-1212 Provider Gender: Female License number: PA55980 NPI: 1770065252 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Scripps Memorial Hospital Medi-Cal Open Panel: No Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Health Excel Ipa Inc</p> <p>STALLINGS, ANDREA M Provider ID: 101021 Board Certified Specialty: No</p>	<p>UCSD MEDICAL GROUP 4168 FRONT ST SAN DIEGO, CA 92103-2030 Phone: (619) 543-6248 Fax: After Hours Phone: (619) 543-6248 Provider Gender: Female License number: PA16540 NPI: 1972595478 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-F 8AM-5PM, SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group</p> <p>STALLINGS, ANDREA M Provider ID: 255913 Board Certified Specialty: No UCSD MEDICAL GROUP 330 LEWIS ST SAN DIEGO, CA 92103-2108 Phone: (619) 543-7496 Fax: After Hours Phone: (619) 543-7496 Provider Gender: Female License number: PA16540 NPI: 1972595478 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: Yes Min/Max Age: 0/999</p>
<p>SILVER, NIKKI R , NPA Provider ID: 242649 Board Certified Specialty: No COMMUNITY CARE IPA LLC 9333 GENESEE AVE STE 350 SAN DIEGO, CA 92121-2103 Phone: (858) 455-6460 Fax: After Hours Phone: (858) 455-6460 Provider Gender: Female License number: PA55325 NPI: 1811439789 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Scripps Memorial</p>		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

American Sign Language (ASL): Phone: (619) 515-2300

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

TRAUTMAN, AMY L

Provider ID: 104652

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222

Fax:

After Hours Phone: (619)

543-6222

Provider Gender: Female

License number: PA51673

NPI: 1235412503

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

TREUNER, JULIE A

Provider ID: 47986

Board Certified Specialty: No

LOGAN HEIGHTS FAMILY

HEALTH CENTER

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Fax:

After Hours Phone: (619)

515-2300

Provider Gender: Female

License number: PA17478

NPI: 1922013614

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Logan Heights

Family Health Center

IPA:

UPTON, JACQUELINE M

Provider ID: 84938

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222

Fax:

After Hours Phone: (619)

543-6222

Provider Gender: Female

License number: PA21933

NPI: 1295704328

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

VARGAS, GREGORY E

Provider ID: 279990

Board Certified Specialty: No

HEALTH EXCEL IPA INC

10251 VISTA SORRENTO

PKWY STE 280

SAN DIEGO, CA 92121-3776

Phone: (818) 575-6351

Fax: (289) 236-3022

After Hours Phone: (818)

575-6351

Provider Gender: Male

License number: PA15844

NPI: 1548406853

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 50/120

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

VARGAS, ROBERT M

Provider ID: 25717

Board Certified Specialty: No

LOGAN HEIGHTS FAMILY

HEALTH CENTER

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Provider Gender: Male
License number: PA11194
NPI: 1972528081
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Logan Heights Family Health Center
IPA:

VILLAPANDO, NORMA O
Provider ID: 264057
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123-4232
Phone: (858) 966-6795
Fax: (858) 966-7479
After Hours Phone: (858) 966-6795
Provider Gender: Female
License number: PA56098
NPI: 1376947960
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):

No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

WAGENMAN, BRIANNE M
Provider ID: 263676
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123-4232
Phone: (858) 966-6795
Fax: (858) 966-7479
After Hours Phone: (858) 966-6795
Provider Gender: Female
License number: PA51753
NPI: 1598164766
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

WALSH, HEATHER J
Provider ID: 284429
Board Certified Specialty: No
HEALTH EXCEL IPA INC
3969 4TH AVE STE 208
SAN DIEGO, CA 92103-3165

Phone: (619) 849-5777
Fax: (619) 849-5776
After Hours Phone: (619) 849-5777
Provider Gender: Female
License number: PA55045
NPI: 1083865026
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

WAX, PLUMMER L
Provider ID: 84960
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: PA15657
NPI: 1376741934
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Website:

Email:

Medical Group(s):

IPA:

WEIR, JACQUELINE R

Provider ID: 278200

Board Certified Specialty: No

UCSD MEDICAL GROUP

4168 FRONT ST

SAN DIEGO, CA 92103-2030

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: PA21646

NPI: 1932494499

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

WEIR, JACQUELINE R

Provider ID: 278201

Board Certified Specialty: No

UCSD MEDICAL GROUP

330 LEWIS ST

SAN DIEGO, CA 92103-2108

Phone: (800) 925-8271

Fax: (888) 539-8781

After Hours Phone: (800)

925-8271

Provider Gender: Female

License number: PA21646

NPI: 1932494499

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

WEIR, JACQUELINE R

Provider ID: 278203

Board Certified Specialty: No

UCSD MEDICAL GROUP

9909 MIRA MESA BLVD STE

200

SAN DIEGO, CA 92131-1061

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: PA21646

NPI: 1932494499

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

WITT, CHRISTOPHER

Provider ID: 110202

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222

Fax:

After Hours Phone: (619)

543-6222

Provider Gender: Male

License number: PA19586

NPI: 1982675708

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

YIP, JACKIE

Provider ID: 122807

Board Certified Specialty: No

CITY HEIGHTS FAMILY

HEALTH CENTERS INC

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2400
 Fax:
 After Hours Phone: (619)
 515-2400
 Provider Gender: Female
 License number: PA20996
 NPI: 1558676171
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: ME
 Hours: M-SA 9AM-5PM
 Website: www.fhcsd.org
 Email:
 Medical Group(s): City Heights
 Family Health Centers Inc
 IPA:

ZANZUCCHI, AUDREY E
 Provider ID: 253253
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-7777
 Fax:
 After Hours Phone: (619)
 543-7777
 Provider Gender: Female
 License number: PA54479
 NPI: 1265960256
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

PODIATRIST

COLLINS, MICHAEL L
 Provider ID: 108897
 Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 9333 GENESEE AVE STE 350
 SAN DIEGO, CA 92121-2103
 Phone: (858) 455-6460
 Fax: (858) 455-7197
 After Hours Phone: (858)
 455-6460
 Provider Gender: Male
 License number: DPM5146
 NPI: 1912294711
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps
 Memorial Hospital, Scripps
 Mercy Hospital, Scripps Mercy
 Hospital Chula Vista
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc, Imperial
 Health Holdings Medical

Group-Sd
COLLINS, MICHAEL L
 Provider ID: 212736
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 9333 GENESEE AVE STE 350
 SAN DIEGO, CA 92121-2103
 Phone: (858) 455-6460
 Fax: (858) 455-7197
 After Hours Phone: (858)
 455-6460
 Provider Gender: Male
 License number: DPM5146
 NPI: 1912294711
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps
 Memorial Hospital, Scripps
 Mercy Hospital, Scripps Mercy
 Hospital Chula Vista
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc, Imperial
 Health Holdings Medical
 Group-Sd

COLLINS, MICHAEL L
 Provider ID: 269866
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 9333 GENESEE AVE # 350A
 SAN DIEGO, CA 92121-2111

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D. Directorio de proveedores de atención especializada

Phone: (858) 455-6460
Fax: (858) 455-7197
After Hours Phone: (858) 455-6460
Provider Gender: Male
License number: DPM5146
NPI: 1912294711
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

FORG, PATRICIA L

Provider ID: 270062
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
3989 32ND ST
SAN DIEGO, CA 92104-2001
Phone: (619) 283-2097
Fax: (619) 860-1289
After Hours Phone: (619) 283-2097
Provider Gender: Female
License number: DPM3775
NPI: 1962517508
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No

Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

FOYGELMAN, ALEKSANDR

Provider ID: 218098
Board Certified Specialty: No
HEALTH EXCEL IPA INC
4712 EL CAJON BLVD STE D
SAN DIEGO, CA 92115-4557
Phone: (619) 281-3338
Fax: (844) 229-9092
After Hours Phone: (619) 281-3338
Provider Gender: Male
License number: DPM4387
NPI: 1265574669
Provider English Spoken: Yes
Provider Language(s) Spoken: Armenian, Bulgarian, Hebrew, Russian, Spanish, Ukrainian
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

FOYGELMAN, ALEKSANDR

Provider ID: 270221
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4440 EUCLID AVE
SAN DIEGO, CA 92115-4522
Phone: (619) 281-3338
Fax: (844) 229-9092
After Hours Phone: (619) 281-3338
Provider Gender: Male
License number: DPM4387
NPI: 1265574669
Provider English Spoken: Yes
Provider Language(s) Spoken: Armenian, Bulgarian, Hebrew, Russian, Spanish, Ukrainian
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

MILLER, GLENN A

Provider ID: 34542
Board Certified Specialty: No
LOGAN HEIGHTS FAMILY HEALTH CENTER
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax: (619) 269-0053
After Hours Phone: (619) 515-2300
Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

License number: DPM3584
NPI: 1164457966
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Logan Heights
Family Health Center
IPA:

MILLER, GLENN A

Provider ID: 39393
Board Certified Specialty: No
NORTH PARK FAMILY HEALTH
CENTERS
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2300
Fax: (619) 685-8317
After Hours Phone: (619)
515-2300
Provider Gender: Male
License number: DPM3584
NPI: 1164457966
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): North Park

Family Health Centers
IPA:
QUINN, MICHAEL H
Provider ID: 66301
Board Certified Specialty: No
CALIFORNIA ORTHOPAEDIC
INST MED ASSOCS INC
7485 MISSION VALLEY RD STE
104A
SAN DIEGO, CA 92108-4422
Phone: (619) 291-8930
Fax: (619) 291-8491
After Hours Phone: (619)
291-8930
Provider Gender: Male
License number: DPM4132
NPI: 1417918475

Provider English Spoken: Yes
Provider Language(s) Spoken:
French
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8:30AM-5PM, SA
9AM-5PM
Website: califortho.com
Email:
Medical Group(s):
IPA:

SABET, PAYMANEH SALEHIAN

Provider ID: 110901
Board Certified Specialty: No
UCSD EMERG PHYSICIANS
200 W ARBOR DR
SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Female
License number: DPM5073
NPI: 1437474442
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SHOAEI, NOUSHIN

Provider ID: 278540
Board Certified Specialty: No
HEALTH EXCEL IPA INC
4765 CARMEL MOUNTAIN RD
STE 104
SAN DIEGO, CA 92130-6657
Phone: (858) 481-8240
Fax: (858) 481-8612
After Hours Phone: (858)
481-8240
Provider Gender: Female
License number: DPM4631
NPI: 1184658130
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital

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D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

PREVENTATIVE MEDICINE GENERAL

ROMERO, CAMILA X

Provider ID: 86049

Board Certified Specialty: No
LINDA VISTA HEALTH CARE
CTR

6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342

Phone: (858) 279-0925

Fax: (858) 279-0377

After Hours Phone: (858)
279-0925

Provider Gender: Female

License number: A93812

NPI: 1508912130

Provider English Spoken: Yes

Provider Language(s) Spoken:
French, Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Mary
Birch Hosp For Women And
Newborns

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,
T, W

Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

Website: www.sdfamilycare.org

Email:

Medical Group(s): Linda Vista
Health Care Ctr
IPA:

PSYCHIATRIC-MENTAL HEALTH NURSE PRACTITIONER

SIETSMA, ALEXANDRA

Provider ID: 276908

Board Certified Specialty: No
UCSD MEDICAL GROUP
350 DICKINSON ST
SAN DIEGO, CA 92103-1913

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

License number: NP95002705

NPI: 1932522778

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

SIETSMA, ALEXANDRA

Provider ID: 276909

Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

License number: NP95002705

NPI: 1932522778

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

PUBLIC HEALTH PREVENTATIVE MEDICINE

SOZANSKI, JESSE

Provider ID: 200925

Board Certified Specialty: No
UCSD MEDICAL GROUP
9333 GENESEE AVE STE 200
SAN DIEGO, CA 92121-2113

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)
926-8273

Provider Gender: Male

License number: A139018

NPI: 1437446622

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally

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D. Directorio de proveedores de atención especializada

Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4520 EXECUTIVE DR STE 111
 SAN DIEGO, CA 92121-3019
 Phone: (858) 355-5864
 Fax: (858) 657-6171
 After Hours Phone: (858)
 355-5864
 Provider Gender: Male
 License number: 20A8875
 NPI: 1407050669

Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

PULMONARY DISEASES

AFSHAR, KAMYAR
 Provider ID: 102305
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-6222
 Fax:
 After Hours Phone: (619)
 543-6222
 Provider Gender: Male
 License number: 20A8875
 NPI: 1407050669

Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Farsi
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

AKUTHOTA, PRAVEEN
 Provider ID: 102053
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4520 EXECUTIVE DR # 2
 SAN DIEGO, CA 92121-3018
 Phone: (855) 355-5864
 Fax: (858) 657-6171
 After Hours Phone: (855)
 355-5864
 Provider Gender: Male
 License number: C137976
 NPI: 1396704698
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: W
 Hours: M-F 8AM-5PM, SA
 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Farsi
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

AKUTHOTA, PRAVEEN
 Provider ID: 102052
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-6222
 Fax:
 After Hours Phone: (619)
 543-6222
 Provider Gender: Male
 License number: C137976
 NPI: 1396704698
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr

BENCHEQROUN, HASSAN K
 Provider ID: 276397
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC

AFSHAR, KAMYAR
 Provider ID: 102312

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D. Directorio de proveedores de atención especializada

1011 CAMINO DEL RIO S STE
415
SAN DIEGO, CA 92108-3525
Phone: (760) 618-1353
Fax: (760) 259-2001
After Hours Phone: (760)
618-1353

Provider Gender: Male
License number: A112435
NPI: 1174786594
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, French, Spanish
Cultural Competency: No
Hospital Affiliation: Desert
Regional Med Ctr, Alvarado
Hospital Llc, Riverside
Community Hosp, Parkview
Community Hospital Medical
Center, Corona Regional Med
Ctr, Scripps Mercy Hospital,
Scripps Mercy Hospital Chula
Vista, Vibra Hospital Of San
Diego

Medi-Cal Open Panel: Yes
Min/Max Age: 18/105
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

DEVEREAUX, ASHA V

Provider ID: 112518
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST FL 2
SAN DIEGO, CA 92103-2030
Phone: (619) 543-5415
Fax:
After Hours Phone: (619)
543-5415

Provider Gender: Female
License number: A51614
NPI: 1154392421
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
Coronado Hosp And Healthcare
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ELMARAACHLI, WAEL

Provider ID: 83405
Board Certified Specialty: Yes
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax: (858) 657-7107
After Hours Phone: (619)
543-6222

Provider Gender: Male
License number: A106280
NPI: 1366468969
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ELMARAACHLI, WAEL

Provider ID: 83408
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (619) 543-6248
Fax: (858) 657-7107
After Hours Phone: (619)
543-6248
Provider Gender: Male
License number: A106280
NPI: 1366468969
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FEDULLO, PETER F

Provider ID: 63903
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911

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D. Directorio de proveedores de atención especializada

Phone: (619) 543-6222

Fax:

After Hours Phone: (619)
543-6222

Provider Gender: Male

License number: G41977

NPI: 1427073683

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

FERNANDES, TIMOTHY M

Provider ID: 83429

Board Certified Specialty: Yes

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222

Fax: (858) 657-7107

After Hours Phone: (619)

543-6222

Provider Gender: Male

License number: A112514

NPI: 1669680757

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

FUSTER, MARK M

Provider ID: 63911

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222

Fax:

After Hours Phone: (619)

543-6222

Provider Gender: Male

License number: G80544

NPI: 1972537025

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

GUPTA, NAVEEN

Provider ID: 92099

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (855) 355-5864

Fax:

After Hours Phone: (855)
355-5864

Provider Gender: Male

License number: A81440

NPI: 1013015569

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsf Mount

Zion, Scripps Green Hospital,

Medical Ctr At Ucsf, Ucsd

Medical Ctr, Regional Medical

Ctr Of San Jose

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

HEPOKOSKI, MARK L

Provider ID: 122042

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (855) 355-5864

Fax:

After Hours Phone: (855)

355-5864

Provider Gender: Male

License number: A125984

NPI: 1649408790

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr

Medi-Cal Open Panel: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HUGHSON, WILLIAM G

Provider ID: 64327
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST
SAN DIEGO, CA 92103-2108
Phone: (619) 471-9260
Fax:
After Hours Phone: (619)
471-9260
Provider Gender: Male
License number: G38693
NPI: 1467519579
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

IBRAHIM, ISLAM M

Provider ID: 64578
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030

Phone: (619) 543-6303
Fax:
After Hours Phone: (619)
543-6303
Provider Gender: Male
License number: C54272
NPI: 1962586917
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Long Beach Memorial Med
Ctr, Temecula Valley Hospital Inc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

JOSHUA, JISHA K

Provider ID: 238061
Board Certified Specialty: No
UCSD MEDICAL GROUP
4520 EXECUTIVE DR STE P2
SAN DIEGO, CA 92121-3028
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A144956
NPI: 1023436417
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi, Malayalam
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

JOSHUA, JISHA K

Provider ID: 238062
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A144956
NPI: 1023436417
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi, Malayalam
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LE, HUAN A

Provider ID: 212748
Board Certified Specialty: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

HEALTH EXCEL IPA INC
5507 EL CAJON BLVD # C
SAN DIEGO, CA 92115-3624
Phone: (619) 582-1448
Fax: (619) 582-1081
After Hours Phone: (619) 582-1448
Provider Gender: Male
License number: A76373
NPI: 1780797381
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish, Vietnamese
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Paradise Valley Hospital, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

LE, HUAN A , MD
Provider ID: 27358
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
5507 EL CAJON BLVD # C
SAN DIEGO, CA 92115-3624
Phone: (619) 582-1448
Fax: (619) 582-1081
After Hours Phone: (619) 582-1448
Provider Gender: Male
License number: A76373
NPI: 1780797381
Provider English Spoken: Yes
Provider Language(s) Spoken:

French, Spanish, Vietnamese
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Paradise Valley Hospital, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/99
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

LI, JINGHONG
Provider ID: 83699
Board Certified Specialty: Yes
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (858) 657-7125
Fax: (858) 657-7107
After Hours Phone: (858) 657-7125
Provider Gender: Female
License number: A107000
NPI: 1619014479
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Ucsd Medical Group
LONGORIA, JAVIER A
Provider ID: 118849
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: A115684
NPI: 1538397765
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: University Of California Irvine Med Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LOREDO, JOSE S
Provider ID: 64348
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST
SAN DIEGO, CA 92103-2108
Phone: (619) 471-9260
Fax:
After Hours Phone: (619) 471-9260
Provider Gender: Male
License number: G67450

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1891728531
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MAGANA, MARISA M

Provider ID: 65372
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (858) 657-7105
Fax:
After Hours Phone: (858) 657-7105
Provider Gender: Female
License number: A94464
NPI: 1194856286
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

MALHOTRA, ATUL

Provider ID: 83977
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST
SAN DIEGO, CA 92103-2108
Phone: (619) 471-9260
Fax:
After Hours Phone: (619) 471-9260
Provider Gender: Male
License number: C55949
NPI: 1982695169

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MALHOTRA, ATUL

Provider ID: 83978
Board Certified Specialty: Yes
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (858) 657-6485
Fax: (858) 657-7107
After Hours Phone: (858) 657-6485
Provider Gender: Male

License number: C55949
NPI: 1982695169
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MANDEL, JESS

Provider ID: 64608
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (619) 543-6248
Fax:
After Hours Phone: (619) 543-6248
Provider Gender: Male
License number: C52434
NPI: 1023006970
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

MORRIS, TIMOTHY A Provider ID: 64618 Board Certified Specialty: No UCSD MEDICAL GROUP 4168 FRONT ST SAN DIEGO, CA 92103-2030 Phone: (619) 543-2793 Fax: (619) 543-3384 After Hours Phone: (619) 543-2793 Provider Gender: Male License number: G71499 NPI: 1134206709 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-F 8AM-5PM, SA 9AM-5PM Website: Email: Medical Group(s): IPA:	License number: A101188 NPI: 1326168600 Provider English Spoken: Yes Provider Language(s) Spoken: French, Greek Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-F 8AM-5PM, SA 9AM-5PM Website: Email: Medical Group(s): IPA:	Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:
PAPAMATHEAKIS, DEMOSTHENES G Provider ID: 64625 Board Certified Specialty: No UCSD MEDICAL GROUP 4168 FRONT ST SAN DIEGO, CA 92103-2030 Phone: (855) 355-5864 Fax: (619) 543-7352 After Hours Phone: (855) 355-5864 Provider Gender: Male	POCH, DAVID S Provider ID: 64140 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 Phone: (619) 543-6303 Fax: (858) 657-7107 After Hours Phone: (619) 543-6303 Provider Gender: Male License number: A107956 NPI: 1598955668 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W	RAMNATH, VENKTESH R Provider ID: 114336 Board Certified Specialty: No UCSD MEDICAL GROUP 4520 EXECUTIVE DR STE 111 SAN DIEGO, CA 92121-3019 Phone: (858) 657-8860 Fax: After Hours Phone: (858) 657-8860 Provider Gender: Male License number: A107714 NPI: 1215911730 Provider English Spoken: Yes Provider Language(s) Spoken: French, Spanish Cultural Competency: No Hospital Affiliation: Temecula Valley Hospital Inc, Southwest Healthcare System Murrieta, Southwest Healthcare System Wildomar, El Centro Regional Medical Center, Ucsd Medical Ctr, Healdsburg District Hosp, Providence Redwood Memorial Hospital, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group
		RIES, ANDREW L

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider ID: 64634
Board Certified Specialty: Yes
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (619) 543-6248

Fax:
After Hours Phone: (619)
543-6248
Provider Gender: Male
License number: G33984
NPI: 1225088214
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

RIKER, DAVID R

Provider ID: 122563
Board Certified Specialty: No
NR MEDICAL ASSOCIATES
555 WASHINGTON ST
SAN DIEGO, CA 92103-2289
Phone: (619) 250-8300

Fax:
After Hours Phone: (619)
250-8300
Provider Gender: Male
License number: C53916
NPI: 1164405528
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical

Ctr, Alvarado Hospital Llc, Vibra
Hospital Of San Diego, Scripps
Mercy Hospital, Scripps Mercy
Hospital Chula Vista
Medi-Cal Open Panel: No

Min/Max Age: None
American Sign Language (ASL):
No

♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA:

SOLER TOMAS, XAVIER

Provider ID: 64651
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (855) 355-5864

Fax:
After Hours Phone: (855)
355-5864
Provider Gender: Male
License number: A140707
NPI: 1962738641

Provider English Spoken: Yes
Provider Language(s) Spoken:
French, Spanish
Cultural Competency: No
Hospital Affiliation: El Centro
Regional Medical Center
Medi-Cal Open Panel: No

Min/Max Age: None
American Sign Language (ASL):
No

♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:

Email:
Medical Group(s):
IPA:

SUNWOO, BERNIE Y

Provider ID: 118881
Board Certified Specialty: No
UCSD MEDICAL GROUP
4520 EXECUTIVE DR STE 111
SAN DIEGO, CA 92121-3019
Phone: (858) 657-8860

Fax:
After Hours Phone: (858)
657-8860

Provider Gender: Female
License number: A138242
NPI: 1336294107

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Medical Ctr At
Ucsf, Ucsf Medical Center At
Mission Bay, Ucsf Medical
Center At Mount Zion, Ucsd
Medical Ctr, Ucsd La Jolla John
Sally Thornton

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA:

SUNWOO, BERNIE Y

Provider ID: 118885
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222

Fax:
After Hours Phone: (619)
543-6222

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: A138242
 NPI: 1336294107
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Medical Ctr At Ucsf, Ucsf Medical Center At Mission Bay, Ucsf Medical Center At Mount Zion, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

YUNG, GORDON L

Provider ID: 64669
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
 Phone: (619) 543-7300
 Fax: (619) 543-7334
 After Hours Phone: (619) 543-7300
 Provider Gender: Male
 License number: A54237
 NPI: 1134145949
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W

Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

RADIATION ONCOLOGY

BRUGGEMAN, ANDREW R , MD

Provider ID: 271007
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 16918 DOVE CANYON RD STE 103
 SAN DIEGO, CA 92127-3455
 Phone: (858) 649-5100
 Fax: (858) 649-5099
 After Hours Phone: (858) 649-5100
 Provider Gender: Male
 License number: A126549
 NPI: 1790049591
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/120
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Ucsd Medical Group

CHANG, ANDREW L

Provider ID: 205679
 Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK
 9730 SUMMERS RIDGE RD
 SAN DIEGO, CA 92121-3101
 Phone: (858) 549-7400
 Fax:
 After Hours Phone: (858) 549-7400
 Provider Gender: Male
 License number: A85308
 NPI: 1255513859
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Cecil H And Ida M Green Hosp Of Scripps Clin, Rady Childrens Hospital San Diego, Scripps Green Hospital, Scripps Memorial Hospital
 Medi-Cal Open Panel: No
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

CHOI, JEHEE I

Provider ID: 206125
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 9730 SUMMERS RIDGE RD
 SAN DIEGO, CA 92121-3101
 Phone: (858) 549-7458
 Fax:
 After Hours Phone: (858) 549-7458
 Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: A131202
NPI: 1619260056
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

COLEMAN, LORI A , MD
Provider ID: 221091
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
3075 HEALTH CENTER DR
SAN DIEGO, CA 92123-2773
Phone: (858) 939-5010
Fax:
After Hours Phone: (858)
939-5010
Provider Gender: Female
License number: G78635
NPI: 1053348920
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Palomar
Health Downtown Campus,
Sharp Chula Vista Med Ctr,
Sharp Memorial Hospital,
Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 19/100
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

DEWITT, KELLY D , MD
Provider ID: 220045
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
3075 HEALTH CENTER DR
SAN DIEGO, CA 92123-2773
Phone: (858) 939-5010
Fax:
After Hours Phone: (858)
939-5010
Provider Gender: Female
License number: A74873
NPI: 1184668741
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Palomar
Health Downtown Campus,
Palomar Medical Center, Sharp
Chula Vista Med Ctr, Grossmont
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 19/100
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

FULLER, DONALD B
Provider ID: 257141
Board Certified Specialty: No
HEALTH EXCEL IPA INC

3366 5TH AVE
SAN DIEGO, CA 92103-5713
Phone: (619) 230-0400
Fax: (858) 429-7936
After Hours Phone: (619)
230-0400
Provider Gender: Male
License number: G62532
NPI: 1285632711
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital Chula Vista, Scripps
Memorial Hospital Encinitas,
Sharp Memorial Hospital, Scripps
Mercy Hospital, Alvarado
Hospital Llc, Scripps Memorial
Hospital, Scripps Green Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

FULLER, DONALD B
Provider ID: 261924
Board Certified Specialty: No
HEALTH EXCEL IPA INC
5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123-1338
Phone: (858) 505-4100
Fax:
After Hours Phone: (858)
505-4100
Provider Gender: Male
License number: G62532
NPI: 1285632711
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p><i>Provider Language(s) Spoken:</i> No <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Sharp Memorial Hospital, Scripps Mercy Hospital, Alvarado Hospital Llc, Scripps Memorial Hospital, Scripps Green Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc</p>	<p><i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc</p>	<p>HATTANGADI GLUTH, JONA A , MD <i>Provider ID:</i> 254496 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 16918 DOVE CANYON RD STE 103 SAN DIEGO, CA 92127-3455 <i>Phone:</i> (559) 447-4949 <i>Fax:</i> (559) 447-4925 <i>After Hours Phone:</i> (559) 447-4949 <i>Provider Gender:</i> Female <i>License number:</i> A122308 <i>NPI:</i> 1467625491 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd</p>
<p>FULLER, DONALD B , MD <i>Provider ID:</i> 269236 <i>Board Certified Specialty:</i> Yes COMMUNITY CARE IPA LLC 2466 1ST AVE # B SAN DIEGO, CA 92101-1480 <i>Phone:</i> (619) 230-0400 <i>Fax:</i> (619) 325-3688 <i>After Hours Phone:</i> (619) 230-0400 <i>Provider Gender:</i> Male <i>License number:</i> G62532 <i>NPI:</i> 1285632711 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Sharp Memorial Hospital, Scripps Mercy Hospital, Alvarado Hospital Llc, Scripps Memorial Hospital, Scripps Green Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc</p>	<p>FULLER, DONALD B , MD <i>Provider ID:</i> 269238 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 5395 RUFFIN RD STE 103 SAN DIEGO, CA 92123-1338 <i>Phone:</i> (858) 505-4100 <i>Fax:</i> <i>After Hours Phone:</i> (858) 505-4100 <i>Provider Gender:</i> Male <i>License number:</i> G62532 <i>NPI:</i> 1285632711 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Sharp Memorial Hospital, Scripps Mercy Hospital, Alvarado Hospital Llc, Scripps Memorial Hospital, Scripps Green Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc</p>	<p>HATTANGADI GLUTH, JONA A <i>Provider ID:</i> 262270 <i>Board Certified Specialty:</i> No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 16918 DOVE CANYON RD STE 103 SAN DIEGO, CA 92127-3455</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (559) 447-4949
 Fax: (559) 447-4925
 After Hours Phone: (559) 447-4949
 Provider Gender: Female
 License number: A122308
 NPI: 1467625491
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

HOOPES, DAVID J

Provider ID: 262206
 Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 16918 DOVE CANYON RD STE 103
 SAN DIEGO, CA 92127-3455
 Phone: (559) 447-4949
 Fax: (559) 447-4925
 After Hours Phone: (559) 447-4949
 Provider Gender: Male
 License number: C128063
 NPI: 1962520080
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

HOOPES, DAVID J , MD

Provider ID: 269725
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 16918 DOVE CANYON RD STE 103
 SAN DIEGO, CA 92127-3455
 Phone: (559) 447-4949
 Fax: (559) 447-4925
 After Hours Phone: (559) 447-4949
 Provider Gender: Male
 License number: C128063
 NPI: 1962520080
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: Hours: M-SA 9AM-5PM
 Website:
 Email:

Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

HOOPES, DAVID J

Provider ID: 84213
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 16918 DOVE CANYON RD STE 103
 SAN DIEGO, CA 92127-3455
 Phone: (559) 447-4949
 Fax: (559) 447-4925
 After Hours Phone: (559) 447-4949
 Provider Gender: Male
 License number: C128063
 NPI: 1962520080
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL): No
 Accessibility: Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

IJAZ, TAHIR

Provider ID: 257138
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

3366 5TH AVE
SAN DIEGO, CA 92103-5713
Phone: (619) 230-0400
Fax: (858) 429-7936
After Hours Phone: (619) 230-0400
Provider Gender: Male
License number: A52748
NPI: 1225036742
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: St Agnes Medical Center, Palomar Health Downtown Campus, Alvarado Hospital Llc, Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Sharp Memorial Hospital, Scripps Memorial Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

IJAZ, TAHIR

Provider ID: 257139
Board Certified Specialty: No
HEALTH EXCEL IPA INC
5395 RUFFIN RD STE 202
SAN DIEGO, CA 92123-1338
Phone: (858) 430-1101
Fax:
After Hours Phone: (858) 430-1101

Provider Gender: Male
License number: A52748
NPI: 1225036742
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Sharp Memorial Hospital, St Agnes Medical Center, Palomar Health Downtown Campus, Alvarado Hospital Llc, Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

IJAZ, TAHIR, MD

Provider ID: 269245
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123-1338
Phone: (858) 505-4100
Fax: (858) 429-7939
After Hours Phone: (858) 505-4100
Provider Gender: Male
License number: A52748
NPI: 1225036742
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish

Cultural Competency: No
Hospital Affiliation: St Agnes Medical Center, Palomar Health Downtown Campus, Alvarado Hospital Llc, Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Sharp Memorial Hospital, Scripps Memorial Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

IJAZ, TAHIR, MD

Provider ID: 269246
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
3366 5TH AVE
SAN DIEGO, CA 92103-5713
Phone: (619) 230-0400
Fax: (858) 429-7936
After Hours Phone: (619) 230-0400
Provider Gender: Male
License number: A52748
NPI: 1225036742
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: St Agnes Medical Center, Palomar Health Downtown Campus, Alvarado Hospital Llc, Paradise Valley Hospital, Scripps Mercy Hospital

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Chula Vista, Scripps Memorial Hospital Encinitas, Sharp Memorial Hospital, Scripps Memorial Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

IJAZ, TAHIR

Provider ID: 55269
Board Certified Specialty: No
GENESIS HEALTHCARE PARTNERS PC
3366 5TH AVE
SAN DIEGO, CA 92103-5713
Phone: (619) 230-0400
Fax: (858) 429-7936
After Hours Phone: (619) 230-0400
Provider Gender: Male
License number: A52748
NPI: 1225036742
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: St Agnes Medical Center, Alvarado Hospital Llc, Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Sharp Memorial Hospital, Scripps Memorial Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: No

Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

JABBARI, SIAVASH, MD

Provider ID: 268784
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
3075 HEALTH CENTER DR # 0 LEVEL
SAN DIEGO, CA 92123-2773
Phone: (858) 939-5010
Fax: (858) 939-5021
After Hours Phone: (858) 939-5010
Provider Gender: Male
License number: A99269
NPI: 1720314107
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Grossmont Hospital, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MACEWAN, IAIN J

Provider ID: 206088
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
9730 SUMMERS RIDGE RD
SAN DIEGO, CA 92121-3101
Phone: (858) 549-7458
Fax: (858) 578-1144
After Hours Phone: (858) 549-7458
Provider Gender: Male
License number: A129079
NPI: 1326300401
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Rady Childrens Health Network, Ucsd Medical Group

MACEWAN, IAIN J , MD

Provider ID: 255730
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
16918 DOVE CANYON RD STE 103
SAN DIEGO, CA 92127-3455

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>Phone: (858) 649-5100 Fax: After Hours Phone: (858) 649-5100 Provider Gender: Male License number: A129079 NPI: 1326300401 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Rady Childrens Health Network, Ucsd Medical Group</p> <p>MAYADEV, JYOTI S , MD Provider ID: 256153 Board Certified Specialty: No COMMUNITY CARE IPA LLC 16918 DOVE CANYON RD STE 103 SAN DIEGO, CA 92127-3455 Phone: (858) 649-5100 Fax: (858) 649-5099 After Hours Phone: (858) 649-5100 Provider Gender: Female License number: A109372 NPI: 1902906902 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Uc Davis Medical Ctr Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd</p> <p>MELL, LOREN K Provider ID: 262153 Board Certified Specialty: No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 16918 DOVE CANYON RD STE 103 SAN DIEGO, CA 92127-3455</p>	<p>Hospital Affiliation: Uc Davis Medical Ctr Medi-Cal Open Panel: Yes Min/Max Age: 0/120 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd</p> <p>MAYADEV, JYOTI S Provider ID: 262219 Board Certified Specialty: No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 16918 DOVE CANYON RD STE 103 SAN DIEGO, CA 92127-3455 Phone: (858) 649-5100 Fax: (858) 649-5099 After Hours Phone: (858) 649-5100 Provider Gender: Female License number: A109372 NPI: 1902906902 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Uc Davis Medical Ctr Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s):</p>	<p>IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd</p> <p>MELL, LOREN K , MD Provider ID: 255893 Board Certified Specialty: No COMMUNITY CARE IPA LLC 16918 DOVE CANYON RD STE 103 SAN DIEGO, CA 92127-3455 Phone: (559) 447-4949 Fax: (559) 447-4925 After Hours Phone: (559) 447-4949 Provider Gender: Male License number: A104704 NPI: 1316119704 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd</p>
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D. Directorio de proveedores de atención especializada

Phone: (559) 447-4949
Fax: (559) 447-4925
After Hours Phone: (559) 447-4949
Provider Gender: Male
License number: A104704
NPI: 1316119704
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

MURPHY, JAMES D

Provider ID: 262401
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
16918 DOVE CANYON RD STE 103
SAN DIEGO, CA 92127-3455
Phone: (559) 447-4949
Fax: (559) 447-4925
After Hours Phone: (559) 447-4949
Provider Gender: Male
License number: A105348
NPI: 1730382631
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings Medical Group-Sd

MURPHY, KEVIN T , MD

Provider ID: 242618
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
16918 DOVE CANYON RD STE 103
SAN DIEGO, CA 92127-3455
Phone: (858) 649-5100
Fax: (858) 649-5099
After Hours Phone: (858) 649-5100
Provider Gender: Male
License number: A82350
NPI: 1730104167
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Palomar Medical Center, Sharp Memorial Hospital, Ucsd Medical Ctr, Palomar Health Downtown Campus, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

MURPHY, KEVIN T

Provider ID: 262179
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
16918 DOVE CANYON RD STE 103
SAN DIEGO, CA 92127-3455
Phone: (858) 649-5100
Fax: (858) 649-5099
After Hours Phone: (858) 649-5100
Provider Gender: Male
License number: A82350
NPI: 1730104167
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Palomar Medical Center, Sharp Memorial Hospital, Ucsd Medical Ctr, Palomar Health Downtown Campus, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

PEJAVAR, SUNANDA M , MD

Provider ID: 221077
Board Certified Specialty: No

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D. Directorio de proveedores de atención especializada

COMMUNITY CARE IPA LLC
3075 HEALTH CENTER DR
SAN DIEGO, CA 92123-2773
Phone: (858) 939-5010

Fax:

After Hours Phone: (858)
939-5010

Provider Gender: Female

License number: A103733

NPI: 1912232513

Provider English Spoken: Yes

Provider Language(s) Spoken:

Kannada, Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital, Sharp Memorial

Hospital, Sharp Chula Vista Med
Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 19/100

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

ROSE, BRENT S

Provider ID: 125050

Board Certified Specialty: No

IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD

16918 DOVE CANYON RD STE

103

SAN DIEGO, CA 92127-3455

Phone: (858) 649-5100

Fax: (858) 649-5099

After Hours Phone: (858)

649-5100

Provider Gender: Male

License number: A142735

NPI: 1518250869

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Imperial Health Holdings Medical

Group-Sd

ROSE, BRENT S , MD

Provider ID: 256307

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

16918 DOVE CANYON RD STE

103

SAN DIEGO, CA 92127-3455

Phone: (858) 649-5100

Fax: (858) 649-5099

After Hours Phone: (858)

649-5100

Provider Gender: Male

License number: A142735

NPI: 1518250869

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/120

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Imperial Health Holdings Medical

Group-Sd

SANDHU, AJAY P , MD

Provider ID: 247978

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

16918 DOVE CANYON RD STE

103

SAN DIEGO, CA 92127-3455

Phone: (559) 447-4949

Fax: (559) 447-4925

After Hours Phone: (559)

447-4949

Provider Gender: Male

License number: A69947

NPI: 1881610137

Provider English Spoken: Yes

Provider Language(s) Spoken:

Hindi

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Imperial Health Holdings Medical

Group-Sd

SANDHU, AJAY P

Provider ID: 262196

Board Certified Specialty: No

IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

16918 DOVE CANYON RD STE 103
 SAN DIEGO, CA 92127-3455
 Phone: (559) 447-4949
 Fax: (559) 447-4925
 After Hours Phone: (559) 447-4949
 Provider Gender: Male
 License number: A69947
 NPI: 1881610137
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Hindi
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

SANGHVI, PARAG R

Provider ID: 206140
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 9730 SUMMERS RIDGE RD
 SAN DIEGO, CA 92121-3101
 Phone: (858) 549-7458
 Fax: (858) 578-1144
 After Hours Phone: (858) 549-7458
 Provider Gender: Male
 License number: A105184
 NPI: 1801005152
 Provider English Spoken: Yes

Provider Language(s) Spoken: Gujarati, Hindi, Spanish
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Childrens Hosp And Resrch Ctr At Oakland, Scripps Mercy Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd, Rady Childrens Health Network

SANGHVI, PARAG R , MD

Provider ID: 248043
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 16918 DOVE CANYON RD
 SAN DIEGO, CA 92127-3445
 Phone: (858) 309-6585
 Fax:
 After Hours Phone: (858) 309-6585
 Provider Gender: Male
 License number: A105184
 NPI: 1801005152
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Gujarati, Hindi, Spanish
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Childrens Hosp And Resrch Ctr At Oakland, Scripps Mercy Hospital

Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd, Rady Childrens Health Network

SANGHVI, PARAG R

Provider ID: 262323
 Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 16918 DOVE CANYON RD # 3
 SAN DIEGO, CA 92127-3445
 Phone: (559) 447-4949
 Fax: (559) 447-4925
 After Hours Phone: (559) 447-4949
 Provider Gender: Male
 License number: A105184
 NPI: 1801005152
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Gujarati, Hindi, Spanish
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Childrens Hosp And Resrch Ctr At Oakland, Scripps Mercy Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd, Rady Childrens Health Network

SANGHVI, PARAG R , MD

Provider ID: 270039

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
16918 DOVE CANYON RD STE 103

SAN DIEGO, CA 92127-3455

Phone: (858) 309-6585

Fax: (858) 309-6593

After Hours Phone: (858)

309-6585

Provider Gender: Male

License number: A105184

NPI: 1801005152

Provider English Spoken: Yes

Provider Language(s) Spoken:

Gujarati, Hindi, Spanish

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Ucsd Medical Ctr, Childrens

Hosp And Resrch Ctr At

Oakland, Scripps Mercy Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd, Rady Childrens Health Network

SANGHVI, PARAG R , MD

Provider ID: 270040

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9730 SUMMERS RIDGE RD
SAN DIEGO, CA 92121-3101

Phone: (858) 549-7400

Fax: (858) 578-1144

After Hours Phone: (858)

549-7400

Provider Gender: Male

License number: A105184

NPI: 1801005152

Provider English Spoken: Yes

Provider Language(s) Spoken:

Gujarati, Hindi, Spanish

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Ucsd Medical Ctr, Childrens

Hosp And Resrch Ctr At

Oakland, Scripps Mercy Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd, Rady Childrens Health Network

SHARABI, ANDREW B , MD

Provider ID: 257024

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
16918 DOVE CANYON RD STE 103

SAN DIEGO, CA 92127-3455

Phone: (858) 649-5100

Fax: (858) 649-5099

After Hours Phone: (858)
649-5100

Provider Gender: Male

License number: A136977

NPI: 1043531213

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 18/120

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

SHARABI, ANDREW B

Provider ID: 262164

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
16918 DOVE CANYON RD STE 103

SAN DIEGO, CA 92127-3455

Phone: (858) 649-5100

Fax: (858) 649-5099

After Hours Phone: (858)

649-5100

Provider Gender: Male

License number: A136977

NPI: 1043531213

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

SHIRAZI, REZA

Provider ID: 121532
Board Certified Specialty: No
GENESIS HEALTHCARE
PARTNERS PC
5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123-1338
Phone: (858) 505-4100
Fax:
After Hours Phone: (858)
505-4100
Provider Gender: Male
License number: A95800
NPI: 1336175272
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Persian, Spanish
Cultural Competency: No
Hospital Affiliation: Pomerado
Hospital, Scripps Memorial
Hospital Encinitas, Scripps Mercy
Hospital Chula Vista, Scripps
Memorial Hospital, Scripps
Mercy Hospital, Alvarado
Hospital Llc, Scripps Green
Hospital, Sharp Memorial
Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

SHIRAZI, REZA

Provider ID: 257167
Board Certified Specialty: No
HEALTH EXCEL IPA INC
5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123-1338
Phone: (858) 505-4100
Fax: (858) 429-7939
After Hours Phone: (858)
505-4100
Provider Gender: Male
License number: A95800
NPI: 1336175272
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Persian, Spanish
Cultural Competency: No
Hospital Affiliation: Palomar
Health Downtown Campus,
Pomerado Hospital, Scripps
Memorial Hospital Encinitas,
Scripps Mercy Hospital Chula
Vista, Scripps Memorial Hospital,
Scripps Mercy Hospital, Alvarado
Hospital Llc, Scripps Green
Hospital, Sharp Memorial
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

SHIRAZI, REZA

Provider ID: 257168
Board Certified Specialty: No
HEALTH EXCEL IPA INC
3366 5TH AVE
SAN DIEGO, CA 92103-5713
Phone: (619) 230-0400
Fax: (858) 429-7936
After Hours Phone: (619)
230-0400
Provider Gender: Male
License number: A95800
NPI: 1336175272
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Persian, Spanish
Cultural Competency: No
Hospital Affiliation: Palomar
Health Downtown Campus,
Pomerado Hospital, Scripps
Memorial Hospital Encinitas,
Scripps Mercy Hospital Chula
Vista, Scripps Memorial Hospital,
Scripps Mercy Hospital, Alvarado
Hospital Llc, Scripps Green
Hospital, Sharp Memorial
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

SHIRAZI, REZA, MD

Provider ID: 269249
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
5395 RUFFIN RD STE 103

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

SAN DIEGO, CA 92123-1338
Phone: (858) 505-4100
Fax: (858) 429-7939
After Hours Phone: (858) 505-4100
Provider Gender: Male
License number: A95800
NPI: 1336175272
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Persian, Spanish
Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus, Pomerado Hospital, Scripps Memorial Hospital Encinitas, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Scripps Mercy Hospital, Alvarado Hospital Llc, Scripps Green Hospital, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

SHIRAZI, REZA, MD

Provider ID: 269250
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
3366 5TH AVE
SAN DIEGO, CA 92103-5713
Phone: (619) 230-0400
Fax: (858) 429-7936
After Hours Phone: (619) 230-0400
Provider Gender: Male

License number: A95800
NPI: 1336175272
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Persian, Spanish
Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus, Pomerado Hospital, Scripps Memorial Hospital Encinitas, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Scripps Mercy Hospital, Alvarado Hospital Llc, Scripps Green Hospital, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

SHIRAZI, REZA

Provider ID: 66092
Board Certified Specialty: No
GENESIS HEALTHCARE PARTNERS PC
3366 5TH AVE
SAN DIEGO, CA 92103-5713
Phone: (619) 230-0400
Fax: (858) 429-7936
After Hours Phone: (619) 230-0400
Provider Gender: Male
License number: A95800
NPI: 1336175272
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Persian, Spanish

Cultural Competency: No
Hospital Affiliation: Pomerado Hospital, Scripps Memorial Hospital Encinitas, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Scripps Mercy Hospital, Alvarado Hospital Llc, Scripps Green Hospital, Sharp Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

SIMPSON, DANIEL R , MD

Provider ID: 256193
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
16918 DOVE CANYON RD STE 103
SAN DIEGO, CA 92127-3455
Phone: (858) 649-5100
Fax: (858) 649-5099
After Hours Phone: (858) 649-5100
Provider Gender: Male
License number: A118377
NPI: 1689974883
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 16/122

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

SIMPSON, DANIEL R

Provider ID: 262134

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD

16918 DOVE CANYON RD STE
103

SAN DIEGO, CA 92127-3455

Phone: (858) 649-5100

Fax: (858) 649-5099

After Hours Phone: (858)
649-5100

Provider Gender: Male

License number: A118377

NPI: 1689974883

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

UHL, BARRY M , MD

Provider ID: 243528

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

3075 HEALTH CENTER DR
SAN DIEGO, CA 92123-2773

Phone: (858) 939-5010

Fax: (858) 939-5021

After Hours Phone: (858)
939-5010

Provider Gender: Male

License number: A71969

NPI: 1811936693

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Palomar
Health Downtown Campus,
Palomar Medical Center, Sharp
Chula Vista Med Ctr, Sharp
Memorial Hospital, Grossmont
Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 19/100

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

VAKILIAN, SIAVOSH

Provider ID: 279235

Board Certified Specialty: Yes
HEALTH EXCEL IPA INC

3366 5TH AVE

SAN DIEGO, CA 92103-5713

Phone: (619) 230-0400

Fax: (858) 429-7936

After Hours Phone: (619)
230-0400

Provider Gender: Male

License number: A133482

NPI: 1427456151

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Pioneers
Memorial Hospital, El Centro
Regional Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

VAKILIAN, SIAVOSH

Provider ID: 279240

Board Certified Specialty: No
HEALTH EXCEL IPA INC

5395 RUFFIN RD STE 103

SAN DIEGO, CA 92123-1338

Phone: (858) 505-4100

Fax: (858) 429-7939

After Hours Phone: (858)
505-4100

Provider Gender: Male

License number: A133482

NPI: 1427456151

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Pioneers
Memorial Hospital, El Centro
Regional Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

VOLPP, PAUL B , MD

Provider ID: 221105

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

3075 HEALTH CENTER DR
SAN DIEGO, CA 92123-2773

Phone: (858) 939-5010

Fax:

After Hours Phone: (858)

939-5010

Provider Gender: Male

License number: A86307

NPI: 1225186232

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Sharp
Memorial Hospital, Palomar

Health Downtown Campus,
Sharp Chula Vista Med Ctr,
Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 19/100

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

WEINSTEIN, GEOFFREY D , MD

Provider ID: 220039

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

3075 HEALTH CENTER DR
SAN DIEGO, CA 92123-2773

Phone: (858) 939-5010

Fax: (858) 939-5021

After Hours Phone: (858)

939-5010

Provider Gender: Male

License number: A54109

NPI: 1841233947

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont
Hospital, Sharp Memorial

Hospital, Palomar Health
Downtown Campus, Sharp Chula
Vista Med Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 19/100

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

ZENTNER, PHILLIP G , MD

Provider ID: 221093

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

3075 HEALTH CENTER DR
SAN DIEGO, CA 92123-2773

Phone: (858) 969-5010

Fax:

After Hours Phone: (858)

969-5010

Provider Gender: Male

License number: G83516

NPI: 1063452415

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Sharp
Memorial Hospital, Palomar

Health Downtown Campus,
Palomar Medical Center,

Grossmont Hospital, Sharp
Chula Vista Med Ctr, Mercy

Medical Center Redding

Medi-Cal Open Panel: Yes

Min/Max Age: 19/100

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

RADIOLOGY DIAGNOSTIC

X-RAY

AGANOVIC, LEJLA

Provider ID: 114044

Board Certified Specialty: No
UCSD MEDICAL GROUP

330 LEWIS ST # 202

SAN DIEGO, CA 92103-2108

Phone: (619) 471-9240

Fax:

After Hours Phone: (619)

471-9240

Provider Gender: Female

License number: A101098

NPI: 1003807652

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>	<p><i>Phone:</i> (619) 299-2299 <i>Fax:</i> (619) 229-2288 <i>After Hours Phone:</i> (619) 299-2299 <i>Provider Gender:</i> Male <i>License number:</i> A69840 <i>NPI:</i> 1215982970 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc</p>	<p><i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc</p>
<p>ALLEN, DERRICK R <i>Provider ID:</i> 115873 <i>Board Certified Specialty:</i> No IHS RADIOLOGY MEDICAL GROUP INC 150 W WASHINGTON ST SAN DIEGO, CA 92103-2005 <i>Phone:</i> (858) 658-6500 <i>Fax:</i> (866) 558-4329 <i>After Hours Phone:</i> (858) 658-6500 <i>Provider Gender:</i> Male <i>License number:</i> A69840 <i>NPI:</i> 1215982970 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc</p>	<p>ALLEN, DERRICK R , MD <i>Provider ID:</i> 268355 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 4077 5TH AVE SAN DIEGO, CA 92103-2105 <i>Phone:</i> (888) 685-4016 <i>Fax:</i> (866) 558-4329 <i>After Hours Phone:</i> (888) 685-4016 <i>Provider Gender:</i> Male <i>License number:</i> A69840 <i>NPI:</i> 1215982970 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc</p>	<p>ALLEN, DERRICK R , MD <i>Provider ID:</i> 268357 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 6386 ALVARADO CT STE 121 SAN DIEGO, CA 92120-4906</p>
<p>ALLEN, DERRICK R <i>Provider ID:</i> 125982 <i>Board Certified Specialty:</i> No IHS RADIOLOGY MEDICAL GROUP INC 6386 ALVARADO CT STE 121 SAN DIEGO, CA 92120-4906</p>	<p>ALLEN, DERRICK R , MD <i>Provider ID:</i> 268354 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 1809 NATIONAL AVE # 2104 SAN DIEGO, CA 92113-2113 <i>Phone:</i> (858) 658-6500 <i>Fax:</i> (866) 558-4329 <i>After Hours Phone:</i> (858) 658-6500 <i>Provider Gender:</i> Male <i>License number:</i> A69840 <i>NPI:</i> 1215982970 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999</p>	<p>ALLEN, DERRICK R , MD <i>Provider ID:</i> 268357 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 6386 ALVARADO CT STE 121 SAN DIEGO, CA 92120-4906</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 229-2299
Fax: (866) 558-4329
After Hours Phone: (619) 229-2299
Provider Gender: Male
License number: A69840
NPI: 1215982970
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

ALQAHTANI, EMAN N
Provider ID: 126409
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: A138391
NPI: 1104169564
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None

American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ANDERSON, GREGORY S
Provider ID: 115874
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
150 W WASHINGTON ST
SAN DIEGO, CA 92103-2005
Phone: (619) 295-9729
Fax:
After Hours Phone: (619) 295-9729
Provider Gender: Male
License number: A90018
NPI: 1841467099
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ANDERSON, GREGORY S
Provider ID: 125981
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL

GROUP INC
6386 ALVARADO CT STE 121
SAN DIEGO, CA 92120-4906
Phone: (619) 229-2299
Fax:
After Hours Phone: (619) 229-2299
Provider Gender: Male
License number: A90018
NPI: 1841467099
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ARYAFAR, HAMED
Provider ID: 63784
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A99187
NPI: 1093963605
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi
Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Ucsd Medical Ctr, Sharp Memorial Hospital, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ARYAFAR, HAMED

Provider ID: 64269
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240
Fax:
After Hours Phone: (619) 471-9240
Provider Gender: Male
License number: A99187
NPI: 1093963605
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Sharp Memorial Hospital, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA:
BAHADOR, FARSHAD M
Provider ID: 104318
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR # I505
SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619) 543-2218
Provider Gender: Male
License number: A129414
NPI: 1730316928

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Scripps Green Hospital, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BAHADOR, FARSHAD M

Provider ID: 104323
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108

Phone: (619) 471-9240
Fax:
After Hours Phone: (619) 471-9240
Provider Gender: Male
License number: A129414
NPI: 1730316928
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Scripps Green Hospital, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BAKER, LORI L

Provider ID: 115588
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
150 W WASHINGTON ST
SAN DIEGO, CA 92103-2005
Phone: (619) 295-9729
Fax: (619) 295-2549
After Hours Phone: (619) 295-9729
Provider Gender: Female
License number: G62517
NPI: 1063465219
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Medical Ctr At Ucsf, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BAKER, LORI L
Provider ID: 125991
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
6386 ALVARADO CT STE 121
SAN DIEGO, CA 92120-4906
Phone: (619) 229-2299
Fax: (619) 229-2288
After Hours Phone: (619) 229-2299
Provider Gender: Female
License number: G62517
NPI: 1063465219
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Medical Ctr At Ucsf, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA:
BERGMAN, ERIK W
Provider ID: 125001
Board Certified Specialty: No
UCSD RADIOLOGY AT LA JOLLA
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619) 543-2218
Provider Gender: Male
License number: C153284
NPI: 1043291073
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BERGMAN, ERIK W
Provider ID: 125005
Board Certified Specialty: No
UCSD RADIOLOGY AT LA JOLLA
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (619) 471-9420
Fax:
After Hours Phone: (619) 471-9420

Provider Gender: Male
License number: C153284
NPI: 1043291073
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BORSO, MAYA G
Provider ID: 115876
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
150 W WASHINGTON ST
SAN DIEGO, CA 92103-2005
Phone: (619) 295-9729
Fax: (619) 295-2549
After Hours Phone: (619) 295-9729
Provider Gender: Female
License number: A97134
NPI: 1548473507
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Green Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BORSO, MAYA G

Provider ID: 126000
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC
6386 ALVARADO CT STE 121
SAN DIEGO, CA 92120-4906
Phone: (619) 229-2299
Fax: (619) 229-2288
After Hours Phone: (619)
229-2299
Provider Gender: Female
License number: A97134
NPI: 1548473507
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Green Hospital, Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BRADLEY, WILLIAM R

Provider ID: 271433
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A167142
NPI: 1780066803
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr, Scripps Green
Hospital, Scripps Mercy Hospital,
Scripps Memorial Hospital,
Scripps Mercy Hospital Chula
Vista, Scripps Memorial Hospital
Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BRADLEY, WILLIAM R

Provider ID: 271435
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A167142
NPI: 1780066803
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr, Scripps Green
Hospital, Scripps Mercy Hospital,
Scripps Memorial Hospital,
Scripps Mercy Hospital Chula
Vista, Scripps Memorial Hospital
Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BROUHA, SHARON S

Provider ID: 63823
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Female
License number: A91973
NPI: 1356554323
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Email:
Medical Group(s):
IPA:

BROUHA, SHARON S
Provider ID: 64278
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A91973
NPI: 1356554323
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BUCKLEY, DAVID W
Provider ID: 243260
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
150 W WASHINGTON ST
SAN DIEGO, CA 92103-2005
Phone: (858) 658-6500
Fax: (866) 558-4329
After Hours Phone: (858)
658-6500
Provider Gender: Male

License number: G57383
NPI: 1982657060
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

BUCKLEY, DAVID W
Provider ID: 243261
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
3939 RUFFIN RD STE 102
SAN DIEGO, CA 92123-1804
Phone: (858) 658-6500
Fax: (866) 558-4329
After Hours Phone: (858)
658-6500
Provider Gender: Male
License number: G57383
NPI: 1982657060
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

BUCKLEY, DAVID W
Provider ID: 243266
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
6386 ALVARADO CT STE 121
SAN DIEGO, CA 92120-4906
Phone: (619) 229-2299
Fax: (866) 558-4329
After Hours Phone: (619)
229-2299
Provider Gender: Male
License number: G57383
NPI: 1982657060
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

BUCKLEY, DAVID W
Provider ID: 243268
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
550 WASHINGTON ST STE 200
SAN DIEGO, CA 92103-2243

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 260-7225
Fax:
After Hours Phone: (619)
260-7225
Provider Gender: Male
License number: G57383
NPI: 1982657060
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

BUI, KEVIN T

Provider ID: 280518
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A134576
NPI: 1578906186
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BUI, KEVIN T

Provider ID: 280520
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A134576
NPI: 1578906186
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CASOLA, GIOVANNA

Provider ID: 63835
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR

SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Female
License number: G51575
NPI: 1790721256
Provider English Spoken: Yes
Provider Language(s) Spoken:
French, Italian
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton, Saddleback Memorial
Med Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CASOLA, GIOVANNA

Provider ID: 64281
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: G51575
NPI: 1790721256
Provider English Spoken: Yes
Provider Language(s) Spoken:
French, Italian
Cultural Competency: No
Hospital Affiliation: Ucsd Medical

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Ctr, Ucsd La Jolla John Sally
Thornton, Saddleback Memorial
Med Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CHANG, ERIC Y
Provider ID: 63840
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Male
License number: A97139
NPI: 1376756353
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Green Hospital, Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CHANG, ERIC Y
Provider ID: 64283
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240
Fax:
After Hours Phone: (619)
471-9240
Provider Gender: Male
License number: A97139
NPI: 1376756353
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Green Hospital, Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CHEN, JAMES Y
Provider ID: 63844
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR # 1505
SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619)
543-2218
Provider Gender: Male
License number: A108635
NPI: 1427250588

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CHEN, JAMES Y
Provider ID: 64284
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240
Fax:
After Hours Phone: (619)
471-9240
Provider Gender: Male
License number: A108635
NPI: 1427250588
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<i>IPA:</i>	<i>NPI:</i> 1437377710	<i>Website:</i>
CHEN, KAREN C	<i>Provider English Spoken:</i> Yes	<i>Email:</i>
<i>Provider ID:</i> 63846	<i>Provider Language(s) Spoken:</i>	<i>Medical Group(s):</i>
<i>Board Certified Specialty:</i> No	<i>Cultural Competency:</i> No	<i>IPA:</i> Community Care Ipa Llc
UCSD MEDICAL GROUP	<i>Hospital Affiliation:</i> Scripps	
200 W ARBOR DR # 1505	Green Hospital, Ucsd Medical	
SAN DIEGO, CA 92103-1911	Ctr, Ucsd La Jolla John Sally	
<i>Phone:</i> (800) 926-8273	Thornton	
<i>Fax:</i>	<i>Medi-Cal Open Panel:</i> No	
<i>After Hours Phone:</i> (800)	<i>Min/Max Age:</i> None	
926-8273	<i>American Sign Language (ASL):</i>	
<i>Provider Gender:</i> Female	No	
<i>License number:</i> A110719	<i>Accessibility:</i>	
<i>NPI:</i> 1437377710	<i>Hours:</i> M-SA 9AM-5PM	
<i>Provider English Spoken:</i> Yes	<i>Website:</i>	
<i>Provider Language(s) Spoken:</i>	<i>Email:</i>	
<i>Cultural Competency:</i> No	<i>Medical Group(s):</i>	
<i>Hospital Affiliation:</i> Scripps	<i>IPA:</i>	
Green Hospital, Ucsd Medical		
Ctr, Ucsd La Jolla John Sally	CHOU, ERIC T	
Thornton	<i>Provider ID:</i> 116991	
<i>Medi-Cal Open Panel:</i> No	<i>Board Certified Specialty:</i> No	
<i>Min/Max Age:</i> None	IHS RADIOLOGY MEDICAL	
<i>American Sign Language (ASL):</i>	GROUP INC	
No	150 W WASHINGTON ST	
<i>Accessibility:</i> W	SAN DIEGO, CA 92103-2005	
<i>Hours:</i> M-SA 9AM-5PM	<i>Phone:</i> (619) 295-9729	
<i>Website:</i>	<i>Fax:</i> (619) 295-2549	
<i>Email:</i>	<i>After Hours Phone:</i> (619)	
<i>Medical Group(s):</i>	295-9729	
<i>IPA:</i>	<i>Provider Gender:</i> Male	
	<i>License number:</i> A96095	
	<i>NPI:</i> 1689627838	
	<i>Provider English Spoken:</i> Yes	
	<i>Provider Language(s) Spoken:</i>	
	<i>Cultural Competency:</i> No	
	<i>Hospital Affiliation:</i> Scripps Mercy	
	Hospital, Scripps Mercy Hospital	
	Chula Vista	
	<i>Medi-Cal Open Panel:</i> No	
	<i>Min/Max Age:</i> None	
	<i>American Sign Language (ASL):</i>	
	No	
	<i>Accessibility:</i> W	
	<i>Hours:</i> M-SA 9AM-5PM	
	<i>Website:</i>	
	<i>Email:</i>	
	<i>Medical Group(s):</i>	
	<i>IPA:</i> Community Care Ipa Llc	
CHEN, KAREN C	CHOU, ERIC T	CHUNG, CHRISTINE B
<i>Provider ID:</i> 64285	<i>Provider ID:</i> 116991	<i>Provider ID:</i> 63854
<i>Board Certified Specialty:</i> No	<i>Board Certified Specialty:</i> No	<i>Board Certified Specialty:</i> No
UCSD MEDICAL GROUP	IHS RADIOLOGY MEDICAL	UCSD MEDICAL GROUP
330 LEWIS ST # 202	GROUP INC	200 W ARBOR DR # 1505
SAN DIEGO, CA 92103-2108	150 W WASHINGTON ST	SAN DIEGO, CA 92103-1911
<i>Phone:</i> (800) 926-8273	SAN DIEGO, CA 92103-2005	
<i>Fax:</i>	<i>Phone:</i> (619) 295-9729	
<i>After Hours Phone:</i> (800)	<i>Fax:</i> (619) 295-2549	
926-8273	<i>After Hours Phone:</i> (619)	
<i>Provider Gender:</i> Female	295-9729	
<i>License number:</i> A110719	<i>Provider Gender:</i> Male	
	<i>License number:</i> A96095	
	<i>NPI:</i> 1689627838	
	<i>Provider English Spoken:</i> Yes	
	<i>Provider Language(s) Spoken:</i>	
	<i>Cultural Competency:</i> No	
	<i>Hospital Affiliation:</i> Scripps Mercy	
	Hospital, Scripps Mercy Hospital	
	Chula Vista	
	<i>Medi-Cal Open Panel:</i> No	
	<i>Min/Max Age:</i> None	
	<i>American Sign Language (ASL):</i>	
	No	
	<i>Accessibility:</i> W	
	<i>Hours:</i> M-SA 9AM-5PM	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<i>Phone:</i> (800) 926-8273 <i>Fax:</i> <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female <i>License number:</i> A65414 <i>NPI:</i> 1528033560 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Green Hospital, Scripps Memorial Hospital, Scripps Mercy Hospital, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>	<i>Hospital Affiliation:</i> Scripps Memorial Hospital, Scripps Mercy Hospital, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Scripps Green Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>	Bay, Loma Linda University Med Ctr Murrieta <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc
CHUNG, CHRISTINE B <i>Provider ID:</i> 64288 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 330 LEWIS ST # 202 SAN DIEGO, CA 92103-2108 <i>Phone:</i> (619) 471-9240 <i>Fax:</i> (619) 471-9245 <i>After Hours Phone:</i> (619) 471-9240 <i>Provider Gender:</i> Female <i>License number:</i> A65414 <i>NPI:</i> 1528033560 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No	COOPER, JAMES A <i>Provider ID:</i> 115589 <i>Board Certified Specialty:</i> No IHS RADIOLOGY MEDICAL GROUP INC 150 W WASHINGTON ST SAN DIEGO, CA 92103-2005 <i>Phone:</i> (619) 295-9729 <i>Fax:</i> (619) 295-2549 <i>After Hours Phone:</i> (619) 295-9729 <i>Provider Gender:</i> Male <i>License number:</i> A62473 <i>NPI:</i> 1497708622 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Pomerado Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, East Los Angeles Doctors Hsp, Memorial Hosp Of Gardena Inc, Riverside Community Hosp, Palmdale Regional Medical Center, Barstow Community Hospital, Kindred Hospital South	COOPER, JAMES A <i>Provider ID:</i> 126039 <i>Board Certified Specialty:</i> No IHS RADIOLOGY MEDICAL GROUP INC 6386 ALVARADO CT STE 121 SAN DIEGO, CA 92120-4906 <i>Phone:</i> (619) 229-2299 <i>Fax:</i> (619) 229-2288 <i>After Hours Phone:</i> (619) 229-2299 <i>Provider Gender:</i> Male <i>License number:</i> A62473 <i>NPI:</i> 1497708622 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Pomerado Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, East Los Angeles Doctors Hsp, Memorial Hosp Of Gardena Inc, Riverside Community Hosp, Palmdale Regional Medical Center, Barstow Community Hospital, Kindred Hospital South Bay, Loma Linda University Med Ctr Murrieta <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

DE GUZMAN, JADE Q

Provider ID: 63873
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR # I505
SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619)
543-2218
Provider Gender: Female
License number: A102678
NPI: 1801089065
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton, Ronald Reagan Ucla
Med Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

DE GUZMAN, JADE Q

Provider ID: 64289
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108

Phone: (619) 471-9240
Fax:
After Hours Phone: (619)
471-9240
Provider Gender: Female
License number: A102678
NPI: 1801089065
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton, Ronald Reagan Ucla
Med Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

DOEMENY, JOHN M

Provider ID: 115877
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC
150 W WASHINGTON ST
SAN DIEGO, CA 92103-2005
Phone: (619) 295-9729
Fax: (619) 295-2549
After Hours Phone: (619)
295-9729
Provider Gender: Male
License number: G50925
NPI: 1841243912
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

DOEMENY, JOHN M

Provider ID: 126046
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC
6386 ALVARADO CT STE 121
SAN DIEGO, CA 92120-4906
Phone: (619) 229-2299
Fax: (619) 229-2288
After Hours Phone: (619)
229-2299
Provider Gender: Male
License number: G50925
NPI: 1841243912
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

DORROS, STEPHEN M

Provider ID: 63880
Board Certified Specialty: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

UCSD MEDICAL GROUP
 200 W ARBOR DR # I505
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-2218
 Fax:
 After Hours Phone: (619)
 543-2218
 Provider Gender: Male
 License number: G29061
 NPI: 1942319959
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Tri City
 Medical Ctr, Ucsd Medical Ctr,
 Ucsd La Jolla John Sally
 Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

DORROS, STEPHEN M
 Provider ID: 64292
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
 Phone: (619) 471-9240
 Fax:
 After Hours Phone: (619)
 471-9240
 Provider Gender: Male
 License number: G29061
 NPI: 1942319959
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish

Cultural Competency: No
 Hospital Affiliation: Tri City
 Medical Ctr, Ucsd Medical Ctr,
 Ucsd La Jolla John Sally
 Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

DWEK, JERRY R
 Provider ID: 63886
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR # I505
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-2218
 Fax:
 After Hours Phone: (619)
 543-2218
 Provider Gender: Male
 License number: G86073
 NPI: 1558335695
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 French, Spanish
 Cultural Competency: No
 Hospital Affiliation: Tri City
 Medical Ctr, Ucsd Medical Ctr,
 Pomerado Hospital, Ucsd La
 Jolla John Sally Thornton, Sharp
 Coronado Hosp And Healthcare
 Ctr, Rady Childrens Hospital San
 Diego, Palomar Medical Center,
 Sharp Memorial Hospital, Sharp
 Chula Vista Med Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):

No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:
DWEK, JERRY R
 Provider ID: 64295
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
 Phone: (619) 471-9240
 Fax:
 After Hours Phone: (619)
 471-9240
 Provider Gender: Male
 License number: G86073
 NPI: 1558335695
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 French, Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp
 Memorial Hospital, Sharp Chula
 Vista Med Ctr, Tri City Medical
 Ctr, Ucsd Medical Ctr, Pomerado
 Hospital, Ucsd La Jolla John
 Sally Thornton, Sharp Coronado
 Hosp And Healthcare Ctr, Rady
 Childrens Hospital San Diego,
 Palomar Medical Center
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

EGHTEDARI, MOHAMMAD

Provider ID: 92412
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A114372
NPI: 1740548734
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

EVORA, DARRYL K

Provider ID: 63896
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR # 1505
SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619)
543-2218
Provider Gender: Male
License number: G76577
NPI: 1790751188
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Ucsd Medical
Ctr, Sharp Chula Vista Med Ctr,
Sharp Coronado Hosp And
Healthcare Ctr, Ucsd La Jolla
John Sally Thornton, Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

EVORA, DARRYL K

Provider ID: 64298
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240
Fax:
After Hours Phone: (619)
471-9240
Provider Gender: Male
License number: G76577
NPI: 1790751188
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Ucsd Medical
Ctr, Sharp Chula Vista Med Ctr,
Sharp Coronado Hosp And
Healthcare Ctr, Ucsd La Jolla
John Sally Thornton, Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None

American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FARID, NIKDOKHT

Provider ID: 63901
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR # 1505
SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619)
543-2218
Provider Gender: Female
License number: A94195
NPI: 1205151172
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FARID, NIKDOKHT

Provider ID: 64301
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108

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D. Directorio de proveedores de atención especializada

Phone: (619) 471-9240

Fax:

After Hours Phone: (619)
471-9240

Provider Gender: Female

License number: A94195

NPI: 1205151172

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

FARID, NIKDOKHT

Provider ID: 91912

Board Certified Specialty: No

UCSD RADIOLOGY AT LA

JOLLA

8929 UNIVERSITY CENTER LN

STE 101

SAN DIEGO, CA 92122-1007

Phone: (858) 457-4227

Fax: (858) 457-4227

After Hours Phone: (858)

457-4227

Provider Gender: Female

License number: A94195

NPI: 1205151172

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

FIROOZANIA, NILOFAR

Provider ID: 115590

Board Certified Specialty: No

IHS RADIOLOGY MEDICAL

GROUP INC

150 W WASHINGTON ST

SAN DIEGO, CA 92103-2005

Phone: (619) 295-9729

Fax: (619) 295-2549

After Hours Phone: (619)

295-9729

Provider Gender: Female

License number: A109806

NPI: 1962521419

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Alvarado

Hospital Llc, Redlands

Community Hosp, Barstow

Community Hospital, Kindred

Hospital Riverside, Victor Valley

Global Med Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

FIROOZANIA, NILOFAR

Provider ID: 126168

Board Certified Specialty: No

IHS RADIOLOGY MEDICAL

GROUP INC

6386 ALVARADO CT STE 121

SAN DIEGO, CA 92120-4906

Phone: (619) 229-2299

Fax:

After Hours Phone: (619)

229-2299

Provider Gender: Female

License number: A109806

NPI: 1962521419

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Alvarado

Hospital Llc, Redlands

Community Hosp, Barstow

Community Hospital, Kindred

Hospital Riverside, Victor Valley

Global Med Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

FLISZAR, EVELYNE

Provider ID: 63907

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222

Fax:

After Hours Phone: (619)

543-6222

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Female
License number: A60712
NPI: 1164449955
Provider English Spoken: Yes
Provider Language(s) Spoken: French
Cultural Competency: No
Hospital Affiliation: Scripps Green Hospital, Scripps Memorial Hospital, Scripps Mercy Hospital, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FLISZAR, EVELYNE

Provider ID: 64303
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A60712
NPI: 1164449955
Provider English Spoken: Yes
Provider Language(s) Spoken: French
Cultural Competency: No
Hospital Affiliation: Scripps Green Hospital, Scripps

Memorial Hospital, Scripps Mercy Hospital, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FLISZAR, EVELYNE

Provider ID: 97463
Board Certified Specialty: No
 UCSD RADIOLOGY AT LA JOLLA
 8929 UNIVERSITY CENTER LN STE 101
 SAN DIEGO, CA 92122-1007
Phone: (858) 457-4227
Fax:
After Hours Phone: (858) 457-4227
Provider Gender: Female
License number: A60712
NPI: 1164449955
Provider English Spoken: Yes
Provider Language(s) Spoken: French
Cultural Competency: No
Hospital Affiliation: Scripps Green Hospital, Scripps Memorial Hospital, Scripps Mercy Hospital, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: No

Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FOWLER, KATHRYN J

Provider ID: 201289
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: C154877
NPI: 1255457941
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Scripps Green Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>FOWLER, KATHRYN J <i>Provider ID:</i> 201291 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 330 LEWIS ST # 202 SAN DIEGO, CA 92103-2108 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female <i>License number:</i> C154877 <i>NPI:</i> 1255457941 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Scripps Green Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group</p>	<p><i>Phone:</i> (619) 295-9729 <i>Fax:</i> <i>After Hours Phone:</i> (619) 295-9729 <i>Provider Gender:</i> Male <i>License number:</i> A118792 <i>NPI:</i> 1114246329 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Santa Monica Ucla Med Ctr, Ronald Reagan Ucla Med Ctr, Alvarado Hospital Llc <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc</p> <p>FRANKE, MARK A <i>Provider ID:</i> 126051 <i>Board Certified Specialty:</i> No IHS RADIOLOGY MEDICAL GROUP INC 6386 ALVARADO CT STE 121 SAN DIEGO, CA 92120-4906 <i>Phone:</i> (619) 229-2299 <i>Fax:</i> <i>After Hours Phone:</i> (619) 229-2299 <i>Provider Gender:</i> Male <i>License number:</i> A118792 <i>NPI:</i> 1114246329 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Santa Monica Ucla Med Ctr, Ronald Reagan Ucla Med Ctr, Alvarado Hospital</p>	<p>Llc <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc</p> <p>FRIEND, CHRISTOPHER J <i>Provider ID:</i> 120846 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 <i>Phone:</i> (619) 543-6222 <i>Fax:</i> <i>After Hours Phone:</i> (619) 543-6222 <i>Provider Gender:</i> Male <i>License number:</i> C141231 <i>NPI:</i> 1861491516 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p> <p>FRIEND, CHRISTOPHER J <i>Provider ID:</i> 120850 <i>Board Certified Specialty:</i> No</p>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240
Fax:
After Hours Phone: (619)
471-9240
Provider Gender: Male
License number: C141231
NPI: 1861491516
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FRIEND, CHRISTOPHER J
Provider ID: 120851
Board Certified Specialty: No
UCSD RADIOLOGY AT LA
JOLLA
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619)
543-2218
Provider Gender: Male
License number: C141231
NPI: 1861491516
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FRIEND, CHRISTOPHER J
Provider ID: 120857
Board Certified Specialty: No
UCSD RADIOLOGY AT LA
JOLLA
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240
Fax:
After Hours Phone: (619)
471-9240
Provider Gender: Male
License number: C141231
NPI: 1861491516
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GENTILI, AMILCARE

Provider ID: 63914
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR # 1505
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A44208
NPI: 1922086594
Provider English Spoken: Yes
Provider Language(s) Spoken:
Italian
Cultural Competency: No
Hospital Affiliation: Scripps
Green Hospital, Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton, Scripps Memorial
Hospital, Scripps Mercy Hospital,
Scripps Mercy Hospital Chula
Vista, Scripps Memorial Hospital
Encinitas
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GENTILI, AMILCARE
Provider ID: 64307
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Male
License number: A44208
NPI: 1922086594
Provider English Spoken: Yes
Provider Language(s) Spoken: Italian
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Scripps Green Hospital, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GRISSOM, MURRAY J

Provider ID: 271567
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A147782
NPI: 1720465396
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

GRISSOM, MURRAY J

Provider ID: 271569
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A147782
NPI: 1720465396
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HAHN, MICHAEL E

Provider ID: 98501
Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR # 1505
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A119409
NPI: 1356573992
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HAHN, MICHAEL E

Provider ID: 98502
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A119409
NPI: 1356573992
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HANDWERKER, JASON

Provider ID: 98754
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR # I505
SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619)
543-2218
Provider Gender: Male
License number: A114704
NPI: 1316166630
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: University Of
California Irvine Med Ctr, Ucsd
Medical Ctr, Ucsd La Jolla John
Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HANDWERKER, JASON

Provider ID: 98757
Board Certified Specialty: No

UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240
Fax:
After Hours Phone: (619)
471-9240
Provider Gender: Male
License number: A114704
NPI: 1316166630
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: University Of
California Irvine Med Ctr, Ucsd
Medical Ctr, Ucsd La Jolla John
Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HANSEN, ROBERT B

Provider ID: 110176
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR # I505
SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619)
543-2218
Provider Gender: Male
License number: A97152
NPI: 1972643906
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: George L

Mee Memorial Hosp, Ucsd
Medical Ctr, Ucsd La Jolla John
Sally Thornton, Dameron
Hospital Assoc, St Josephs Med
Center Of Stockton, Memorial
Hospital Med Ctr, John C
Fremont Hospital, Mountains
Community Hosp, Lodi Memorial
Hospital, Oak Valley Dist Hosp
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HARMAN, SCOTT A

Provider ID: 115591
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC
150 W WASHINGTON ST
SAN DIEGO, CA 92103-2005
Phone: (858) 658-6500
Fax: (619) 295-2549
After Hours Phone: (858)
658-6500
Provider Gender: Male
License number: G57284
NPI: 1124071311
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado
Hospital Llc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Website:

Email:

Medical Group(s):

IPA:

HARMAN, SCOTT A

Provider ID: 126064

Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC

6386 ALVARADO CT STE 121
SAN DIEGO, CA 92120-4906

Phone: (619) 229-2299

Fax: (619) 229-2288

After Hours Phone: (619)
229-2299

Provider Gender: Male

License number: G57284

NPI: 1124071311

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Alvarado
Hospital Llc

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

HAUSCHILDT, JOHN P

Provider ID: 63947

Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222

Fax:

After Hours Phone: (619)

543-6222

Provider Gender: Male

License number: G76429

NPI: 1922072099

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally

Thornton, Rady Childrens

Hospital San Diego, Sharp

Memorial Hospital, Sharp Chula

Vista Med Ctr, Sharp Coronado

Hosp And Healthcare Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

HAUSCHILDT, JOHN P

Provider ID: 64318

Board Certified Specialty: No
UCSD MEDICAL GROUP

330 LEWIS ST # 202

SAN DIEGO, CA 92103-2108

Phone: (619) 471-9240

Fax:

After Hours Phone: (619)

471-9240

Provider Gender: Male

License number: G76429

NPI: 1922072099

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally

Thornton, Rady Childrens

Hospital San Diego, Sharp

Memorial Hospital, Sharp Chula

Vista Med Ctr, Sharp Coronado

Hosp And Healthcare Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

HERNANDEZ, NATHANIEL D

Provider ID: 110164

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR # 1505

SAN DIEGO, CA 92103-1911

Phone: (619) 543-2218

Fax:

After Hours Phone: (619)

543-2218

Provider Gender: Male

License number: A141384

NPI: 1427377019

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

HILLER, LUCAS P

Provider ID: 63957

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR # 1505
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273

Fax:

After Hours Phone: (800)
926-8273

Provider Gender: Male

License number: A91321

NPI: 1417160474

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Scripps Green Hospital,
Ucsd La Jolla John Sally
Thornton, Scripps Memorial
Hospital, Scripps Mercy Hospital,
Scripps Mercy Hospital Chula
Vista, Scripps Memorial Hospital
Encinitas

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

HILLER, LUCAS P

Provider ID: 64321

Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (800) 926-8273

Fax:

After Hours Phone: (800)
926-8273

Provider Gender: Male

License number: A91321

NPI: 1417160474

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Scripps Green Hospital,
Ucsd La Jolla John Sally
Thornton, Scripps Memorial
Hospital, Scripps Mercy Hospital,
Scripps Mercy Hospital Chula
Vista, Scripps Memorial Hospital
Encinitas

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

HOROWITZ, MICHAEL J

Provider ID: 126572

Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218

Fax:

After Hours Phone: (619)
543-2218

Provider Gender: Male

License number: A135132

NPI: 1518306851

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

HSIAO, ALBERT

Provider ID: 110157

Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218

Fax: (619) 471-9473

After Hours Phone: (619)
543-2218

Provider Gender: Male

License number: A105882

NPI: 1457546244

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

HUANG, BRADY K

Provider ID: 110528

Board Certified Specialty: No
UCSD RADIOLOGY AT LA
JOLLA

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

8929 UNIVERSITY CENTER LN
STE 101
SAN DIEGO, CA 92122-1007
Phone: (858) 457-4227
Fax: (858) 554-2699
After Hours Phone: (858)
457-4227
Provider Gender: Male
License number: A108832
NPI: 1407860299
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Scripps Green Hospital,
Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HUANG, BRADY K

Provider ID: 63969
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR # I505
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A108832
NPI: 1407860299
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical

Ctr, Scripps Green Hospital,
Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HUANG, BRADY K

Provider ID: 64325
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A108832
NPI: 1407860299
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Scripps Green Hospital,
Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HUGHES, TUDOR H

Provider ID: 63971
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR # I505
SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619)
543-2218
Provider Gender: Male
License number: A83748
NPI: 1932187127
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HUGHES, TUDOR H

Provider ID: 64326
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240
Fax:
After Hours Phone: (619)
471-9240
Provider Gender: Male
License number: A83748
NPI: 1932187127
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken: IPA:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

IMBESI, STEVEN G

Provider ID: 63978
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR # I505
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619) 543-2218
Provider Gender: Male
License number: G79078
NPI: 1891710554
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Saddleback Memorial Med Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IMBESI, STEVEN G

Provider ID: 64330
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240
Fax:
After Hours Phone: (619) 471-9240
Provider Gender: Male
License number: G79078
NPI: 1891710554
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Saddleback Memorial Med Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ISHIOKA, KEVIN M

Provider ID: 83629
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A93286

NPI: 1437362498
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Scripps Green Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ISHIOKA, KEVIN M

Provider ID: 83630
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240
Fax:
After Hours Phone: (619) 471-9240
Provider Gender: Male
License number: A93286
NPI: 1437362498
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Ucsd Medical Ctr, Ucsd La Jolla

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D. Directorio de proveedores de atención especializada

John Sally Thornton, Scripps
Green Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

JOHNSON, JOHN O

Provider ID: 115880
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC
150 W WASHINGTON ST
SAN DIEGO, CA 92103-2005
Phone: (619) 295-9729
Fax: (619) 295-2549
After Hours Phone: (619)
295-9729
Provider Gender: Male
License number: G59632
NPI: 1073565792
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

JOHNSON, JOHN O

Provider ID: 126076
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC
6386 ALVARADO CT STE 121
SAN DIEGO, CA 92120-4906
Phone: (619) 229-2299
Fax: (619) 229-2288
After Hours Phone: (619)
229-2299
Provider Gender: Male
License number: G59632
NPI: 1073565792
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KARIMI, AFSHIN

Provider ID: 63993
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR # I505
SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619)
543-2218
Provider Gender: Male
License number: A96518
NPI: 1952511214
Provider English Spoken: Yes
Provider Language(s) Spoken:

Persian
Cultural Competency: No
Hospital Affiliation: Scripps
Green Hospital, Pioneers
Memorial Hospital, Southwest
Healthcare System Wildomar,
Southwest Healthcare System
Murrieta, University Of California
Irvine Med Ctr, Ucsd Medical Ctr,
Ucsd La Jolla John Sally
Thornton, Temecula Valley
Hospital Inc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KARIMI, AFSHIN

Provider ID: 64334
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240
Fax:
After Hours Phone: (619)
471-9240
Provider Gender: Male
License number: A96518
NPI: 1952511214
Provider English Spoken: Yes
Provider Language(s) Spoken:
Persian
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton, Temecula Valley
Hospital Inc, Scripps Green
Hospital, Pioneers Memorial

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, University Of California Irvine Med Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☒ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KAROW, DAVID S

Provider ID: 63994
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR # I505
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619) 543-2218
Provider Gender: Male
License number: A96935
NPI: 1932490703
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Santa Monica Ucla Med Ctr, Ucsd Medical Ctr, Ronald Reagan Ucla Med Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☒ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA:
KAROW, DAVID S
Provider ID: 64335
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240
Fax:
After Hours Phone: (619) 471-9240
Provider Gender: Male
License number: A96935
NPI: 1932490703
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Santa Monica Ucla Med Ctr, Ucsd Medical Ctr, Ronald Reagan Ucla Med Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☒ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KHANNA, PARITOSH
Provider ID: 64000
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR # I505
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619) 543-2218

KHANNA, PARITOSH

Provider ID: 64000
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR # I505
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619) 543-2218

Provider Gender: Male
License number: C54827
NPI: 1568572832
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☒ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KHANNA, PARITOSH

Provider ID: 64338
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240
Fax:
After Hours Phone: (619) 471-9240
Provider Gender: Male
License number: C54827
NPI: 1568572832
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>	<p>UCSD MEDICAL GROUP 330 LEWIS ST # 202 SAN DIEGO, CA 92103-2108 <i>Phone:</i> (619) 471-9240 <i>Fax:</i> <i>After Hours Phone:</i> (619) 471-9240 <i>Provider Gender:</i> Male <i>License number:</i> A106307 <i>NPI:</i> 1063647485 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital, Scripps Mercy Hospital, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Scripps Green Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>	<p><i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>
<p>KIKOLSKI, STEVEN G <i>Provider ID:</i> 64005 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR # I505 SAN DIEGO, CA 92103-1911 <i>Phone:</i> (619) 543-2218 <i>Fax:</i> <i>After Hours Phone:</i> (619) 543-2218 <i>Provider Gender:</i> Male <i>License number:</i> A106307 <i>NPI:</i> 1063647485 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital, Scripps Mercy Hospital, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Scripps Green Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>	<p>KINNEY, THOMAS B <i>Provider ID:</i> 64340 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 330 LEWIS ST # 202 SAN DIEGO, CA 92103-2108 <i>Phone:</i> (619) 471-9240 <i>Fax:</i> <i>After Hours Phone:</i> (619) 471-9240 <i>Provider Gender:</i> Male <i>License number:</i> G64176 <i>NPI:</i> 1992732671 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i></p>	<p>KINNEY, THOMAS B <i>Provider ID:</i> 64008 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR # I505 SAN DIEGO, CA 92103-1911 <i>Phone:</i> (619) 543-2218 <i>Fax:</i> <i>After Hours Phone:</i> (619) 543-2218 <i>Provider Gender:</i> Male <i>License number:</i> G64176 <i>NPI:</i> 1992732671</p>
<p>KIKOLSKI, STEVEN G <i>Provider ID:</i> 64339 <i>Board Certified Specialty:</i> No</p>		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p><i>IPA:</i></p> <p>KINNE, ERICA L <i>Provider ID:</i> 83292 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 <i>Phone:</i> (619) 543-6222 <i>Fax:</i> <i>After Hours Phone:</i> (619) 543-6222 <i>Provider Gender:</i> Female <i>License number:</i> A110179 <i>NPI:</i> 1487803946 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Loma Linda University Med Ctr, Scripps Memorial Hospital, Scripps Mercy Hospital, Ucsd La Jolla John Sally Thornton, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Scripps Green Hospital, Loma Linda University Childrens Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>	<p><i>Phone:</i> (619) 471-9240 <i>Fax:</i> <i>After Hours Phone:</i> (619) 471-9240 <i>Provider Gender:</i> Female <i>License number:</i> A110179 <i>NPI:</i> 1487803946 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Loma Linda University Med Ctr, Scripps Memorial Hospital, Scripps Mercy Hospital, Ucsd La Jolla John Sally Thornton, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Scripps Green Hospital, Loma Linda University Childrens Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p> <p>KRUK, PETER G <i>Provider ID:</i> 64021 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR # 1505 SAN DIEGO, CA 92103-1911 <i>Phone:</i> (619) 543-2218 <i>Fax:</i> <i>After Hours Phone:</i> (619) 543-2218 <i>Provider Gender:</i> Male <i>License number:</i> A96070 <i>NPI:</i> 1366480634 <i>Provider English Spoken:</i> Yes</p>	<p><i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Sharp Memorial Hospital, Ucsd Medical Ctr, Sharp Chula Vista Med Ctr, Ucsd La Jolla John Sally Thornton, Sharp Coronado Hosp And Healthcare Ctr, Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p> <p>KRUK, PETER G <i>Provider ID:</i> 64342 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 330 LEWIS ST # 202 SAN DIEGO, CA 92103-2108 <i>Phone:</i> (619) 471-9240 <i>Fax:</i> <i>After Hours Phone:</i> (619) 471-9240 <i>Provider Gender:</i> Male <i>License number:</i> A96070 <i>NPI:</i> 1366480634 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Sharp Memorial Hospital, Ucsd Medical Ctr, Sharp Chula Vista Med Ctr, Ucsd La Jolla John Sally Thornton, Sharp Coronado Hosp And Healthcare Ctr, Rady Childrens Hospital San Diego</p>
<p>KINNE, ERICA L <i>Provider ID:</i> 83293 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 330 LEWIS ST # 202 SAN DIEGO, CA 92103-2108</p>	<p><i>After Hours Phone:</i> (619) 543-2218 <i>Provider Gender:</i> Male <i>License number:</i> A96070 <i>NPI:</i> 1366480634 <i>Provider English Spoken:</i> Yes</p>	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ☯ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:</p>	<p>UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 Phone: (619) 543-2218 Fax: After Hours Phone: (619) 543-2218 Provider Gender: Male License number: A76172 NPI: 1124212667 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ☯ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:</p>	<p>Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ☯ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:</p>
<p>KUNIYOSHI, JEREMY K Provider ID: 121392 Board Certified Specialty: No UCSD RADIOLOGY AT LA JOLLA 200 W ARBOR DR SAN DIEGO, CA 92103-1911 Phone: (619) 543-2218 Fax: After Hours Phone: (619) 543-2218 Provider Gender: Male License number: A76172 NPI: 1124212667 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ☯ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:</p>	<p>KUNIYOSHI, JEREMY K Provider ID: 121392 Board Certified Specialty: No UCSD RADIOLOGY AT LA JOLLA 200 W ARBOR DR SAN DIEGO, CA 92103-1911 Phone: (619) 543-6222 Fax: After Hours Phone: (619) 543-6222 Provider Gender: Male License number: A76172 NPI: 1124212667 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ☯ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:</p>	<p>KUNIYOSHI, JEREMY K Provider ID: 121392 Board Certified Specialty: No UCSD RADIOLOGY AT LA JOLLA 200 W ARBOR DR SAN DIEGO, CA 92103-1911 Phone: (619) 543-6222 Fax: After Hours Phone: (619) 543-6222 Provider Gender: Male License number: A76172 NPI: 1124212667 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ☯ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:</p>
<p>KUNIYOSHI, JEREMY K Provider ID: 121392 Board Certified Specialty: No</p>	<p>KUNIYOSHI, JEREMY K Provider ID: 121392 Board Certified Specialty: No UCSD RADIOLOGY AT LA JOLLA 200 W ARBOR DR SAN DIEGO, CA 92103-1911 Phone: (619) 543-6222 Fax: After Hours Phone: (619) 543-6222 Provider Gender: Male License number: A76172 NPI: 1124212667 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical</p>	<p>LADD, WILLIAM A Provider ID: 64024</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR # 1505
SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619)
543-2218
Provider Gender: Male
License number: G63024
NPI: 1063463230
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Scripps
Memorial Hospital Encinitas,
Ucsd Medical Ctr, Ucsd La Jolla
John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LADD, WILLIAM A

Provider ID: 64343
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240
Fax:
After Hours Phone: (619)
471-9240
Provider Gender: Male
License number: G63024
NPI: 1063463230
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Scripps
Memorial Hospital Encinitas,
Ucsd Medical Ctr, Ucsd La Jolla
John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LECOMTE, MATTHEW D

Provider ID: 283487
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A171824
NPI: 1508210683
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

IPA: Ucsd Medical Group

LECOMTE, MATTHEW D

Provider ID: 283489
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A171824
NPI: 1508210683
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LEE, ROLAND R

Provider ID: 64033
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR # 1505
SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619)
543-2218
Provider Gender: Male
License number: G57800
NPI: 1639190028

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
 Chinese, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LEE, ROLAND R

Provider ID: 64346
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
Phone: (619) 543-2218
Fax: (619) 471-9473
After Hours Phone: (619)
 543-2218
Provider Gender: Male
License number: G57800
NPI: 1639190028
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Chinese, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA:
LIM, VIVIAN
Provider ID: 125928
Board Certified Specialty: No
 UCSD RADIOLOGY AT LA
 JOLLA
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619)
 543-2218
Provider Gender: Female
License number: G58509
NPI: 1295796753

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital, Rady
 Childrens Hospital San Diego,
 Scripps Green Hospital, Ucsd
 Medical Ctr, Ucsd La Jolla John
 Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LIM, VIVIAN

Provider ID: 125931
Board Certified Specialty: No
 UCSD RADIOLOGY AT LA
 JOLLA
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108

Phone: (619) 471-9240
Fax:
After Hours Phone: (619)
 471-9240
Provider Gender: Female
License number: G58509
NPI: 1295796753
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital, Rady
 Childrens Hospital San Diego,
 Scripps Green Hospital, Ucsd
 Medical Ctr, Ucsd La Jolla John
 Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LIZERBRAM, ERIC K

Provider ID: 118297
Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL
 GROUP INC
 150 W WASHINGTON ST
 SAN DIEGO, CA 92103-2005
Phone: (619) 295-9729
Fax: (619) 295-2549
After Hours Phone: (619)
 295-9729
Provider Gender: Male
License number: G74959
NPI: 1598718926
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LIZERBRAM, ERIC K

Provider ID: 126090
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC
6386 ALVARADO CT STE 121
SAN DIEGO, CA 92120-4906
Phone: (619) 229-2299
Fax: (619) 229-2288
After Hours Phone: (619)
229-2299
Provider Gender: Male
License number: G74959
NPI: 1598718926
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LUBISICH, JOHN P

Provider ID: 115592
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC
150 W WASHINGTON ST
SAN DIEGO, CA 92103-2005
Phone: (858) 658-6500
Fax: (619) 295-2549
After Hours Phone: (858)
658-6500
Provider Gender: Male
License number: G77575
NPI: 1194863902
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado
Hospital Llc, Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

LUBISICH, JOHN P

Provider ID: 126096
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC
6386 ALVARADO CT STE 121
SAN DIEGO, CA 92120-4906
Phone: (619) 229-2299
Fax: (619) 229-2288
After Hours Phone: (619)
229-2299
Provider Gender: Male
License number: G77575
NPI: 1194863902

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado
Hospital Llc, Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MAFEE, MAHMOOD F

Provider ID: 64055
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR # 1505
SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619)
543-2218
Provider Gender: Male
License number: A31751
NPI: 1356431373
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Email:
Medical Group(s):
IPA:

MAFEE, MAHMOOD F

Provider ID: 64351
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240

Fax:
After Hours Phone: (619)
471-9240

Provider Gender: Male
License number: A31751
NPI: 1356431373

Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi

Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA:

MAREK BYKOWSKI, JULIE L

Provider ID: 64063
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR # I505
SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218

Fax:
After Hours Phone: (619)
543-2218

Provider Gender: Female
License number: A96803
NPI: 1699988667
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA:

MAREK BYKOWSKI, JULIE L

Provider ID: 64354
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240

Fax:
After Hours Phone: (619)
471-9240

Provider Gender: Female
License number: A96803
NPI: 1699988667

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA:

MAREK BYKOWSKI, JULIE L

Provider ID: 89937
Board Certified Specialty: No
UCSD RADIOLOGY AT LA
JOLLA
8929 UNIVERSITY CENTER LN
STE 101
SAN DIEGO, CA 92122-1007

Phone: (858) 457-4227
Fax: (858) 457-4231

After Hours Phone: (858)
457-4227

Provider Gender: Female
License number: A96803
NPI: 1699988667

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA:

MEIGS, JASON G

Provider ID: 118450
Board Certified Specialty: No
UCSD RADIOLOGY AT LA
JOLLA
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108

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D. Directorio de proveedores de atención especializada

Phone: (619) 471-9240
 Fax:
 After Hours Phone: (619) 471-9240
 Provider Gender: Male
 License number: 20A15523
 NPI: 1790047371
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Mountains Community Hosp
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

MEISINGER, QUINN C

Provider ID: 118221
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-2218
 Fax:
 After Hours Phone: (619) 543-2218
 Provider Gender: Male
 License number: A123683
 NPI: 1215222757
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

MEISINGER, QUINN C

Provider ID: 118222
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
 Phone: (619) 471-9240
 Fax:
 After Hours Phone: (619) 471-9240
 Provider Gender: Male
 License number: A123683
 NPI: 1215222757
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

MEISINGER, QUINN C

Provider ID: 118373

Board Certified Specialty: No
 UCSD RADIOLOGY AT LA
 JOLLA
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-2218
 Fax:
 After Hours Phone: (619) 543-2218
 Provider Gender: Male
 License number: A123683
 NPI: 1215222757
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

MEISINGER, QUINN C

Provider ID: 118376
 Board Certified Specialty: No
 UCSD RADIOLOGY AT LA
 JOLLA
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
 Phone: (619) 471-9240
 Fax:
 After Hours Phone: (619) 471-9240
 Provider Gender: Male
 License number: A123683
 NPI: 1215222757
 Provider English Spoken: Yes
 Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MINOCHA, JEET

Provider ID: 90536
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A132823
NPI: 1548416266
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MISRA, CHANDAN
Provider ID: 118479
Board Certified Specialty: No
UCSD RADIOLOGY AT LA JOLLA
200 W ARBOR DR # I505
SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619) 543-2218
Provider Gender: Male
License number: A146108
NPI: 1821356825
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Sutter Santa Rosa Regional Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MISRA, CHANDAN
Provider ID: 118481
Board Certified Specialty: No
UCSD RADIOLOGY AT LA JOLLA
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240
Fax:
After Hours Phone: (619) 471-9240

Provider Gender: Male
License number: A146108
NPI: 1821356825
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Sutter Santa Rosa Regional Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MOFFIT, BRIAN J

Provider ID: 115883
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
150 W WASHINGTON ST
SAN DIEGO, CA 92103-2005
Phone: (619) 295-9729
Fax: (619) 295-2549
After Hours Phone: (619) 295-9729
Provider Gender: Male
License number: G51551
NPI: 1508817305
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc	200 W ARBOR DR SAN DIEGO, CA 92103-1911 <i>Phone:</i> (619) 543-2218 <i>Fax:</i> <i>After Hours Phone:</i> (619) 543-2218 <i>Provider Gender:</i> Male <i>License number:</i> A123586 <i>NPI:</i> 1295050946 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ronald Reagan Ucla Med Ctr, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr, Santa Monica Ucla Med Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>	Memorial Hospital, Sharp Coronado Hosp And Healthcare Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>
MOFFIT, BRIAN J <i>Provider ID:</i> 126117 <i>Board Certified Specialty:</i> No IHS RADIOLOGY MEDICAL GROUP INC 6386 ALVARADO CT STE 121 SAN DIEGO, CA 92120-4906 <i>Phone:</i> (619) 229-2299 <i>Fax:</i> (619) 229-2288 <i>After Hours Phone:</i> (619) 229-2299 <i>Provider Gender:</i> Male <i>License number:</i> G51551 <i>NPI:</i> 1508817305 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc	NAHEEDY, JOHN H <i>Provider ID:</i> 64102 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR # 1505 SAN DIEGO, CA 92103-1911 <i>Phone:</i> (619) 543-2218 <i>Fax:</i> <i>After Hours Phone:</i> (619) 543-2218 <i>Provider Gender:</i> Male <i>License number:</i> A99832 <i>NPI:</i> 1760695761 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Memorial Hospital, Sharp Coronado Hosp And Healthcare Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>	NAHEEDY, JOHN H <i>Provider ID:</i> 64360 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 330 LEWIS ST # 202 SAN DIEGO, CA 92103-2108 <i>Phone:</i> (619) 471-9240 <i>Fax:</i> <i>After Hours Phone:</i> (619) 471-9240 <i>Provider Gender:</i> Male <i>License number:</i> A99832 <i>NPI:</i> 1760695761 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Memorial Hospital, Sharp Coronado Hosp And Healthcare Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i>
MURPHY, PAUL M <i>Provider ID:</i> 116425 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP	NAHEEDY, JOHN H <i>Provider ID:</i> 64102 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR # 1505 SAN DIEGO, CA 92103-1911 <i>Phone:</i> (619) 543-2218 <i>Fax:</i> <i>After Hours Phone:</i> (619) 543-2218 <i>Provider Gender:</i> Male <i>License number:</i> A99832 <i>NPI:</i> 1760695761 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp	NAHEEDY, JOHN H <i>Provider ID:</i> 64360 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 330 LEWIS ST # 202 SAN DIEGO, CA 92103-2108 <i>Phone:</i> (619) 471-9240 <i>Fax:</i> <i>After Hours Phone:</i> (619) 471-9240 <i>Provider Gender:</i> Male <i>License number:</i> A99832 <i>NPI:</i> 1760695761 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Memorial Hospital, Sharp Coronado Hosp And Healthcare Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p><i>IPA:</i></p> <p>NEWTON, ISABEL G <i>Provider ID:</i> 84298 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 <i>Phone:</i> (619) 543-6222 <i>Fax:</i> <i>After Hours Phone:</i> (619) 543-6222 <i>Provider Gender:</i> Female <i>License number:</i> A108128 <i>NPI:</i> 1306068697 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p> <p>NEWTON, ISABEL G <i>Provider ID:</i> 84300 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 330 LEWIS ST # 202 SAN DIEGO, CA 92103-2108 <i>Phone:</i> (619) 471-9240 <i>Fax:</i> <i>After Hours Phone:</i> (619) 471-9240 <i>Provider Gender:</i> Female <i>License number:</i> A108128</p>	<p><i>NPI:</i> 1306068697 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p> <p>NORBASH, ALEXANDER M <i>Provider ID:</i> 125625 <i>Board Certified Specialty:</i> No UCSD RADIOLOGY AT LA JOLLA 200 W ARBOR DR # I505 SAN DIEGO, CA 92103-1911 <i>Phone:</i> (619) 543-2218 <i>Fax:</i> <i>After Hours Phone:</i> (619) 543-2218 <i>Provider Gender:</i> Male <i>License number:</i> G62865 <i>NPI:</i> 1790752269 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p> <p>NORBASH, ALEXANDER M <i>Provider ID:</i> 125630 <i>Board Certified Specialty:</i> No UCSD RADIOLOGY AT LA JOLLA 330 LEWIS ST # 202 SAN DIEGO, CA 92103-2108 <i>Phone:</i> (619) 471-9240 <i>Fax:</i> <i>After Hours Phone:</i> (619) 471-9240 <i>Provider Gender:</i> Male <i>License number:</i> G62865 <i>NPI:</i> 1790752269 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p> <p>OBOYLE, MARY K <i>Provider ID:</i> 64114 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911</p>	<p><i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p> <p>NORBASH, ALEXANDER M <i>Provider ID:</i> 125630 <i>Board Certified Specialty:</i> No UCSD RADIOLOGY AT LA JOLLA 330 LEWIS ST # 202 SAN DIEGO, CA 92103-2108 <i>Phone:</i> (619) 471-9240 <i>Fax:</i> <i>After Hours Phone:</i> (619) 471-9240 <i>Provider Gender:</i> Male <i>License number:</i> G62865 <i>NPI:</i> 1790752269 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p> <p>OBOYLE, MARY K <i>Provider ID:</i> 64114 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911</p>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: G73501
NPI: 1568487999
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

OBOYLE, MARY K
Provider ID: 64362
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (619) 543-3405
Fax:
After Hours Phone: (619) 543-3405
Provider Gender: Female
License number: G73501
NPI: 1568487999
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None

American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

OBRZUT, SEBASTIAN
Provider ID: 64116
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR # I505
SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619) 543-2218
Provider Gender: Male
License number: A85028
NPI: 1083714398
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

OJEDA-FOURNIER, HAYDEE
Provider ID: 64118
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR # I505
SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619) 543-2218
Provider Gender: Female
License number: A99462
NPI: 1871537191
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No

OBRZUT, SEBASTIAN
Provider ID: 64363
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108

Phone: (619) 471-9240
Fax:
After Hours Phone: (619) 471-9240
Provider Gender: Male
License number: A85028
NPI: 1083714398
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

OJEDA-FOURNIER, HAYDEE
Provider ID: 64118
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR # I505
SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619) 543-2218
Provider Gender: Female
License number: A99462
NPI: 1871537191
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:</p>	<p>GROUP INC 150 W WASHINGTON ST SAN DIEGO, CA 92103-2005 Phone: (858) 658-6500 Fax: After Hours Phone: (858) 658-6500 Provider Gender: Male License number: A120064 NPI: 1972709087 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Santa Monica Ucla Med Ctr, Alvarado Hospital Llc, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Scripps Green Hospital Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:</p>	<p>NPI: 1972709087 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Santa Monica Ucla Med Ctr, Alvarado Hospital Llc, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Scripps Green Hospital Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:</p>
<p>OJEDA-FOURNIER, HAYDEE Provider ID: 64364 Board Certified Specialty: No UCSD MEDICAL GROUP 330 LEWIS ST # 202 SAN DIEGO, CA 92103-2108 Phone: (619) 471-9240 Fax: After Hours Phone: (619) 471-9240 Provider Gender: Female License number: A99462 NPI: 1871537191 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:</p>	<p>OSHAUGHNESSY, LOUISE S Provider ID: 115594 Board Certified Specialty: No IHS RADIOLOGY MEDICAL GROUP INC 150 W WASHINGTON ST SAN DIEGO, CA 92103-2005 Phone: (858) 658-6500 Fax: (619) 295-2549 After Hours Phone: (858) 658-6500 Provider Gender: Female License number: G48800 NPI: 1285685925 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Alvarado Hospital Llc, Ucsd Medical Ctr Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL):</p>	
<p>OLOUGHLIN, BRIAN J Provider ID: 115593 Board Certified Specialty: No IHS RADIOLOGY MEDICAL</p>	<p>OLOUGHLIN, BRIAN J Provider ID: 126123 Board Certified Specialty: No IHS RADIOLOGY MEDICAL GROUP INC 6386 ALVARADO CT STE 121 SAN DIEGO, CA 92120-4906 Phone: (619) 229-2299 Fax: After Hours Phone: (619) 229-2299 Provider Gender: Male License number: A120064</p>	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>	<i>Phone:</i> (619) 543-2218 <i>Fax:</i> <i>After Hours Phone:</i> (619) 543-2218 <i>Provider Gender:</i> Male <i>License number:</i> A73947 <i>NPI:</i> 1811072457 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sutter Roseville Medical Center, Mercy General Hospital, Mercy San Juan Hospital, Scripps Green Hospital, Scripps Memorial Hospital, Scripps Mercy Hospital, Encinitas, Ucsd Medical Ctr, Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>	<i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sutter Roseville Medical Center, Mercy General Hospital, Mercy San Juan Hospital, Scripps Green Hospital, Scripps Memorial Hospital, Scripps Mercy Hospital, Encinitas, Ucsd Medical Ctr, Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>
OSHAUGHNESSY, LOUISE S <i>Provider ID:</i> 126129 <i>Board Certified Specialty:</i> No IHS RADIOLOGY MEDICAL GROUP INC 6386 ALVARADO CT STE 121 SAN DIEGO, CA 92120-4906 <i>Phone:</i> (619) 229-2299 <i>Fax:</i> (619) 229-2288 <i>After Hours Phone:</i> (619) 229-2299 <i>Provider Gender:</i> Female <i>License number:</i> G48800 <i>NPI:</i> 1285685925 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Alvarado Hospital Llc, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>	PAKBAZ, RAMIN S <i>Provider ID:</i> 64367 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 330 LEWIS ST # 202 SAN DIEGO, CA 92103-2108 <i>Phone:</i> (619) 471-9240 <i>Fax:</i> <i>After Hours Phone:</i> (619) 471-9240 <i>Provider Gender:</i> Male <i>License number:</i> A73947 <i>NPI:</i> 1811072457	PATHRIA, MINI N <i>Provider ID:</i> 64133 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR # 1505 SAN DIEGO, CA 92103-1911 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female <i>License number:</i> A43771 <i>NPI:</i> 1699739318 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Hindi <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Green Hospital, Ucsd Medical Ctr, Ucsd La Jolla John Sally
PAKBAZ, RAMIN S <i>Provider ID:</i> 64125 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR # 1505 SAN DIEGO, CA 92103-1911		

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

PATHRIA, MINI N

Provider ID: 64368
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A43771
NPI: 1699739318
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi
Cultural Competency: No
Hospital Affiliation: Scripps
Green Hospital, Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

PATIL, AMOL A

Provider ID: 98852
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR # I505
SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619)
543-2218
Provider Gender: Male
License number: A133973
NPI: 1225355720
Provider English Spoken: Yes
Provider Language(s) Spoken:
French, Hindi
Cultural Competency: No
Hospital Affiliation: Sierra Vista
Regional Med Ctr, Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton, Goleta Valley Cottage
Hosp
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

PATIL, AMOL A

Provider ID: 98853
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240
Fax:
After Hours Phone: (619)
471-9240
Provider Gender: Male
License number: A133973
NPI: 1225355720

Provider English Spoken: Yes
Provider Language(s) Spoken:
French, Hindi
Cultural Competency: No
Hospital Affiliation: Sierra Vista
Regional Med Ctr, Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton, Goleta Valley Cottage
Hosp
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

PRETORIUS, DOLORES H

Provider ID: 64147
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Female
License number: C39102
NPI: 1902839418
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<i>Website:</i>	<i>Phone:</i> (619) 543-2218	Memorial Hospital Encinitas,
<i>Email:</i>	<i>Fax:</i>	Scripps Mercy Hospital, Scripps
<i>Medical Group(s):</i>	<i>After Hours Phone:</i> (619)	Mercy Hospital Chula Vista
<i>IPA:</i>	543-2218	<i>Medi-Cal Open Panel:</i> No
PRETORIUS, DOLORES H	<i>Provider Gender:</i> Female	<i>Min/Max Age:</i> None
<i>Provider ID:</i> 64370	<i>License number:</i> A128755	<i>American Sign Language (ASL):</i>
<i>Board Certified Specialty:</i> No	<i>NPI:</i> 1558651497	No
UCSD MEDICAL GROUP	<i>Provider English Spoken:</i> Yes	♿ <i>Accessibility:</i> W
330 LEWIS ST # 202	<i>Provider Language(s) Spoken:</i>	<i>Hours:</i> M,W-F 7:30AM-4PM,
SAN DIEGO, CA 92103-2108	<i>Cultural Competency:</i> No	TU,SA 9AM-5PM
<i>Phone:</i> (619) 471-9420	<i>Hospital Affiliation:</i> Ucsd Medical	<i>Website:</i>
<i>Fax:</i>	Ctr, Ucsd La Jolla John Sally	<i>Email:</i>
<i>After Hours Phone:</i> (619)	Thornton	<i>Medical Group(s):</i>
471-9420	<i>Medi-Cal Open Panel:</i> No	<i>IPA:</i> Community Care Ipa Llc,
<i>Provider Gender:</i> Female	<i>Min/Max Age:</i> None	Health Excel Ipa Inc
<i>License number:</i> C39102	<i>American Sign Language (ASL):</i>	RESNICK, DONALD L
<i>NPI:</i> 1902839418	No	<i>Provider ID:</i> 64157
<i>Provider English Spoken:</i> Yes	♿ <i>Accessibility:</i> W	<i>Board Certified Specialty:</i> No
<i>Provider Language(s) Spoken:</i>	<i>Hours:</i> M-SA 9AM-5PM	UCSD MEDICAL GROUP
<i>Cultural Competency:</i> No	<i>Website:</i>	200 W ARBOR DR # 1505
<i>Hospital Affiliation:</i> Ucsd Medical	<i>Email:</i>	SAN DIEGO, CA 92103-1911
Ctr, Ucsd La Jolla John Sally	<i>Medical Group(s):</i>	<i>Phone:</i> (619) 543-2218
Thornton	<i>IPA:</i>	<i>Fax:</i>
<i>Medi-Cal Open Panel:</i> No	RATTNER, ZACHARY G	<i>After Hours Phone:</i> (619)
<i>Min/Max Age:</i> None	<i>Provider ID:</i> 35244	543-2218
<i>American Sign Language (ASL):</i>	<i>Board Certified Specialty:</i> No	<i>Provider Gender:</i> Male
No	SOUTHERN CALIFORNIA	<i>License number:</i> G18577
♿ <i>Accessibility:</i>	INTERVENTIONAL ASSOC	<i>NPI:</i> 1164450938
<i>Hours:</i> M-SA 9AM-5PM	995 GATEWAY CENTER WAY	<i>Provider English Spoken:</i> Yes
<i>Website:</i>	STE 207	<i>Provider Language(s) Spoken:</i>
<i>Email:</i>	SAN DIEGO, CA 92102-4544	<i>Cultural Competency:</i> No
<i>Medical Group(s):</i>	<i>Phone:</i> (619) 263-9729	<i>Hospital Affiliation:</i> Ucsd Medical
<i>IPA:</i>	<i>Fax:</i> (858) 454-4644	Ctr, Scripps Green Hospital,
RAKOW-PENNER, REBECCA	<i>After Hours Phone:</i> (619)	Ucsd La Jolla John Sally
A	263-9729	Thornton
<i>Provider ID:</i> 118624	<i>Provider Gender:</i> Male	<i>Medi-Cal Open Panel:</i> No
<i>Board Certified Specialty:</i> No	<i>License number:</i> G86843	<i>Min/Max Age:</i> None
UCSD MEDICAL GROUP	<i>NPI:</i> 1003867276	<i>American Sign Language (ASL):</i>
200 W ARBOR DR # 1505	<i>Provider English Spoken:</i> Yes	No
SAN DIEGO, CA 92103-1911	<i>Provider Language(s) Spoken:</i>	♿ <i>Accessibility:</i> W
	<i>Cultural Competency:</i> No	<i>Hours:</i> M-SA 9AM-5PM
	<i>Hospital Affiliation:</i> Paradise	<i>Website:</i>
	Valley Hospital, Scripps	<i>Email:</i>
	Memorial Hospital, Scripps	<i>Medical Group(s):</i>

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D. Directorio de proveedores de atención especializada

RESNICK, DONALD L Provider ID: 64372 Board Certified Specialty: No UCSD MEDICAL GROUP 330 LEWIS ST # 202 SAN DIEGO, CA 92103-2108 Phone: (619) 471-9240 Fax: After Hours Phone: (619) 471-9240 Provider Gender: Male License number: G18577 NPI: 1164450938 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Scripps Green Hospital, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ⌘ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:	NPI: 1417111477 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Scripps Green Hospital, Lakewood Regional Med Ctr, Pacific Alliance Medical Center, San Antonio Comm Hosp, Tri City Medical Ctr, Ucsd Medical Ctr, Alvarado Hospital Llc, Ukiah Valley Med Ctr, Providence St Mary Medical Center, Kaweah Delta District Hosp Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ⌘ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Health Excel Ipa Inc	Antonio Comm Hosp, Tri City Medical Ctr, Ucsd Medical Ctr, Alvarado Hospital Llc, Ukiah Valley Med Ctr, Providence St Mary Medical Center, Kaweah Delta District Hosp Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ⌘ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Health Excel Ipa Inc
RIAD, SHAREEF M Provider ID: 64158 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR # I505 SAN DIEGO, CA 92103-1911 Phone: (619) 471-9240 Fax: After Hours Phone: (619) 471-9240 Provider Gender: Male License number: A106536	RIAD, SHAREEF M Provider ID: 64373 Board Certified Specialty: No UCSD MEDICAL GROUP 330 LEWIS ST # 202 SAN DIEGO, CA 92103-2108 Phone: (619) 543-3000 Fax: After Hours Phone: (619) 543-3000 Provider Gender: Male License number: A106536 NPI: 1417111477 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Scripps Green Hospital, Lakewood Regional Med Ctr, Pacific Alliance Medical Center, San	RICHMAN, KATHERINE M Provider ID: 64159 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR # I505 SAN DIEGO, CA 92103-1911 Phone: (619) 543-2218 Fax: After Hours Phone: (619) 543-2218 Provider Gender: Female License number: G80333 NPI: 1992898993 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ⌘ Accessibility: W Hours: M-SA 9AM-5PM Website: Email:

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D. Directorio de proveedores de atención especializada

Medical Group(s):

IPA:

RICHMAN, KATHERINE M

Provider ID: 64374

Board Certified Specialty: No

UCSD MEDICAL GROUP

330 LEWIS ST # 202

SAN DIEGO, CA 92103-2108

Phone: (619) 471-9240

Fax:

After Hours Phone: (619)

471-9240

Provider Gender: Female

License number: G80333

NPI: 1992898993

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

ROBERTS, ANNE C

Provider ID: 64162

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222

Fax:

After Hours Phone: (619)

543-6222

Provider Gender: Female

License number: G58654

NPI: 1669497996

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

ROBERTS, ANNE C

Provider ID: 64376

Board Certified Specialty: No

UCSD MEDICAL GROUP

330 LEWIS ST # 202

SAN DIEGO, CA 92103-2108

Phone: (619) 471-9240

Fax:

After Hours Phone: (619)

471-9240

Provider Gender: Female

License number: G58654

NPI: 1669497996

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

ROMINE, LORENE E

Provider ID: 64165

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR # 1505

SAN DIEGO, CA 92103-1911

Phone: (619) 543-2218

Fax:

After Hours Phone: (619)

543-2218

Provider Gender: Female

License number: A87658

NPI: 1720209786

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Cedars Sinai Medical

Center, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

ROMINE, LORENE E

Provider ID: 64378

Board Certified Specialty: No

UCSD MEDICAL GROUP

330 LEWIS ST # 202

SAN DIEGO, CA 92103-2108

Phone: (619) 471-9240

Fax:

After Hours Phone: (619)

471-9240

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D. Directorio de proveedores de atención especializada

Provider Gender: Female
License number: A87658
NPI: 1720209786
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Cedars Sinai Medical Center, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ROSSI, CARL J

Provider ID: 81385
Board Certified Specialty: No
 RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 9730 SUMMERS RIDGE RD
 SAN DIEGO, CA 92121-3101
Phone: (858) 549-7458
Fax: (858) 578-1144
After Hours Phone: (858) 549-7458
Provider Gender: Male
License number: G66352
NPI: 1518983055
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Green Hospital, Rady Childrens Hospital San Diego, Scripps Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None

American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SANTILLAN, CYNTHIA S

Provider ID: 103164
Board Certified Specialty: No
 UCSD RADIOLOGY AT LA JOLLA
 8929 UNIVERSITY CENTER LN
 STE 101
 SAN DIEGO, CA 92122-1007
Phone: (858) 457-4227
Fax:
After Hours Phone: (858) 457-4227

Provider Gender: Female
License number: A90879
NPI: 1932132404
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SANTILLAN, CYNTHIA S

Provider ID: 64179
Board Certified Specialty: No
 UCSD MEDICAL GROUP

200 W ARBOR DR # 1505
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A90879
NPI: 1932132404
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SANTILLAN, CYNTHIA S

Provider ID: 64382
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A90879
NPI: 1932132404
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton

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D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

SCHECHTER, MARK S

Provider ID: 115894

Board Certified Specialty: No

IHS RADIOLOGY MEDICAL

GROUP INC

150 W WASHINGTON ST

SAN DIEGO, CA 92103-2005

Phone: (619) 295-9729

Fax: (619) 295-2549

After Hours Phone: (619)

295-9729

Provider Gender: Male

License number: G42390

NPI: 1942253018

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital, El Centro Regional

Medical Center, Selma

Community Hospital, Adventist

Medical Center, Adventist Med

Ctr Reedley, Scripps Mercy

Hospital Chula Vista

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

SCHECHTER, MARK S

Provider ID: 126135

Board Certified Specialty: No

IHS RADIOLOGY MEDICAL

GROUP INC

6386 ALVARADO CT STE 121

SAN DIEGO, CA 92120-4906

Phone: (619) 229-2299

Fax: (619) 229-2288

After Hours Phone: (619)

229-2299

Provider Gender: Male

License number: G42390

NPI: 1942253018

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital, El Centro Regional

Medical Center, Selma

Community Hospital, Adventist

Medical Center, Adventist Med

Ctr Reedley, Scripps Mercy

Hospital Chula Vista

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

SCHWARTZBERG, ROSS E

Provider ID: 115895

Board Certified Specialty: No

IHS RADIOLOGY MEDICAL

GROUP INC

150 W WASHINGTON ST

SAN DIEGO, CA 92103-2005

Phone: (619) 295-9729

Fax: (619) 295-2549

After Hours Phone: (619)

295-9729

Provider Gender: Male

License number: G72997

NPI: 1215976766

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Alvarado

Hospital Llc

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

SCHWARTZBERG, ROSS E

Provider ID: 126142

Board Certified Specialty: No

IHS RADIOLOGY MEDICAL

GROUP INC

6386 ALVARADO CT STE 121

SAN DIEGO, CA 92120-4906

Phone: (619) 229-2299

Fax: (619) 229-2288

After Hours Phone: (619)

229-2299

Provider Gender: Male

License number: G72997

NPI: 1215976766

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Alvarado

Hospital Llc

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

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D. Directorio de proveedores de atención especializada

No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SIRLIN, CLAUDE B

Provider ID: 64203
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR # 1505
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: G80184
NPI: 1730261793
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Saddleback Memorial Med
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SIRLIN, CLAUDE B

Provider ID: 64387
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108

Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: G80184
NPI: 1730261793
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Saddleback Memorial Med
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SLATER, JERRY

Provider ID: 283310
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A172254
NPI: 1851746382
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SLATER, JERRY

Provider ID: 283312
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A172254
NPI: 1851746382
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SMITAMAN, EDWARD

Provider ID: 110530
Board Certified Specialty: No
UCSD RADIOLOGY AT LA
JOLLA

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D. Directorio de proveedores de atención especializada

8929 UNIVERSITY CENTER LN
STE 101
SAN DIEGO, CA 92122-1007
Phone: (858) 457-4227
Fax: (858) 457-4231
After Hours Phone: (858)
457-4227

Provider Gender: Male
License number: A119696
NPI: 1477720092
Provider English Spoken: Yes
Provider Language(s) Spoken:
Thai

Cultural Competency: No
Hospital Affiliation: Scripps
Green Hospital, Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SMITAMAN, EDWARD

Provider ID: 64207
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR # 1505
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273

Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A119696
NPI: 1477720092
Provider English Spoken: Yes
Provider Language(s) Spoken:
Thai

Cultural Competency: No
Hospital Affiliation: Scripps
Green Hospital, Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SMITAMAN, EDWARD

Provider ID: 64389
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (800) 926-8273

Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A119696
NPI: 1477720092
Provider English Spoken: Yes
Provider Language(s) Spoken:
Thai

Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton, Scripps Green Hospital
Medi-Cal Open Panel: No

Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA:

SNYDER, WILLIAM C

Provider ID: 115896
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC
150 W WASHINGTON ST
SAN DIEGO, CA 92103-2005
Phone: (858) 658-6500

Fax: (866) 558-4329
After Hours Phone: (858)
658-6500
Provider Gender: Male
License number: A65059
NPI: 1477505162

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado
Hospital Llc

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA:

SNYDER, WILLIAM C

Provider ID: 126149
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC
6386 ALVARADO CT STE 121
SAN DIEGO, CA 92120-4906
Phone: (619) 229-2299

Fax: (866) 558-4329
After Hours Phone: (619)
229-2299
Provider Gender: Male
License number: A65059

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>NPI: 1477505162 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Alvarado Hospital Llc Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:</p>	<p>♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:</p> <p>SOHELI, AYDIN C Provider ID: 98873 Board Certified Specialty: No UCSD MEDICAL GROUP 330 LEWIS ST # 202 SAN DIEGO, CA 92103-2108 Phone: (619) 471-9240 Fax: After Hours Phone: (619) 471-9240 Provider Gender: Male License number: A120965 NPI: 1235443789 Provider English Spoken: Yes Provider Language(s) Spoken: Farsi Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Scripps Green Hospital Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:</p> <p>SPOTO, GARY P Provider ID: 115595 Board Certified Specialty: No</p>	<p>IHS RADIOLOGY MEDICAL GROUP INC 150 W WASHINGTON ST SAN DIEGO, CA 92103-2005 Phone: (619) 295-9729 Fax: (619) 295-2549 After Hours Phone: (619) 295-9729 Provider Gender: Male License number: G58131 NPI: 1659332062 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas, Scripps Green Hospital Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:</p> <p>SPOTO, GARY P Provider ID: 126155 Board Certified Specialty: No IHS RADIOLOGY MEDICAL GROUP INC 6386 ALVARADO CT STE 121 SAN DIEGO, CA 92120-4906 Phone: (619) 229-2299 Fax: (619) 229-2288 After Hours Phone: (619) 229-2299 Provider Gender: Male License number: G58131 NPI: 1659332062</p>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p><i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas, Scripps Green Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p>	<p><i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p> <p>SUN, ALEX W <i>Provider ID:</i> 268632 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 200 W ARBOR DR SAN DIEGO, CA 92103-1911 <i>Phone:</i> (619) 543-2218 <i>Fax:</i> <i>After Hours Phone:</i> (619) 543-2218 <i>Provider Gender:</i> Male <i>License number:</i> A133334 <i>NPI:</i> 1538502331 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr, Scripps Green Hospital, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Memorial Hospital Encinitas, Grossmont Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc</p> <p>SU, TEDDY J <i>Provider ID:</i> 100417</p>	<p><i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 <i>Phone:</i> (619) 543-6222 <i>Fax:</i> <i>After Hours Phone:</i> (619) 543-6222 <i>Provider Gender:</i> Male <i>License number:</i> A105730 <i>NPI:</i> 1003881830 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Italian, Mandarin, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Sutter Roseville Medical Center, Sutter Medical Center Sacramento, Sutter Auburn Faith Hosp, Sutter Davis Hospital, Sutter Surgical Hospital North Valley <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i></p> <p>TADROS, ANTHONY S <i>Provider ID:</i> 268546 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Male <i>License number:</i> A128627</p>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1306112057	Website:	Phone: (619) 543-2218
Provider English Spoken: Yes	Email:	Fax:
Provider Language(s) Spoken: Spanish	Medical Group(s):	After Hours Phone: (619) 543-2218
Cultural Competency: No	IPA:	Provider Gender: Female
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr	TAMAYO-MURILLO, DORATHY E	License number: A152645
Medi-Cal Open Panel: Yes	Provider ID: 126829	NPI: 1700225711
Min/Max Age: 0/999	Board Certified Specialty: No	Provider English Spoken: Yes
American Sign Language (ASL): No	UCSD MEDICAL GROUP	Provider Language(s) Spoken:
Accessibility: No	330 LEWIS ST # 202	Cultural Competency: No
Hours: M-SA 9AM-5PM	SAN DIEGO, CA 92103-2108	Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Website:	Phone: (619) 471-9240	Medi-Cal Open Panel: No
Email:	Fax:	Min/Max Age: None
Medical Group(s):	After Hours Phone: (619) 471-9240	American Sign Language (ASL): No
IPA: Ucsd Medical Group	Provider Gender: Female	Accessibility: W
TAMAYO-MURILLO, DORATHY E	License number: A152645	Hours: M-SA 9AM-5PM
Provider ID: 126827	NPI: 1700225711	Website:
Board Certified Specialty: No	Provider English Spoken: Yes	Email:
UCSD MEDICAL GROUP	Provider Language(s) Spoken:	Medical Group(s):
200 W ARBOR DR	Cultural Competency: No	IPA:
SAN DIEGO, CA 92103-1911	Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr	TAMAYO-MURILLO, DORATHY E
Phone: (619) 543-6222	Medi-Cal Open Panel: No	Provider ID: 126833
Fax:	Min/Max Age: None	Board Certified Specialty: No
After Hours Phone: (619) 543-6222	American Sign Language (ASL): No	UCSD RADIOLOGY AT LA JOLLA
Provider Gender: Female	Accessibility: No	330 LEWIS ST # 202
License number: A152645	Hours: M-SA 9AM-5PM	SAN DIEGO, CA 92103-2108
NPI: 1700225711	Website:	Phone: (619) 471-9240
Provider English Spoken: Yes	Email:	Fax:
Provider Language(s) Spoken:	Medical Group(s):	After Hours Phone: (619) 471-9240
Cultural Competency: No	IPA:	Provider Gender: Female
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr	TAMAYO-MURILLO, DORATHY E	License number: A152645
Medi-Cal Open Panel: No	Provider ID: 126831	NPI: 1700225711
Min/Max Age: None	Board Certified Specialty: No	Provider English Spoken: Yes
American Sign Language (ASL): No	UCSD RADIOLOGY AT LA JOLLA	Provider Language(s) Spoken:
Accessibility: W	JOLLA	Cultural Competency: No
Hours: M-SA 9AM-5PM	200 W ARBOR DR	Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
	SAN DIEGO, CA 92103-1911	

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D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

TENA, ROWENA G

Provider ID: 115897
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
150 W WASHINGTON ST
SAN DIEGO, CA 92103-2005
Phone: (619) 295-9729
Fax: (619) 295-2549
After Hours Phone: (619) 295-9729
Provider Gender: Female
License number: A69607
NPI: 1629029335
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Vibra Hospital Of San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

TENA, ROWENA G

Provider ID: 126161
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
6386 ALVARADO CT STE 121
SAN DIEGO, CA 92120-4906
Phone: (619) 229-2299
Fax: (619) 229-2288
After Hours Phone: (619) 229-2299
Provider Gender: Female
License number: A69607
NPI: 1629029335
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Vibra Hospital Of San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

TOBIN, MICHAEL L

Provider ID: 115898
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
150 W WASHINGTON ST
SAN DIEGO, CA 92103-2005
Phone: (858) 658-6500
Fax: (619) 295-2549
After Hours Phone: (858) 658-6500
Provider Gender: Male
License number: A45908

NPI: 1730132150
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

TOBIN, MICHAEL L

Provider ID: 126212
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
6386 ALVARADO CT STE 121
SAN DIEGO, CA 92120-4906
Phone: (619) 229-2299
Fax: (619) 229-2288
After Hours Phone: (619) 229-2299
Provider Gender: Male
License number: A45908
NPI: 1730132150
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<i>Email:</i>	GROUP INC	<i>NPI:</i> 1740440148
<i>Medical Group(s):</i>	6386 ALVARADO CT STE 121	<i>Provider English Spoken:</i> Yes
<i>IPA:</i>	SAN DIEGO, CA 92120-4906	<i>Provider Language(s) Spoken:</i>
	<i>Phone:</i> (619) 229-2299	<i>Cultural Competency:</i> No
	<i>Fax:</i> (619) 229-2288	<i>Hospital Affiliation:</i> Ucsd Medical
TSUKADA, GLENN H	<i>After Hours Phone:</i> (619)	Ctr, Ucsd La Jolla John Sally
<i>Provider ID:</i> 115596	229-2299	Thornton, San Dimas Community
<i>Board Certified Specialty:</i> No	<i>Provider Gender:</i> Male	Hospital, Lakewood Regional
IHS RADIOLOGY MEDICAL	<i>License number:</i> A60235	Med Ctr, Pacific Alliance Medical
GROUP INC	<i>NPI:</i> 1710938394	Center, San Antonio Comm
150 W WASHINGTON ST	<i>Provider English Spoken:</i> Yes	Hosp, Tri City Medical Ctr,
SAN DIEGO, CA 92103-2005	<i>Provider Language(s) Spoken:</i>	Palomar Health Downtown
<i>Phone:</i> (619) 295-9729	<i>Cultural Competency:</i> No	Campus, Pomerado Hospital,
<i>Fax:</i> (619) 295-2549	<i>Hospital Affiliation:</i> Pomerado	Alvarado Hospital Llc
<i>After Hours Phone:</i> (619)	Hospital, Alvarado Hospital Llc,	<i>Medi-Cal Open Panel:</i> No
295-9729	Scripps Memorial Hospital,	<i>Min/Max Age:</i> None
<i>Provider Gender:</i> Male	Grossmont Hospital, Scripps	<i>American Sign Language (ASL):</i>
<i>License number:</i> A60235	Mercy Hospital, Ucsd Medical	No
<i>NPI:</i> 1710938394	Ctr, Scripps Mercy Hospital	♿ <i>Accessibility:</i> W
<i>Provider English Spoken:</i> Yes	Chula Vista, Scripps Memorial	<i>Hours:</i> M-SA 9AM-5PM
<i>Provider Language(s) Spoken:</i>	Hospital Encinitas, Scripps	<i>Website:</i>
<i>Cultural Competency:</i> No	Green Hospital	<i>Email:</i>
<i>Hospital Affiliation:</i> Pomerado	<i>Medi-Cal Open Panel:</i> No	<i>Medical Group(s):</i>
Hospital, Alvarado Hospital Llc,	<i>Min/Max Age:</i> None	<i>IPA:</i>
Scripps Memorial Hospital,	<i>American Sign Language (ASL):</i>	
Grossmont Hospital, Scripps	No	TYAGI, AVISHKAR
Mercy Hospital, Ucsd Medical	♿ <i>Accessibility:</i> W	<i>Provider ID:</i> 84934
Ctr, Scripps Mercy Hospital	<i>Hours:</i> M-SA 9AM-5PM	<i>Board Certified Specialty:</i> No
Chula Vista, Scripps Memorial	<i>Website:</i>	UCSD MEDICAL GROUP
Hospital Encinitas, Scripps	<i>Email:</i>	330 LEWIS ST # 202
Green Hospital	<i>Medical Group(s):</i>	SAN DIEGO, CA 92103-2108
<i>Medi-Cal Open Panel:</i> No	<i>IPA:</i>	<i>Phone:</i> (619) 471-9240
<i>Min/Max Age:</i> None		<i>Fax:</i>
<i>American Sign Language (ASL):</i>	TYAGI, AVISHKAR	<i>After Hours Phone:</i> (619)
No	<i>Provider ID:</i> 84932	471-9240
♿ <i>Accessibility:</i> W	<i>Board Certified Specialty:</i> No	<i>Provider Gender:</i> Male
<i>Hours:</i> M-SA 9AM-5PM	UCSD MEDICAL GROUP	<i>License number:</i> A123065
<i>Website:</i>	200 W ARBOR DR	<i>NPI:</i> 1740440148
<i>Email:</i>	SAN DIEGO, CA 92103-1911	<i>Provider English Spoken:</i> Yes
<i>Medical Group(s):</i>	<i>Phone:</i> (619) 543-6222	<i>Provider Language(s) Spoken:</i>
<i>IPA:</i>	<i>Fax:</i>	<i>Cultural Competency:</i> No
	<i>After Hours Phone:</i> (619)	<i>Hospital Affiliation:</i> Ucsd Medical
	543-6222	Ctr, Ucsd La Jolla John Sally
	<i>Provider Gender:</i> Male	Thornton, San Dimas Community
	<i>License number:</i> A123065	Hospital, Lakewood Regional

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D. Directorio de proveedores de atención especializada

Med Ctr, Pacific Alliance Medical Center, San Antonio Comm Hosp, Tri City Medical Ctr, Palomar Health Downtown Campus, Pomerado Hospital, Alvarado Hospital Llc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

VINOCUR, DANIEL N

Provider ID: 64243
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR # I505
SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619) 543-2218
Provider Gender: Male
License number: A115727
NPI: 1770711830
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA:
VINOCUR, DANIEL N
Provider ID: 64394
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240
Fax:
After Hours Phone: (619) 471-9240
Provider Gender: Male
License number: A115727
NPI: 1770711830
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

WAGNER, THAO N

Provider ID: 84945
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: A123521
NPI: 1821067935

Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Scripps Green Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

WAGNER, THAO N

Provider ID: 84945
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240
Fax:
After Hours Phone: (619) 471-9240
Provider Gender: Female
License number: A123521
NPI: 1821067935
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula

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D. Directorio de proveedores de atención especializada

Vista, Scripps Memorial Hospital
Encinitas, Scripps Green
Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

WALLACE, DAVID R

Provider ID: 98888
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR # I505
SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619)
543-2218
Provider Gender: Male
License number: A136122
NPI: 1265743595
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Scripps Memorial Hospital,
Scripps Mercy Hospital, Scripps
Mercy Hospital Chula Vista,
Scripps Memorial Hospital
Encinitas, Scripps Green
Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA:
WALLACE, DAVID R
Provider ID: 98890
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240
Fax:
After Hours Phone: (619)
471-9240
Provider Gender: Male
License number: A136122
NPI: 1265743595
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Scripps Memorial Hospital,
Scripps Mercy Hospital, Scripps
Mercy Hospital Chula Vista,
Scripps Memorial Hospital
Encinitas, Scripps Green
Hospital

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

WANG, LEE L

Provider ID: 118160
Board Certified Specialty: No
UCSD RADIOLOGY AT LA
JOLLA
200 W ARBOR DR # I505
SAN DIEGO, CA 92103-1911

Phone: (619) 543-2218
Fax:
After Hours Phone: (619)
543-2218
Provider Gender: Male
License number: A146921
NPI: 1003119975
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Green Hospital,
Ucsd Medical Ctr, Ucsd La Jolla
John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

WANG, LEE L

Provider ID: 118162
Board Certified Specialty: No
UCSD RADIOLOGY AT LA
JOLLA
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (691) 471-9240
Fax:
After Hours Phone: (691)
471-9240
Provider Gender: Male
License number: A146921
NPI: 1003119975
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Green Hospital,
Ucsd Medical Ctr, Ucsd La Jolla

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D. Directorio de proveedores de atención especializada

John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☒ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

WEIHE, ELIZABETH

Provider ID: 102368
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240
Fax:
After Hours Phone: (619)
 471-9240
Provider Gender: Female
License number: A135679
NPI: 1386884302
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☒ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

WEIHE, ELIZABETH

Provider ID: 121941
Board Certified Specialty: No

UCSD MEDICAL GROUP
 200 W ARBOR DR # I505
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619)
 543-2218
Provider Gender: Female
License number: A135679
NPI: 1386884302
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☒ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

YEN, ANDREW C

Provider ID: 64263
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR # I505
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
 926-8273
Provider Gender: Male
License number: A89413
NPI: 1942499116
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Mandarin
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd
 Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☒ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

YEN, ANDREW C

Provider ID: 64398
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
 926-8273
Provider Gender: Male
License number: A89413
NPI: 1942499116
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Mandarin
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☒ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ZAKHARY, MINA M

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D. Directorio de proveedores de atención especializada

Provider ID: 84250
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240
Fax:
After Hours Phone: (619)
471-9240
Provider Gender: Male
License number: A124821
NPI: 1114185626
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Hebrew
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital Chula Vista, Scripps
Green Hospital, Ucsd Medical
Ctr, Scripps Memorial Hospital,
Scripps Mercy Hospital, Scripps
Memorial Hospital Encinitas,
Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ZINK BRODY, GORDON C
Provider ID: 115904
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC
150 W WASHINGTON ST
SAN DIEGO, CA 92103-2005

Phone: (619) 295-9729
Fax: (619) 295-2549
After Hours Phone: (619)
295-9729
Provider Gender: Male
License number: G68636
NPI: 1689610362
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado
Hospital Llc, Oak Valley Dist
Hosp, Scripps Memorial Hospital,
Scripps Mercy Hospital, Scripps
Mercy Hospital Chula Vista,
Scripps Memorial Hospital
Encinitas, Scripps Green
Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ZINK BRODY, GORDON C
Provider ID: 126192
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC
6386 ALVARADO CT STE 121
SAN DIEGO, CA 92120-4906
Phone: (619) 229-2299
Fax: (619) 229-2288
After Hours Phone: (619)
229-2299
Provider Gender: Male
License number: G68636
NPI: 1689610362
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Alvarado
Hospital Llc, Oak Valley Dist
Hosp, Scripps Memorial Hospital,
Scripps Mercy Hospital, Scripps
Mercy Hospital Chula Vista,
Scripps Memorial Hospital
Encinitas, Scripps Green
Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

RADIOLOGY DIAGNOSTIC

AL-BALAS, HASSAN A
Provider ID: 278930
Board Certified Specialty: No
HEALTH EXCEL IPA INC
6655 ALVARADO RD
SAN DIEGO, CA 92120-5208
Phone: (619) 229-3170
Fax: (619) 229-7079
After Hours Phone: (619)
229-3170
Provider Gender: Male
License number: C54326
NPI: 1336323492
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Fountain
Valley Regional Hosp And Med
Ctr, Desert Regional Med Ctr,
John F Kennedy Memorial Hosp,
Sutter Santa Rosa Regional
Hospital, California Pacific
Medical Center Van Ness

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D. Directorio de proveedores de atención especializada

Campus, Doctors Medical Center, Dameron Hospital Assoc, Regional Medical Ctr Of San Jose, Good Samaritan Hospital, St Louise Regional Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

BECKETT, RYAN D
Provider ID: 283216
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A172431
NPI: 1932561347
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BECKETT, RYAN D
Provider ID: 283218
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A172431
NPI: 1932561347
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CHENG, KAREN Y
Provider ID: 283226
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A144517
NPI: 1427430511
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CHENG, KAREN Y
Provider ID: 283228
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A144517
NPI: 1427430511
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

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D. Directorio de proveedores de atención especializada

COVELL, DUSTIN M

Provider ID: 239900
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A160221
NPI: 1942615893
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

COVELL, DUSTIN M

Provider ID: 239902
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A160221
NPI: 1942615893
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

EAJAZI, ALIREZA

Provider ID: 283521
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A171288
NPI: 1669835005
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

IPA: Ucsd Medical Group

EAJAZI, ALIREZA

Provider ID: 283523
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST
SAN DIEGO, CA 92103-2108
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A171288
NPI: 1669835005
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KATO, KAMBRIE Y

Provider ID: 280077
Board Certified Specialty: No
HEALTH EXCEL IPA INC
6655 ALVARADO RD
SAN DIEGO, CA 92120-5208
Phone: (619) 229-3170
Fax: (619) 229-7079
After Hours Phone: (619)
229-3170
Provider Gender: Female
License number: A124371

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D. Directorio de proveedores de atención especializada

NPI: 1235424284
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Doctors
 Hospital Of Manteca, Sutter
 Tracy Community Hosp, Kindred
 Hospital San Gabriel Valley,
 Kindred Hospital Santa Ana,
 Kindred Hospital Brea, Kindred
 Hospital Los Angeles, California
 Pacific Medical Center Van Ness
 Campus, Doctors Medical
 Center, West Hills Hospital
 Medical Center, Mercy Med Ctr
 Merced Comm Campus
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Health Excel Ipa Inc

MORENO, MARIO A

Provider ID: 283315
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 License number: A151572
 NPI: 1871957308
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd
 Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

MORENO, MARIO A

Provider ID: 283317
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 License number: A151572
 NPI: 1871957308
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

SCHULTZ, HEATHER M

Provider ID: 240342
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 License number: A139567
 NPI: 1871910810
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

SCHULTZ, HEATHER M

Provider ID: 240344
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 License number: A139567
 NPI: 1871910810
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

THOMSON, MATTHEW J

Provider ID: 278827
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 6655 ALVARADO RD
 SAN DIEGO, CA 92120-5208
Phone: (619) 229-3170
Fax: (619) 229-7079
After Hours Phone: (619) 229-3170
Provider Gender: Male
License number: A77597
NPI: 1134163314
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Memorial Hospital Med Ctr, California Pacific Medical Center Van Ness Campus, Doctors Medical Center, West Hills Hospital Medical Center, Salinas Valley Memorial Hosp, Providence St Jude Medical Center, Dameron Hospital Assoc, Regional Medical Ctr Of San Jose, Good Samaritan Hospital, Oconnor Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):

No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

UZQUIANO, NELSON G

Provider ID: 278831
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 6655 ALVARADO RD
 SAN DIEGO, CA 92120-5208
Phone: (619) 229-3170
Fax: (619) 229-7079
After Hours Phone: (619) 229-3170
Provider Gender: Male
License number: C166985
NPI: 1477549830
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Lakewood Regional Med Ctr, Los Robles Regional Med Ctr, Good Samaritan Hospital, Pioneers Memorial Hospital, Salinas Valley Memorial Hosp, California Pacific Medical Center Van Ness Campus
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

YORK, VINCENT M

Provider ID: 283517


Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A170712
NPI: 1790146611
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

YORK, VINCENT M


Provider ID: 283519
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A170712
NPI: 1790146611
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

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D. Directorio de proveedores de atención especializada


American Sign Language (ASL): No
Accessibility: 
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

3939 RUFFIN RD STE 102
 SAN DIEGO, CA 92123-1804
Phone: (858) 658-6500
Fax: (866) 558-4329
After Hours Phone: (858) 658-6500
Provider Gender: Male
License number: A69840
NPI: 1215982970

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: 
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc


RADIOLOGY

ALLEN, DERRICK R , MD

Provider ID: 269614
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 150 W WASHINGTON ST
 SAN DIEGO, CA 92103-2005
Phone: (619) 295-9729
Fax: (619) 342-2131
After Hours Phone: (619) 295-9729
Provider Gender: Male
License number: A69840
NPI: 1215982970
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: 
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

ALLEN, DERRICK R , MD


Provider ID: 269615
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: 
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

ALLEN, DERRICK R , MD

Provider ID: 269617
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 550 WASHINGTON ST STE 200
 SAN DIEGO, CA 92103-2243
Phone: (619) 260-7225
Fax: (866) 558-4329
After Hours Phone: (619) 260-7225
Provider Gender: Male
License number: A69840
NPI: 1215982970
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista

ANAND, NEIL

Provider ID: 278782
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 6655 ALVARADO RD
 SAN DIEGO, CA 92120-5208
Phone: (619) 229-3170
Fax: (619) 229-7079
After Hours Phone: (619) 229-3170
Provider Gender: Male
License number: A144457
NPI: 1508271149
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Torrance Memorial Medical Center, St Agnes Medical Center, Kindred Hospital Brea, Kindred Hospital Los Angeles, California Pacific Medical Center Van Ness Campus, Lakewood Regional Med Ctr, Olympia Medical Center, Pioneers Memorial Hospital, Monrovia Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: 
Hours: M-SA 9AM-5PM
Website:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

CHOU, ERIC T

Provider ID: 243395
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
150 W WASHINGTON ST
SAN DIEGO, CA 92103-2005
Phone: (858) 658-6500
Fax: (866) 558-4329
After Hours Phone: (858)
658-6500
Provider Gender: Male
License number: A96095
NPI: 1689627838
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

CHOU, ERIC T

Provider ID: 243396
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4077 5TH AVE
SAN DIEGO, CA 92103-2105
Phone: (619) 819-6501
Fax:
After Hours Phone: (619)
819-6501
Provider Gender: Male

License number: A96095
NPI: 1689627838
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

CHOU, ERIC T

Provider ID: 243397
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
3939 RUFFIN RD STE 102
SAN DIEGO, CA 92123-1804
Phone: (858) 658-6500
Fax: (866) 558-4329
After Hours Phone: (858)
658-6500
Provider Gender: Male
License number: A96095
NPI: 1689627838
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc

COOPER, JAMES A

Provider ID: 242475
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4077 5TH AVE
SAN DIEGO, CA 92103-2105
Phone: (619) 294-8111
Fax:
After Hours Phone: (619)
294-8111
Provider Gender: Male
License number: A62473
NPI: 1497708622
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: East Los
Angeles Doctors Hsp, Memorial
Hosp Of Gardena Inc, Riverside
Community Hosp, Palmdale
Regional Medical Center,
Barstow Community Hospital,
Kindred Hospital South Bay,
Loma Linda University Med Ctr
Murrieta, Coast Plaza Hospital,
Community Hospital Of
Huntington Park, Foothill
Regional Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

DOAN, LIEN N

Provider ID: 269716

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
HEALTH EXCEL IPA INC
6655 ALVARADO RD
SAN DIEGO, CA 92120-5208
Phone: (619) 229-3170
Fax: (619) 229-7079
After Hours Phone: (619)
229-3170
Provider Gender: Female
License number: A110184
NPI: 1740518547
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Pacific
Alliance Medical Center, San
Antonio Comm Hosp, Scripps
Memorial Hospital, Scripps
Mercy Hospital, Tri City Medical
Ctr, Palomar Health Downtown
Campus, Pomerado Hospital,
Alvarado Hospital Llc, Scripps
Mercy Hospital Chula Vista,
Kaweah Delta District Hosp
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

DOEMENY, JOHN M

Provider ID: 269746
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
150 W WASHINGTON ST
SAN DIEGO, CA 92103-2005
Phone: (858) 658-6500
Fax: (866) 558-4329
After Hours Phone: (858)
658-6500

Provider Gender: Male
License number: G50925
NPI: 1841243912
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

DOEMENY, JOHN M

Provider ID: 269747
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
3939 RUFFIN RD STE 102
SAN DIEGO, CA 92123-1804
Phone: (858) 658-6500
Fax: (866) 558-4329
After Hours Phone: (858)
658-6500
Provider Gender: Male
License number: G50925
NPI: 1841243912
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

DOEMENY, JOHN M

Provider ID: 269752
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
6386 ALVARADO CT STE 121
SAN DIEGO, CA 92120-4906
Phone: (619) 229-2299
Fax: (866) 558-4329
After Hours Phone: (619)
229-2299
Provider Gender: Male
License number: G50925
NPI: 1841243912
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

DOEMENY, JOHN M

Provider ID: 269753
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1809 NATIONAL AVE # 2104
SAN DIEGO, CA 92113-2113
Phone: (858) 658-6500
Fax: (866) 558-4329
After Hours Phone: (858)
658-6500

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Male
License number: G50925
NPI: 1841243912
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

DOEMENY, JOHN M

Provider ID: 269756
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4077 5TH AVE
SAN DIEGO, CA 92103-2105
Phone: (619) 294-8111
Fax: (866) 558-4329
After Hours Phone: (619) 294-8111
Provider Gender: Male
License number: G50925
NPI: 1841243912
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

DOEMENY, JOHN M
Provider ID: 269757
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
550 WASHINGTON ST STE 200
SAN DIEGO, CA 92103-2243
Phone: (619) 260-7225
Fax: (866) 558-4329
After Hours Phone: (619) 260-7225
Provider Gender: Male
License number: G50925
NPI: 1841243912
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

EVITTS, MATTHEW P

Provider ID: 278775
Board Certified Specialty: No
HEALTH EXCEL IPA INC
6655 ALVARADO RD
SAN DIEGO, CA 92120-5208
Phone: (619) 229-3170
Fax: (619) 229-7079
After Hours Phone: (619) 229-3170

Provider Gender: Male
License number: 20A18329
NPI: 1952368318
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Natividad Medical Center, Oconnor Hospital, Doctors Medical Center, Lakewood Regional Med Ctr, Good Samaritan Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

FARRELL, ROBERT S

Provider ID: 269715
Board Certified Specialty: No
HEALTH EXCEL IPA INC
6655 ALVARADO RD
SAN DIEGO, CA 92120-5208
Phone: (619) 229-3170
Fax: (619) 229-7079
After Hours Phone: (619) 229-3170
Provider Gender: Male
License number: C164406
NPI: 1952386476
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Good Samaritan Hospital, Los Robles Regional Med Ctr, Regional Medical Ctr Of San Jose, Memorial Hospital Med Ctr, Alvarado Hosp Med Ctr, California Pacific Medical Center

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Van Ness Campus, Monrovia
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

FRANKE, MARK A

Provider ID: 269632
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
3939 RUFFIN RD STE 102
SAN DIEGO, CA 92123-1804
Phone: (858) 658-6500
Fax: (866) 558-4329
After Hours Phone: (858)
658-6500
Provider Gender: Male
License number: A118792
NPI: 1114246329
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Santa Monica
Ucla Med Ctr, Ronald Reagan
Ucla Med Ctr, Alvarado Hospital
Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

FRANKE, MARK A

Provider ID: 269637
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
6386 ALVARADO CT STE 121
SAN DIEGO, CA 92120-4906
Phone: (619) 229-2299
Fax: (866) 558-4329
After Hours Phone: (619)
229-2299
Provider Gender: Male
License number: A118792
NPI: 1114246329
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Santa Monica
Ucla Med Ctr, Ronald Reagan
Ucla Med Ctr, Alvarado Hospital
Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

FRANKE, MARK A

Provider ID: 269638
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1809 NATIONAL AVE # 2104
SAN DIEGO, CA 92113-2113
Phone: (858) 658-6500
Fax: (866) 558-4329
After Hours Phone: (858)
658-6500
Provider Gender: Male
License number: A118792
NPI: 1114246329
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Santa Monica
Ucla Med Ctr, Ronald Reagan
Ucla Med Ctr, Alvarado Hospital
Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

FRANKE, MARK A

Provider ID: 269640
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
150 W WASHINGTON ST
SAN DIEGO, CA 92103-2005
Phone: (858) 658-6500
Fax: (866) 558-4329
After Hours Phone: (858)
658-6500
Provider Gender: Male
License number: A118792
NPI: 1114246329
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Santa Monica
Ucla Med Ctr, Ronald Reagan
Ucla Med Ctr, Alvarado Hospital
Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

IPA: Community Care Ipa Llc

FRANKE, MARK A

Provider ID: 269641

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4077 5TH AVE

SAN DIEGO, CA 92103-2105

Phone: (619) 294-8111

Fax: (866) 558-4329

After Hours Phone: (619)
294-8111

Provider Gender: Male

License number: A118792

NPI: 1114246329

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Santa Monica

Ucla Med Ctr, Ronald Reagan

Ucla Med Ctr, Alvarado Hospital
Llc

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

FRANKE, MARK A

Provider ID: 269642

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
550 WASHINGTON ST STE 200
SAN DIEGO, CA 92103-2243

Phone: (619) 260-7225

Fax: (866) 558-4329

After Hours Phone: (619)
260-7225

Provider Gender: Male

License number: A118792

NPI: 1114246329

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Santa Monica

Ucla Med Ctr, Ronald Reagan

Ucla Med Ctr, Alvarado Hospital
Llc

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

FREDERIKSEN, RYAN A

Provider ID: 269683

Board Certified Specialty: No

HEALTH EXCEL IPA INC

6655 ALVARADO RD
SAN DIEGO, CA 92120-5208

Phone: (619) 229-3170

Fax: (619) 229-7079

After Hours Phone: (619)
229-3170

Provider Gender: Male

License number: A108502

NPI: 1922260033

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Doctors

Medical Center, West Hills

Hospital Medical Center, Salinas

Valley Memorial Hosp,

Providence St Jude Medical

Center, Parkview Community

Hospital Medical Center, St

Bernardine Med Ctr, Community

Hosp Of San Bernardino,

Kindred Hospital Ontario,

Dameron Hospital Assoc, St

Josephs Med Center Of Stockton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

FURUBAYASHI, JILL K

Provider ID: 269684

Board Certified Specialty: No

HEALTH EXCEL IPA INC

6655 ALVARADO RD

SAN DIEGO, CA 92120-5208

Phone: (619) 229-3170

Fax: (619) 229-7079

After Hours Phone: (619)
229-3170

Provider Gender: Female

License number: A113720

NPI: 1457587073

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ronald

Reagan Ucla Med Ctr, Santa

Monica Ucla Med Ctr, Earl And

Lorraine Miller Childrens Hsp,

Long Beach Memorial Med Ctr,

Lakewood Regional Med Ctr,

Pacific Alliance Medical Center,

San Antonio Comm Hosp, Tri

City Medical Ctr, Palomar Health

Downtown Campus, Pomerado

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

GARCIA-ROJAS, XAVIER

Provider ID: 278826

Board Certified Specialty: No

HEALTH EXCEL IPA INC

6655 ALVARADO RD

SAN DIEGO, CA 92120-5208

Phone: (619) 229-3170

Fax: (619) 229-7079

After Hours Phone: (619)

229-3170

Provider Gender: Male

License number: C153827

NPI: 1083895379

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Alvarado

Hosp Med Ctr, Doctors Hospital

Of Manteca, Sutter Tracy

Community Hosp, Doctors

Medical Center, West Hills

Hospital Medical Center, Salinas

Valley Memorial Hosp,

Providence St Jude Medical

Center, Parkview Community

Hospital Medical Center, St

Bernardine Med Ctr, Community

Hosp Of San Bernardino

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

HOBART, EDWARD A

Provider ID: 269714

Board Certified Specialty: No

HEALTH EXCEL IPA INC

6655 ALVARADO RD

SAN DIEGO, CA 92120-5208

Phone: (619) 229-3170

Fax: (619) 229-7079

After Hours Phone: (619)

229-3170

Provider Gender: Male

License number: C161765

NPI: 1942390687

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Memorial

Hospital Med Ctr, Pioneers

Memorial Hospital, Salinas Valley

Memorial Hosp, Alvarado Hosp

Med Ctr, Monrovia Memorial

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

HWANG, JANICE J

Provider ID: 269766

Board Certified Specialty: No

HEALTH EXCEL IPA INC

6655 ALVARADO RD

SAN DIEGO, CA 92120-5208

Phone: (619) 229-3170

Fax: (619) 229-7079

After Hours Phone: (619)

229-3170

Provider Gender: Female

License number: C147940

NPI: 1164412763

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Memorial

Hospital Med Ctr, Alvarado Hosp

Med Ctr, California Pacific

Medical Center Van Ness

Campus, Doctors Medical

Center, West Hills Hospital

Medical Center, Mercy Med Ctr

Merced Comm Campus, Salinas

Valley Memorial Hosp,

Providence St Jude Medical

Center, Dameron Hospital Assoc,

Regional Medical Ctr Of San

Jose

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

KAZEM, FATIMA

Provider ID: 269666

Board Certified Specialty: No

HEALTH EXCEL IPA INC

6655 ALVARADO RD

SAN DIEGO, CA 92120-5208

Phone: (619) 229-3170

Fax: (619) 229-7079

After Hours Phone: (619)

229-3170

Provider Gender: Female

License number: A84658

NPI: 1083673644

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: St Bernardine Med Ctr, Community Hosp Of San Bernardino, Kindred Hospital Ontario, Dameron Hospital Assoc, St Josephs Med Center Of Stockton, Regional Medical Ctr Of San Jose, Good Samaritan Hospital, Oconnor Hospital, El Camino Hospital Los Gatos, Olympia Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

LOTAN, ROI M

Provider ID: 269736
Board Certified Specialty: No
HEALTH EXCEL IPA INC
6655 ALVARADO RD
SAN DIEGO, CA 92120-5208
Phone: (619) 229-3170
Fax: (619) 229-7079
After Hours Phone: (619) 229-3170
Provider Gender: Male
License number: C144854
NPI: 1518175637
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado Hosp Med Ctr, California Pacific Medical Center Van Ness Campus, Doctors Medical Center, West Hills Hospital Medical Center, Mercy Med Ctr Merced Comm Campus, Salinas Valley Memorial Hosp,

Providence St Jude Medical Center, Dameron Hospital Assoc, Regional Medical Ctr Of San Jose, Good Samaritan Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

LUBISICH, JOHN P

Provider ID: 244953
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
6655 ALVARADO RD
SAN DIEGO, CA 92120-5208
Phone: (866) 558-4320
Fax:
After Hours Phone: (866) 558-4320
Provider Gender: Male
License number: G77575
NPI: 1194863902
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

LUBISICH, JOHN P

Provider ID: 244954
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
3939 RUFFIN RD STE 102
SAN DIEGO, CA 92123-1804
Phone: (858) 658-6500
Fax: (866) 558-4329
After Hours Phone: (858) 658-6500
Provider Gender: Male
License number: G77575
NPI: 1194863902
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MARTIN, ANDREW J

Provider ID: 269777
Board Certified Specialty: No
HEALTH EXCEL IPA INC
6655 ALVARADO RD
SAN DIEGO, CA 92120-5208
Phone: (619) 229-3170
Fax: (619) 229-7079
After Hours Phone: (619) 229-3170
Provider Gender: Male
License number: A70047
NPI: 1104883693

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Regional
Medical Ctr Of San Jose,
Alvarado Hosp Med Ctr,
California Pacific Medical Center
Van Ness Campus
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

MOFFIT, BRIAN J

Provider ID: 269525
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
150 W WASHINGTON ST
SAN DIEGO, CA 92103-2005
Phone: (858) 658-6500
Fax: (866) 558-4329
After Hours Phone: (858)
658-6500
Provider Gender: Male
License number: G51551
NPI: 1508817305
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MOFFIT, BRIAN J

Provider ID: 269526
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
3939 RUFFIN RD STE 102
SAN DIEGO, CA 92123-1804
Phone: (858) 658-6500
Fax: (866) 558-4329
After Hours Phone: (858)
658-6500
Provider Gender: Male
License number: G51551
NPI: 1508817305
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MOFFIT, BRIAN J

Provider ID: 269530
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
6386 ALVARADO CT STE 121
SAN DIEGO, CA 92120-4906

Phone: (619) 229-2299
Fax: (866) 558-4329
After Hours Phone: (619)
229-2299
Provider Gender: Male
License number: G51551
NPI: 1508817305
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MOFFIT, BRIAN J

Provider ID: 269531
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1809 NATIONAL AVE # 2104
SAN DIEGO, CA 92113-2113
Phone: (858) 658-6500
Fax: (866) 558-4329
After Hours Phone: (858)
658-6500
Provider Gender: Male
License number: G51551
NPI: 1508817305
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc</p>	<p>COMMUNITY CARE IPA LLC 4077 5TH AVE SAN DIEGO, CA 92103-2105 Phone: (619) 294-8111 Fax: (866) 558-4329 After Hours Phone: (619) 294-8111 Provider Gender: Male License number: G51551 NPI: 1508817305 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc</p>	<p>Medical Center, Pioneers Memorial Hospital, Good Samaritan Hospital, Natividad Medical Center, Alvarado Hosp Med Ctr, El Camino Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Health Excel Ipa Inc</p>
<p>MOFFIT, BRIAN J Provider ID: 269534 Board Certified Specialty: No COMMUNITY CARE IPA LLC 550 WASHINGTON ST STE 200 SAN DIEGO, CA 92103-2243 Phone: (619) 260-7225 Fax: (866) 558-4329 After Hours Phone: (619) 260-7225 Provider Gender: Male License number: G51551 NPI: 1508817305 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc</p>	<p>RAMBHIA, SURAJ H Provider ID: 269772 Board Certified Specialty: No HEALTH EXCEL IPA INC 6655 ALVARADO RD SAN DIEGO, CA 92120-5208 Phone: (619) 229-3170 Fax: (619) 229-7079 After Hours Phone: (619) 229-3170 Provider Gender: Male License number: A163223 NPI: 1578805974 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Doctors</p>	<p>RATTNER, ZACHARY G Provider ID: 265328 Board Certified Specialty: No HEALTH EXCEL IPA INC 995 GATEWAY CENTER WAY STE 207 SAN DIEGO, CA 92102-4544 Phone: (619) 263-9729 Fax: (619) 263-9730 After Hours Phone: (619) 263-9729 Provider Gender: Male License number: G86843 NPI: 1003867276 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Memorial Hospital, Paradise Valley Hospital, Scripps Memorial Hospital Encinitas, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM</p>
<p>MOFFIT, BRIAN J Provider ID: 269536 Board Certified Specialty: No</p>		

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D. Directorio de proveedores de atención especializada

Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc

RATTNER, ZACHARY G , MD

Provider ID: 269895
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 995 GATEWAY CENTER WAY
 STE 207
 SAN DIEGO, CA 92102-4544
Phone: (619) 263-9729
Fax: (619) 263-9730
After Hours Phone: (619)
 263-9729
Provider Gender: Male
License number: G86843
NPI: 1003867276
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Paradise
 Valley Hospital, Scripps
 Memorial Hospital Encinitas,
 Scripps Mercy Hospital, Scripps
 Mercy Hospital Chula Vista,
 Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc

RIAD, SHAREEF M

Provider ID: 269727
Board Certified Specialty: No
 HEALTH EXCEL IPA INC

6655 ALVARADO RD
 SAN DIEGO, CA 92120-5208
Phone: (619) 229-3170
Fax: (619) 229-7079
After Hours Phone: (619)
 229-3170

Provider Gender: Male
License number: A106536
NPI: 1417111477
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Doctors
 Medical Center, West Hills
 Hospital Medical Center, Salinas
 Valley Memorial Hosp, Riverside
 Community Hosp, Parkview
 Community Hospital Medical
 Center, St Bernardine Med Ctr,
 Community Hosp Of San
 Bernardino, Kindred Hospital
 Ontario, Ucsd La Jolla John Sally
 Thornton, Dameron Hospital
 Assoc

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
 No

☯ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

SABIR, SHARJEEL H

Provider ID: 269857
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 4077 5TH AVE
 SAN DIEGO, CA 92103-2105
Phone: (619) 862-6500
Fax:
After Hours Phone: (619)
 862-6500

Provider Gender: Male
License number: C158962
NPI: 1154599314
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No

☯ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

SCHWARTZBERG, ROSS E

Provider ID: 245624
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 150 W WASHINGTON ST
 SAN DIEGO, CA 92103-2005
Phone: (619) 295-9729
Fax: (619) 295-2549
After Hours Phone: (619)
 295-9729
Provider Gender: Male
License number: G72997
NPI: 1215976766

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Alvarado
 Hospital Llc

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
 No

☯ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

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D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Community Care Ipa Llc

SCHWARTZBERG, ROSS E

Provider ID: 245625
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
3939 RUFFIN RD STE 102
SAN DIEGO, CA 92123-1804
Phone: (858) 658-6500

Fax:
After Hours Phone: (858)
658-6500

Provider Gender: Male
License number: G72997
NPI: 1215976766

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado
Hospital Llc

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):

No
♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):
IPA: Community Care Ipa Llc

SCHWARTZBERG, ROSS E

Provider ID: 245626
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4077 5TH AVE
SAN DIEGO, CA 92103-2105
Phone: (619) 294-8111

Fax:
After Hours Phone: (619)
294-8111

Provider Gender: Male
License number: G72997
NPI: 1215976766

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Alvarado
Hospital Llc

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):
IPA: Community Care Ipa Llc

SCHWARTZBERG, ROSS E

Provider ID: 245631
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
6386 ALVARADO CT STE 121
SAN DIEGO, CA 92120-4906
Phone: (619) 229-2299

Fax:
After Hours Phone: (619)
229-2299

Provider Gender: Male
License number: G72997
NPI: 1215976766

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Alvarado
Hospital Llc

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):
IPA: Community Care Ipa Llc

SCHWARTZBERG, ROSS E

Provider ID: 245632
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
550 WASHINGTON ST STE 200
SAN DIEGO, CA 92103-2243
Phone: (619) 260-7225

Fax:
After Hours Phone: (619)
260-7225

Provider Gender: Male
License number: G72997
NPI: 1215976766

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Alvarado
Hospital Llc

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):
IPA: Community Care Ipa Llc

SINGH, AJAY K

Provider ID: 269730
Board Certified Specialty: No
HEALTH EXCEL IPA INC
6655 ALVARADO RD
SAN DIEGO, CA 92120-5208
Phone: (619) 229-3170

Fax: (619) 229-7079
After Hours Phone: (619)
229-3170

Provider Gender: Male
License number: C167621
NPI: 1215927579

Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p><i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Good Samaritan Hospital, Los Robles Regional Med Ctr, Alvarado Hosp Med Ctr, West Hills Hospital Medical Center, Pioneers Memorial Hospital, Memorial Hospital Med Ctr, Sutter Santa Rosa Regional Hospital, Monrovia Memorial Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Health Excel Ipa Inc</p>	<p><i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc</p>	<p>150 W WASHINGTON ST SAN DIEGO, CA 92103-2005 <i>Phone:</i> (858) 658-6500 <i>Fax:</i> (866) 558-4329 <i>After Hours Phone:</i> (858) 658-6500 <i>Provider Gender:</i> Female <i>License number:</i> A69607 <i>NPI:</i> 1629029335 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Vibra Hospital Of San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc</p>
<p>STRAKA, CHRISTOPHER A <i>Provider ID:</i> 276875 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 16918 DOVE CANYON RD STE 103 SAN DIEGO, CA 92127-3455 <i>Phone:</i> (858) 649-5100 <i>Fax:</i> (858) 649-5099 <i>After Hours Phone:</i> (858) 649-5100 <i>Provider Gender:</i> Male <i>License number:</i> A145989 <i>NPI:</i> 1801281399 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 17/120</p>	<p>TENA, ROWENA G , MD <i>Provider ID:</i> 265583 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 1809 NATIONAL AVE # 2104 SAN DIEGO, CA 92113-2113 <i>Phone:</i> (858) 658-6500 <i>Fax:</i> (866) 558-4329 <i>After Hours Phone:</i> (858) 658-6500 <i>Provider Gender:</i> Female <i>License number:</i> A69607 <i>NPI:</i> 1629029335 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Vibra Hospital Of San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc</p>	<p>TENA, ROWENA G , MD <i>Provider ID:</i> 269827 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 3939 RUFFIN RD STE 102 SAN DIEGO, CA 92123-1804 <i>Phone:</i> (858) 658-6500 <i>Fax:</i> (866) 558-4329 <i>After Hours Phone:</i> (858) 658-6500 <i>Provider Gender:</i> Female <i>License number:</i> A69607 <i>NPI:</i> 1629029335 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No</p>
<p>TENA, ROWENA G , MD <i>Provider ID:</i> 269822 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC</p>		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Vibra Hospital Of San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

TENA, ROWENA G , MD

Provider ID: 269828

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
6386 ALVARADO CT STE 121
SAN DIEGO, CA 92120-4906

Phone: (619) 229-2299

Fax: (866) 558-4329

After Hours Phone: (619)

229-2299

Provider Gender: Female

License number: A69607

NPI: 1629029335

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Vibra Hospital Of San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

TENA, ROWENA G , MD

Provider ID: 269830

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4077 5TH AVE

SAN DIEGO, CA 92103-2105

Phone: (619) 294-8111

Fax: (866) 558-4329

After Hours Phone: (619)

294-8111

Provider Gender: Female

License number: A69607

NPI: 1629029335

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Vibra Hospital Of San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

TENA, ROWENA G , MD

Provider ID: 269832

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
550 WASHINGTON ST STE 200
SAN DIEGO, CA 92103-2243

Phone: (619) 260-7225

Fax: (866) 558-4329

After Hours Phone: (619)

260-7225

Provider Gender: Female

License number: A69607

NPI: 1629029335

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Vibra Hospital Of San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

VAKILIAN, SIAVOSH

Provider ID: 283205

Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC
3366 5TH AVE

SAN DIEGO, CA 92103-5713

Phone: (619) 230-0400

Fax: (858) 429-7936

After Hours Phone: (619)

230-0400

Provider Gender: Male

License number: A133482

NPI: 1427456151

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Pioneers Memorial Hospital, El Centro Regional Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

♿ Accessibility:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

VAKILIAN, SIAVOSH

Provider ID: 283207

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123-1338

Phone: (858) 505-4100

Fax: (858) 429-7939

After Hours Phone: (858)

505-4100

Provider Gender: Male

License number: A133482

NPI: 1427456151

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Pioneers
Memorial Hospital, El Centro
Regional Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

VANFLEET, ROBERT H

Provider ID: 269713

Board Certified Specialty: No
HEALTH EXCEL IPA INC
6655 ALVARADO RD
SAN DIEGO, CA 92120-5208

Phone: (619) 229-3170

Fax: (619) 229-7079

After Hours Phone: (619)
229-3170

Provider Gender: Male

License number: G147136

NPI: 1851398143

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Providence St
Jude Medical Center, Alvarado
Hosp Med Ctr, Regional Medical
Ctr Of San Jose, Olympia
Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

VRIDHACHALAM, SANJEEVI

Provider ID: 269744

Board Certified Specialty: No
HEALTH EXCEL IPA INC
6655 ALVARADO RD
SAN DIEGO, CA 92120-5208

Phone: (619) 229-3170

Fax: (619) 229-7079

After Hours Phone: (619)

229-3170

Provider Gender: Male

License number: A75463

NPI: 1598754459

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Doctors
Medical Center, West Hills
Hospital Medical Center, Salinas

Valley Memorial Hosp,
Providence St Jude Medical
Center, Hoag Memorial Hospital
Presbyterian, Parkview
Community Hospital Medical
Center, St Bernardine Med Ctr,
Community Hosp Of San
Bernardino, Kindred Hospital
Ontario, Dameron Hospital Assoc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

YUH, THERESA M

Provider ID: 269670

Board Certified Specialty: No
HEALTH EXCEL IPA INC
6655 ALVARADO RD
SAN DIEGO, CA 92120-5208

Phone: (619) 229-3170

Fax: (619) 229-7079

After Hours Phone: (619)
229-3170

Provider Gender: Female

License number: C154382

NPI: 1265523930

Provider English Spoken: Yes

Provider Language(s) Spoken:

Korean

Cultural Competency: No

Hospital Affiliation: Doctors
Hospital Of Manteca, Sutter
Tracy Community Hosp,
Memorial Hospital Med Ctr,
Alvarado Hospital Llc, California
Pacific Medical Center Van Ness
Campus, Olympia Medical
Center, Mark Twain Medical

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D. Directorio de proveedores de atención especializada

Center, Pioneers Memorial
Hospital, Palmdale Regional
Medical Center, Oak Valley Dist
Hosp
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

REGISTERED DIETITIAN / NUTRITIONIST

ROBERTS, TRACI L

Provider ID: 268240
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: 86084895
NPI: 1003385691
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Ucsd Medical Group
SIEVERING, DENISE
Provider ID: 268250
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: 86061948
NPI: 1356478929
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

REGISTERED PHYSICAL THERAPIST

AGRIMIS, JESSICA E

Provider ID: 206957
Board Certified Specialty: No
UCSD MEDICAL GROUP
8929 UNIVERSITY CENTER LN
STE 200
SAN DIEGO, CA 92122-1008

Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: PT295027
NPI: 1790203388
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

AGUERO, PETER D

Provider ID: 258298
Board Certified Specialty: No
UCSD MEDICAL GROUP
8929 UNIVERSITY CENTER LN
STE 200
SAN DIEGO, CA 92122-1008
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: PT43257
NPI: 1982120861
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*

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D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

AGUERO, PETER D

Provider ID: 258299
Board Certified Specialty: No
UCSD MEDICAL GROUP
9333 GENESEE AVE # 310
SAN DIEGO, CA 92121-2111
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: PT43257
NPI: 1982120861
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

ANDERSON, ALEXANDRA

Provider ID: 265961
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9333 GENESEE AVE STE 350
SAN DIEGO, CA 92121-2103
Phone: (858) 455-6460
Fax: (858) 455-7197
After Hours Phone: (858)
455-6460
Provider Gender: Female

License number: PT297661
NPI: 1346870706
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

BARTZ, BRYAN M

Provider ID: 273380
Board Certified Specialty: No
UCSD MEDICAL GROUP
16950 VIA TAZON
SAN DIEGO, CA 92127-1607
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: PT40270
NPI: 1669818993
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

IPA: Ucsd Medical Group

BARTZ, BRYAN M

Provider ID: 273381
Board Certified Specialty: No
UCSD MEDICAL GROUP
8929 UNIVERSITY CENTER LN
STE 200
SAN DIEGO, CA 92122-1008
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: PT40270
NPI: 1669818993
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BECHERER, KELLEY D

Provider ID: 270969
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
3760 CONVOY ST STE 101
SAN DIEGO, CA 92111-3743
Phone: (855) 543-0333
Fax:
After Hours Phone: (855)
543-0333
Provider Gender: Female
License number: PT43240

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

NPI: 1306219472

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Ucsd Medical Group

BERGERON, PATRICK R

Provider ID: 206534

Board Certified Specialty: No

UCSD MEDICAL GROUP

16950 VIA TAZON

SAN DIEGO, CA 92127-1607

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: PT41083

NPI: 1285061390

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

BLOCKER, NIRIT S

Provider ID: 76189

Board Certified Specialty: No

LOGAN HEIGHTS FAMILY

HEALTH CENTER

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Provider Gender: Female

License number: PT30272

NPI: 1457689309

Provider English Spoken: Yes

Provider Language(s) Spoken:

Hebrew

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Logan Heights

Family Health Center

IPA:

BUNOSKY, ABIGAIL S

Provider ID: 246022

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: PT40519

NPI: 1780018416

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

BUNOSKY, ABIGAIL S

Provider ID: 258304

Board Certified Specialty: No

UCSD MEDICAL GROUP

16950 VIA TAZON

SAN DIEGO, CA 92127-1607

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: PT40519

NPI: 1780018416

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

BURGESS, CATHERINE E

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Provider ID: 258347
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: PT35850
NPI: 1205287687
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CORTEZ, AARON J

Provider ID: 279194
Board Certified Specialty: No
UCSD MEDICAL GROUP
16950 VIA TAZON
SAN DIEGO, CA 92127-1607
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: PT293439
NPI: 1639693187
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd

Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

DAHMS, MADELYNN

Provider ID: 129949
Board Certified Specialty: No
LOGAN HEIGHTS FAMILY
HEALTH CENTER
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Provider Gender: Female
License number: PT295463
NPI: 1245712702
Provider English Spoken: Yes
Provider Language(s) Spoken:
Sign Language
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Logan Heights
Family Health Center
IPA:

DANG, ERIC A

Provider ID: 258363

Board Certified Specialty: No
UCSD MEDICAL GROUP
8929 UNIVERSITY CENTER LN
STE 200
SAN DIEGO, CA 92122-1008
Phone: (858) 543-3333
Fax: (858) 657-1809
After Hours Phone: (858)
543-3333
Provider Gender: Male
License number: PT292174
NPI: 1891237756
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

DANG, KAYLEE T

Provider ID: 279261
Board Certified Specialty: No
UCSD MEDICAL GROUP
16950 VIA TAZON
SAN DIEGO, CA 92127-1607
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: PT295178
NPI: 1316426356
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Ctr Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group	SAN DIEGO, CA 92127-1607 Phone: (800) 926-8273 Fax: (888) 539-8781 After Hours Phone: (800) 926-8273 Provider Gender: Female License number: PT298134 NPI: 1942818505 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group	Min/Max Age: 18/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Health Excel Ipa Inc
DELASANTOS, CAMERON J Provider ID: 269849 Board Certified Specialty: No COMMUNITY CARE IPA LLC 295 G ST SAN DIEGO, CA 92101-6808 Phone: (619) 238-4318 Fax: (619) 238-4320 After Hours Phone: (619) 238-4318 Provider Gender: Male License number: PT293413 NPI: 1689199192 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc	FARRAR, COURTNEY L Provider ID: 255873 Board Certified Specialty: No HEALTH EXCEL IPA INC 7525 METROPOLITAN DR STE 302 SAN DIEGO, CA 92108-4404 Phone: (619) 325-1161 Fax: (619) 325-1717 After Hours Phone: (619) 325-1161 Provider Gender: Male License number: PT292062 NPI: 1124577952 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: Yes	HARRAH, WILLIAM A Provider ID: 269689 Board Certified Specialty: No COMMUNITY CARE IPA LLC 9333 GENESEE AVE # 350B SAN DIEGO, CA 92121-2111 Phone: (858) 455-8584 Fax: (858) 455-7302 After Hours Phone: (858) 455-8584 Provider Gender: Male License number: PT9919 NPI: 1831297027 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc
ELANDT, EMILY Provider ID: 285183 Board Certified Specialty: No UCSD MEDICAL GROUP 16950 VIA TAZON	HEIM, JESSICA L Provider ID: 124037 Board Certified Specialty: No SAN DIEGO SPINE AND SPORT INC 3760 CONVOY ST STE 100 SAN DIEGO, CA 92111-3743	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Phone: (858) 573-9368
Fax:
After Hours Phone: (858)
573-9368
Provider Gender: Female
License number: PT294241
NPI: 1295241537
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 7AM-6PM, SA
7AM-2PM
Website:
www.spineandsport.com
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

HEIM, JESSICA L
Provider ID: 269760
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
3760 CONVOY ST STE 100
SAN DIEGO, CA 92111-3743
Phone: (858) 573-9368
Fax: (858) 874-0582
After Hours Phone: (858)
573-9368
Provider Gender: Female
License number: PT294241
NPI: 1295241537
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

JACOBSON, PHILIP N
Provider ID: 282815
Board Certified Specialty: No
HEALTH EXCEL IPA INC
7510 CLAIREMONT MESA
BLVD STE 103
SAN DIEGO, CA 92111-1539
Phone: (858) 277-2227
Fax: (747) 900-2873
After Hours Phone: (858)
277-2227
Provider Gender: Male
License number: PT292630
NPI: 1053883033
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish

Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

JUNG, CALVIN D
Provider ID: 271605
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9909 MIRA MESA BLVD STE
120
SAN DIEGO, CA 92131-1060

Phone: (858) 693-0436
Fax: (858) 693-0437
After Hours Phone: (858)
693-0436
Provider Gender: Male
License number: PT42181
NPI: 1972997690
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

KAMPH, ALEXANDRA D
Provider ID: 271606
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9909 MIRA MESA BLVD STE
120
SAN DIEGO, CA 92131-1060
Phone: (619) 448-4860
Fax:
After Hours Phone: (619)
448-4860
Provider Gender: Female
License number: PT41577
NPI: 1801298112
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

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D. Directorio de proveedores de atención especializada

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

LLOYD, CHRISTOPHER J
Provider ID: 117122
Board Certified Specialty: No
SAN DIEGO SPINE AND
SPORT INC
3760 CONVOY ST STE 100
SAN DIEGO, CA 92111-3743
Phone: (858) 573-9368

Fax:
After Hours Phone: (858)
573-9368
Provider Gender: Male
License number: PT43591
NPI: 1205292356
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Portuguese, Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ *Accessibility:* W
Hours: M-F 7AM-6PM, SA
7AM-2PM
Website:
www.spineandsport.com
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

LLOYD, CHRISTOPHER J
Provider ID: 271014
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
295 G ST
SAN DIEGO, CA 92101-6808

Phone: (888) 208-8526
Fax:
After Hours Phone: (888)
208-8526
Provider Gender: Male
License number: PT43591
NPI: 1205292356
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Portuguese, Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MC ELROY, CARTER J
Provider ID: 206522
Board Certified Specialty: No
UCSD MEDICAL GROUP
8929 UNIVERSITY CENTER LN
STE 200
SAN DIEGO, CA 92122-1008
Phone: (855) 543-0333

Fax: (858) 657-6873
After Hours Phone: (855)
543-0333
Provider Gender: Male
License number: PT26005
NPI: 1114472230
Provider English Spoken: Yes
Provider Language(s) Spoken:
Thai
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MC ELROY, CARTER J
Provider ID: 206523
Board Certified Specialty: No
UCSD MEDICAL GROUP
16950 VIA TAZON
SAN DIEGO, CA 92127-1607
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: PT26005
NPI: 1114472230
Provider English Spoken: Yes
Provider Language(s) Spoken:
Thai
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MITCHELL, JEFFREY A
Provider ID: 127532
Board Certified Specialty: No
UCSD MEDICAL GROUP
4520 EXECUTIVE DR # 1
SAN DIEGO, CA 92121-3018

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 657-8200
 Fax:
 After Hours Phone: (858) 657-8200
 Provider Gender: Male
 License number: PT37484
 NPI: 1497827638
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

MOELLER, LISA K
 Provider ID: 258405
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-6530
 Fax: (619) 543-7864
 After Hours Phone: (619) 543-6530
 Provider Gender: Female
 License number: PT18807
 NPI: 1033664677
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):

No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

NALBANDIAN, SARAH
 Provider ID: 210313
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8929 UNIVERSITY CENTER LN
 STE 200
 SAN DIEGO, CA 92122-1008
 Phone: (855) 540-3333
 Fax: (858) 657-1809
 After Hours Phone: (855) 540-3333
 Provider Gender: Female
 License number: PT295291
 NPI: 1871069922
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

NALBANDIAN, SARAH
 Provider ID: 210314
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 16950 VIA TAZON
 SAN DIEGO, CA 92127-1607

Phone: (800) 926-8273
 Fax: (858) 657-1809
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: PT295291
 NPI: 1871069922
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

NEGRETE, KRISTINE C
 Provider ID: 201316
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8929 UNIVERSITY CENTER LN
 STE 200
 SAN DIEGO, CA 92122-1008
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: PT295226
 NPI: 1528536638
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):

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D. Directorio de proveedores de atención especializada

<p>No ☯ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group</p>	<p><i>Phone:</i> (858) 249-0832 <i>Fax:</i> (858) 657-1809 <i>After Hours Phone:</i> (858) 249-0832 <i>Provider Gender:</i> Female <i>License number:</i> PT291757 <i>NPI:</i> 1992210090 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group</p>	<p>☯ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc</p>
<p>NGUYEN, HARRY D <i>Provider ID:</i> 271871 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 16950 VIA TAZON SAN DIEGO, CA 92127-1607 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Male <i>License number:</i> PT294903 <i>NPI:</i> 1629558499 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group</p>	<p>OWENS, JADRIANE C <i>Provider ID:</i> 269738 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 585 SATURN BLVD STE A SAN DIEGO, CA 92154-4721 <i>Phone:</i> (619) 591-1190 <i>Fax:</i> (619) 565-1656 <i>After Hours Phone:</i> (619) 591-1190 <i>Provider Gender:</i> Female <i>License number:</i> PT292222 <i>NPI:</i> 1689112179 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No</p>	<p>POGASIC, SETH <i>Provider ID:</i> 130057 <i>Board Certified Specialty:</i> No SPINE AND SPORT PHYSICAL THERAPY 3760 CONVOY ST STE 100 SAN DIEGO, CA 92111-3743 <i>Phone:</i> (855) 344-5870 <i>Fax:</i> <i>After Hours Phone:</i> (855) 344-5870 <i>Provider Gender:</i> Male <i>License number:</i> PT294961 <i>NPI:</i> 1407361132 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☯ <i>Accessibility:</i> W <i>Hours:</i> M-F 7AM-6PM, SA 7AM-2PM <i>Website:</i> www.spineandsport.com <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc</p>
<p>NUTHALL, KAITLIN M <i>Provider ID:</i> 202326 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 8929 UNIVERSITY CENTER LN STE 200 SAN DIEGO, CA 92122-1008</p>	<p>POGASIC, SETH <i>Provider ID:</i> 269675 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 3760 CONVOY ST STE 101 SAN DIEGO, CA 92111-3743</p>	<p>POGASIC, SETH <i>Provider ID:</i> 269675 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 3760 CONVOY ST STE 101 SAN DIEGO, CA 92111-3743</p>

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D. Directorio de proveedores de atención especializada

Phone: (858) 537-9368

Fax:

After Hours Phone: (858)
537-9368

Provider Gender: Male

License number: PT294961

NPI: 1407361132

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

RUDD, CHRISTOPHER D

Provider ID: 207560

Board Certified Specialty: No
UCSD MEDICAL GROUP

16950 VIA TAZON

SAN DIEGO, CA 92127-1607

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: PT291997

NPI: 1831539337

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

RUTKOWSKI, KENNETH T

Provider ID: 258432

Board Certified Specialty: No

UCSD MEDICAL GROUP

16950 VIA TAZON

SAN DIEGO, CA 92127-1607

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: PT40227

NPI: 1629121488

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

SANO, NISHIKI

Provider ID: 276718

Board Certified Specialty: No

UCSD MEDICAL GROUP

16950 VIA TAZON

SAN DIEGO, CA 92127-1607

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: PT296276

NPI: 1497399091

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

SHAH, ZALAK

Provider ID: 269676

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

295 G ST

SAN DIEGO, CA 92101-6808

Phone: (619) 238-4318

Fax:

After Hours Phone: (619)

238-4318

Provider Gender: Female

License number: PT296627

NPI: 1952855975

Provider English Spoken: Yes

Provider Language(s) Spoken:

Gujarati, Hindi

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

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D. Directorio de proveedores de atención especializada

Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SKINNER, NICOLE J

Provider ID: 206547
Board Certified Specialty: No
UCSD MEDICAL GROUP
16950 VIA TAZON
SAN DIEGO, CA 92127-1607
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: PT18043
NPI: 1386964997
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

STREM, BRENDAN S

Provider ID: 117197
Board Certified Specialty: No
SAN DIEGO SPINE AND
SPORT INC
3760 CONVOY ST STE 100
SAN DIEGO, CA 92111-3743
Phone: (858) 573-9368
Fax: (858) 874-0582
After Hours Phone: (858)
573-9368

Provider Gender: Male
License number: PT38107
NPI: 1033498084
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-F 7AM-6PM, SA
7AM-2PM
Website:
www.spineandsport.com
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

STREM, BRENDAN S

Provider ID: 238450
Board Certified Specialty: No
HEALTH EXCEL IPA INC
3760 CONVOY ST STE 100
SAN DIEGO, CA 92111-3743
Phone: (858) 573-9368
Fax: (858) 874-0582
After Hours Phone: (858)
573-9368
Provider Gender: Male
License number: PT38107
NPI: 1033498084
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

STREM, BRENDAN S

Provider ID: 271424
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
3760 CONVOY ST STE 100
SAN DIEGO, CA 92111-3743
Phone: (858) 573-9368
Fax: (858) 874-0582
After Hours Phone: (858)
573-9368
Provider Gender: Male
License number: PT38107
NPI: 1033498084
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

THOMASON, ERICA M

Provider ID: 271593
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9909 MIRA MESA BLVD
SAN DIEGO, CA 92131-1056
Phone: (619) 448-4860
Fax:
After Hours Phone: (619)
448-4860
Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: PT296321
NPI: 1740747484
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

TROYER, CORY

Provider ID: 206469
Board Certified Specialty: No
UCSD MEDICAL GROUP
8929 UNIVERSITY CENTER LN
STE 200
SAN DIEGO, CA 92122-1008
Phone: (858) 543-0333
Fax: (888) 539-8781
After Hours Phone: (858)
543-0333
Provider Gender: Female
License number: PT294205
NPI: 1124577671
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Ucsd Medical Group
UNDERWOOD, KIRA R
Provider ID: 258531
Board Certified Specialty: No
UCSD MEDICAL GROUP
8929 UNIVERSITY CENTER LN
STE 200
SAN DIEGO, CA 92122-1008
Phone: (858) 543-0333
Fax: (858) 657-1809
After Hours Phone: (858)
543-0333
Provider Gender: Female
License number: PT294137
NPI: 1023526449

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

VALENTINE, ANN T

Provider ID: 258536
Board Certified Specialty: No
UCSD MEDICAL GROUP
8929 UNIVERSITY CENTER LN
STE 200
SAN DIEGO, CA 92122-1008
Phone: (855) 543-0333
Fax: (858) 657-1809
After Hours Phone: (855)
543-0333
Provider Gender: Female
License number: PT35485

NPI: 1649727462
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

VAN DYKE, JASON P

Provider ID: 76188
Board Certified Specialty: No
CITY HEIGHTS FAMILY
HEALTH CENTERS INC
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619)
515-2400
Provider Gender: Male
License number: PT25155
NPI: 1487658720
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Group(s): City Heights
Family Health Centers Inc
IPA:

WALKER, JULIE C

Provider ID: 258489
Board Certified Specialty: No
UCSD MEDICAL GROUP
8929 UNIVERSITY CENTER LN
STE 200
SAN DIEGO, CA 92122-1008
Phone: (855) 543-0333
Fax: (858) 535-6422
After Hours Phone: (855)
543-0333
Provider Gender: Female
License number: PT292806
NPI: 1720489503

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

⚭ Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

WILLIAMS, STACY M

Provider ID: 259683
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: PT37862

NPI: 1689962169
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
⚭ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

WILLIAMS, STACY M

Provider ID: 259684
Board Certified Specialty: No
UCSD MEDICAL GROUP
4520 EXECUTIVE DR # 1
SAN DIEGO, CA 92121-3018
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: PT37862
NPI: 1689962169
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
⚭ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Ucsd Medical Group

RHEUMATOLOGY

CHANG, JOHANNA C

Provider ID: 246394
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY
SAN DIEGO, CA 92123-4232
Phone: (858) 966-8082
Fax:
After Hours Phone: (858)
966-8082
Provider Gender: Female
License number: A98479
NPI: 1821242199

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No

⚭ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

CHIRASEVEENUPRAPUND, PETER

Provider ID: 283268
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123-4232

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 966-8082
Fax: (858) 966-6791
After Hours Phone: (858) 966-8082
Provider Gender: Male
License number: A68277
NPI: 1467518209
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Childrens Hosp And Resrch Ctr
At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

MABAQUIAO, ARTHUR R
Provider ID: 285373
Board Certified Specialty: No
HEALTH EXCEL IPA INC
5030 CAMINO DE LA SIESTA
STE 106
SAN DIEGO, CA 92108-3117
Phone: (619) 334-4869
Fax: (619) 334-4940
After Hours Phone: (619)
334-4869
Provider Gender: Male
License number: A61769
NPI: 1730271933
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes

Min/Max Age: 10/100
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M,TU,TH 9AM-5PM, W,F
9AM-12PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

MIDDLETON, GREGORY D
Provider ID: 64085
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Male
License number: C54037
NPI: 1104891290
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

PAZIRANDEH, MAHMOOD, MD
Provider ID: 209535
Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC

3633 CAMINO DEL RIO S STE
300
SAN DIEGO, CA 92108-4014
Phone: (619) 287-9730
Fax: (619) 287-4516
After Hours Phone: (619)
287-9730
Provider Gender: Male
License number: C52328
NPI: 1134109390
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Russian, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Alvarado
Hospital Llc
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health
Plan Direct, Community Care Ipa
Llc

PAZIRANDEH, MAHMOOD
Provider ID: 257534
Board Certified Specialty: Yes
BLUE SHIELD PROMISE
HEALTH PLAN DIRECT
3633 CAMINO DEL RIO S STE
300
SAN DIEGO, CA 92108-4014
Phone: (619) 287-9730
Fax: (619) 287-4516
After Hours Phone: (619)
287-9730
Provider Gender: Male
License number: C52328
NPI: 1134109390
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken: Farsi, Russian, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc

PAZIRANDEH, MAHMOOD

Provider ID: 47863
Board Certified Specialty: No
 MICHAEL I KELLER MD INC
 3633 CAMINO DEL RIO S STE 300
 SAN DIEGO, CA 92108-4014
Phone: (619) 287-9730
Fax:
After Hours Phone: (619) 287-9730
Provider Gender: Male
License number: C52328
NPI: 1134109390
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Russian, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:* W
Hours: M-F 8:30AM-4:30PM, SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc

REDDY, DANA A

Provider ID: 112705
Board Certified Specialty: No
 DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2560
Fax:
After Hours Phone: (619) 515-2560
Provider Gender: Female
License number: A115598
NPI: 1144538778
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital, Sharp Memorial Hospital, Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No

♿ *Accessibility:* ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Diamond Neighborhoods Family Hlth Ctrs Inc
IPA: Imperial Health Holdings Medical Group-Sd

SPEECH PATHOLOGIST

BETTS, VALERIE K

Provider ID: 282783
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 7510 CLAIREMONT MESA BLVD STE 103
 SAN DIEGO, CA 92111-1539
Phone: (858) 277-2227
Fax: (747) 900-2873
After Hours Phone: (858) 277-2227
Provider Gender: Female
License number: SP29983
NPI: 1609952779
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

CARDONA, ZULMA I

Provider ID: 282788
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 7510 CLAIREMONT MESA BLVD STE 103
 SAN DIEGO, CA 92111-1539
Phone: (858) 277-2227
Fax: (747) 900-2873
After Hours Phone: (858) 277-2227
Provider Gender: Female
License number: SP31496
NPI: 1457595241
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

CLARK, DIANA M

Provider ID: 282745

Board Certified Specialty: No

HEALTH EXCEL IPA INC

7510 CLAIREMONT MESA

BLVD STE 103

SAN DIEGO, CA 92111-1539

Phone: (858) 277-2227

Fax: (747) 900-2873

After Hours Phone: (858)

277-2227

Provider Gender: Female

License number: SP19290

NPI: 1124044060

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

CRUZ SANCHEZ, LISA M

Provider ID: 282781

Board Certified Specialty: No

HEALTH EXCEL IPA INC

7510 CLAIREMONT MESA

BLVD STE 103

SAN DIEGO, CA 92111-1539

Phone: (858) 277-2227

Fax: (747) 900-2873

After Hours Phone: (858)

277-2227

Provider Gender: Female

License number: SP30934

NPI: 1982150918

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

DE VERA, JONATHAN M

Provider ID: 118426

Board Certified Specialty: No

UCSD MEDICAL GROUP

8929 UNIVERSITY CENTER LN

STE 200

SAN DIEGO, CA 92122-1008

Phone: (855) 543-0333

Fax:

After Hours Phone: (855)

543-0333

Provider Gender: Male

License number: SP18630

NPI: 1639470024

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

DE VERA, JONATHAN M

Provider ID: 258345

Board Certified Specialty: No

UCSD MEDICAL GROUP

8929 UNIVERSITY CENTER LN

STE 200

SAN DIEGO, CA 92122-1008

Phone: (855) 543-0333

Fax: (858) 657-6873

After Hours Phone: (855)

543-0333

Provider Gender: Male

License number: SP18630

NPI: 1639470024

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Ucsd Medical Group

DOCKTER, ANDI M

Provider ID: 248061
Board Certified Specialty: No
UCSD MEDICAL GROUP
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122-1013
Phone: (858) 657-8590

Fax:
After Hours Phone: (858)
657-8590

Provider Gender: Female
License number: SP26061
NPI: 1073150801

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):

No
Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:

Medical Group(s):
IPA: Ucsd Medical Group

DOCKTER, ANDI M

Provider ID: 248063
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (858) 974-9766

Fax:
After Hours Phone: (858)
974-9766

Provider Gender: Female
License number: SP26061
NPI: 1073150801

Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Ucsd Medical Group

FALLON, DAVID A

Provider ID: 282651
Board Certified Specialty: No
HEALTH EXCEL IPA INC
7510 CLAIREMONT MESA
BLVD STE 103
SAN DIEGO, CA 92111-1539
Phone: (858) 277-2227

Fax: (747) 900-2873
After Hours Phone: (858)
277-2227

Provider Gender: Male
License number: SP27935
NPI: 1750890547

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

Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

GARCIA GALLIANI, ROMIE

Provider ID: 282580
Board Certified Specialty: No
HEALTH EXCEL IPA INC
7510 CLAIREMONT MESA
BLVD STE 103
SAN DIEGO, CA 92111-1539
Phone: (858) 277-2227
Fax: (747) 900-2873
After Hours Phone: (858)
277-2227

Provider Gender: Female
License number: SP31079
NPI: 1700216827

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

Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL):
No
Accessibility:

Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Health Excel Ipa Inc

GONZALES ESTRADA, JOVANY

Provider ID: 282565
Board Certified Specialty: No
HEALTH EXCEL IPA INC
7510 CLAIREMONT MESA
BLVD STE 103
SAN DIEGO, CA 92111-1539
Phone: (858) 277-2227

Fax: (747) 900-2873
After Hours Phone: (858)
277-2227

Provider Gender: Male
License number: SP26117
NPI: 1780129817

Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

GONZALEZ, ROXANA

Provider ID: 282633

Board Certified Specialty: No

HEALTH EXCEL IPA INC

7510 CLAIREMONT MESA

BLVD STE 103

SAN DIEGO, CA 92111-1539

Phone: (858) 277-2227

Fax: (747) 900-2873

After Hours Phone: (858)

277-2227

Provider Gender: Female

License number: SP30778

NPI: 1154710911

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

GOSSETT, GRETCHEN A

Provider ID: 282807

Board Certified Specialty: No

HEALTH EXCEL IPA INC

7510 CLAIREMONT MESA

BLVD STE 103

SAN DIEGO, CA 92111-1539

Phone: (858) 277-2227

Fax: (747) 900-2873

After Hours Phone: (858)

277-2227

Provider Gender: Female

License number: SP15354

NPI: 1104145382

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

HAN RIVAS, JENNIFER C

Provider ID: 282799

Board Certified Specialty: No

HEALTH EXCEL IPA INC

7510 CLAIREMONT MESA

BLVD STE 103

SAN DIEGO, CA 92111-1539

Phone: (858) 277-2227

Fax: (747) 900-2873

After Hours Phone: (858)

277-2227

Provider Gender: Female

License number: SP28289

NPI: 1316407141

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

IRIZARRY TORRES, CARLOS E

Provider ID: 282827

Board Certified Specialty: No

HEALTH EXCEL IPA INC

7510 CLAIREMONT MESA

BLVD STE 103

SAN DIEGO, CA 92111-1539

Phone: (858) 277-2227

Fax: (747) 900-2873

After Hours Phone: (858)

277-2227

Provider Gender: Male

License number: SP27932

NPI: 1790061984

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

IPA: Health Excel Ipa Inc

JOHANNSEN, HEIDI J

Provider ID: 282797

Board Certified Specialty: No

HEALTH EXCEL IPA INC

7510 CLAIREMONT MESA

BLVD STE 103

SAN DIEGO, CA 92111-1539

Phone: (858) 277-2227

Fax: (747) 900-2873

After Hours Phone: (858)

277-2227

Provider Gender: Female

License number: SP21531

NPI: 1710333463

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

KLINGENSMITH, JENNIFER A

Provider ID: 282841

Board Certified Specialty: No

HEALTH EXCEL IPA INC

7510 CLAIREMONT MESA

BLVD STE 103

SAN DIEGO, CA 92111-1539

Phone: (858) 277-2227

Fax: (747) 900-2873

After Hours Phone: (858)

277-2227

Provider Gender: Female

License number: SP29368

NPI: 1528399706

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

KOUKEYAN, KARIN H

Provider ID: 282832

Board Certified Specialty: No

HEALTH EXCEL IPA INC

7510 CLAIREMONT MESA

BLVD STE 103

SAN DIEGO, CA 92111-1539

Phone: (858) 277-2227

Fax: (747) 900-2873

After Hours Phone: (858)

277-2227

Provider Gender: Female

License number: SP10838

NPI: 1497210835

Provider English Spoken: Yes

Provider Language(s) Spoken:

Armenian, Sign Language,

Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

LEE, VICTORIA P

Provider ID: 282492

Board Certified Specialty: No

HEALTH EXCEL IPA INC

7510 CLAIREMONT MESA

BLVD STE 103

SAN DIEGO, CA 92111-1539

Phone: (858) 277-2227

Fax: (747) 900-2873

After Hours Phone: (858)

277-2227

Provider Gender: Female

License number: SP27673

NPI: 1487088167

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

MEJIA, DAISY J

Provider ID: 282369

Board Certified Specialty: No

HEALTH EXCEL IPA INC

7510 CLAIREMONT MESA

BLVD STE 103

SAN DIEGO, CA 92111-1539

Phone: (858) 277-2227

Fax: (747) 900-2873

After Hours Phone: (858)

277-2227

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: SP28750
NPI: 1083014948
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

NEESE, SUSAN Y

Provider ID: 258441
Board Certified Specialty: No
UCSD MEDICAL GROUP
8929 UNIVERSITY CENTER LN
STE 200
SAN DIEGO, CA 92122-1008
Phone: (855) 543-0333
Fax: (858) 657-6873
After Hours Phone: (855) 543-0333
Provider Gender: Female
License number: SP15489
NPI: 1710422134
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Ucsd Medical Group
PUGH, LINDSAY M
Provider ID: 282493
Board Certified Specialty: No
HEALTH EXCEL IPA INC
7510 CLAIREMONT MESA
BLVD STE 103
SAN DIEGO, CA 92111-1539
Phone: (858) 277-2227
Fax: (747) 900-2873
After Hours Phone: (858) 277-2227
Provider Gender: Female
License number: SP18656
NPI: 1275932956

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

RAMIREZ, MEGAN B

Provider ID: 282429
Board Certified Specialty: No
HEALTH EXCEL IPA INC
7510 CLAIREMONT MESA
BLVD STE 103
SAN DIEGO, CA 92111-1539
Phone: (858) 277-2227
Fax: (747) 900-2873
After Hours Phone: (858) 277-2227

Provider Gender: Female
License number: SP27962
NPI: 1538700984
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

RODRIGUEZ, ALEXANDREA J

Provider ID: 282680
Board Certified Specialty: No
HEALTH EXCEL IPA INC
7510 CLAIREMONT MESA
BLVD STE 103
SAN DIEGO, CA 92111-1539
Phone: (858) 277-2227
Fax: (747) 900-2873
After Hours Phone: (858) 277-2227
Provider Gender: Female
License number: SP31524
NPI: 1639554595
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

ROTUNDO, ILLENA

Provider ID: 282435
Board Certified Specialty: No
HEALTH EXCEL IPA INC
7510 CLAIREMONT MESA
BLVD STE 103
SAN DIEGO, CA 92111-1539
Phone: (858) 277-2227
Fax: (747) 900-2873
After Hours Phone: (858)
277-2227
Provider Gender: Female
License number: SP27997
NPI: 1558371419
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

SANTIMAW, LAUREN C

Provider ID: 116483
Board Certified Specialty: No
UCSD MEDICAL GROUP
8929 UNIVERSITY CENTER LN
STE 200
SAN DIEGO, CA 92122-1008
Phone: (855) 543-0333
Fax:
After Hours Phone: (855)
543-0333

Provider Gender: Female
License number: SP22677
NPI: 1568705028
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SANTIMAW, LAUREN C

Provider ID: 258517
Board Certified Specialty: No
UCSD MEDICAL GROUP
8929 UNIVERSITY CENTER LN
STE 200
SAN DIEGO, CA 92122-1008
Phone: (855) 543-0333
Fax: (858) 657-6873
After Hours Phone: (855)
543-0333
Provider Gender: Female
License number: SP22677
NPI: 1568705028
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SCHAEFER, LINDSEY A

Provider ID: 258506
Board Certified Specialty: No
UCSD MEDICAL GROUP
8929 UNIVERSITY CENTER LN
STE 200
SAN DIEGO, CA 92122-1008
Phone: (855) 543-0333
Fax: (858) 657-6873
After Hours Phone: (855)
543-0333
Provider Gender: Female
License number: SP17349
NPI: 1598200719
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Ucsd Medical Group

SMART, AMY F

Provider ID: 282578
Board Certified Specialty: No
HEALTH EXCEL IPA INC
7510 CLAIREMONT MESA
BLVD STE 103
SAN DIEGO, CA 92111-1539

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 277-2227

Fax: (747) 900-2873

After Hours Phone: (858)
277-2227

Provider Gender: Female

License number: SP30199

NPI: 1578159018

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

STEWART, CAMILE F

Provider ID: 282811

Board Certified Specialty: No

HEALTH EXCEL IPA INC

7510 CLAIREMONT MESA

BLVD STE 103

SAN DIEGO, CA 92111-1539

Phone: (858) 277-2227

Fax: (747) 900-2873

After Hours Phone: (858)
277-2227

Provider Gender: Female

License number: SP19838

NPI: 1346564622

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

TRUJILLO DELGADO, WILIANIE

Provider ID: 282796

Board Certified Specialty: No

HEALTH EXCEL IPA INC

7510 CLAIREMONT MESA

BLVD STE 103

SAN DIEGO, CA 92111-1539

Phone: (858) 277-2227

Fax: (747) 900-2873

After Hours Phone: (858)
277-2227

Provider Gender: Female

License number: SP31138

NPI: 1306472097

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

UNGER, LINDSEY A

Provider ID: 207202

Board Certified Specialty: No

UCSD MEDICAL GROUP

8929 UNIVERSITY CENTER LN

STE 200

SAN DIEGO, CA 92122-1008

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

License number: SP20362

NPI: 1972936813

Provider English Spoken: Yes

Provider Language(s) Spoken:
Sign Language

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

WIRTH, LAURA P

Provider ID: 282834

Board Certified Specialty: No

HEALTH EXCEL IPA INC

7510 CLAIREMONT MESA

BLVD STE 103

SAN DIEGO, CA 92111-1539

Phone: (858) 277-2227

Fax: (747) 900-2873

After Hours Phone: (858)
277-2227

Provider Gender: Female

License number: SP31015

NPI: 1568835239

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation:

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

Medical Group(s):

IPA: Rady Childrens Health Network, Ucsd Medical Group

COLETTA, JOELLE M

Provider ID: 210527

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-7777

Fax:

After Hours Phone: (619)
543-7777

Provider Gender: Female

License number: A55001

NPI: 1447222377

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Green Hospital, Sharp Memorial

Hospital, Ucsd Medical Ctr, Rady

Childrens Hospital San Diego,

Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network, Ucsd Medical Group

FOX, KENNETH A

Provider ID: 257841

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-8030

Fax:

After Hours Phone: (858)
966-8030

Provider Gender: Male

License number: G154681

NPI: 1235153552

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

GOLTS, EUGENE M

Provider ID: 210076

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-7777

Fax:

After Hours Phone: (619)

543-7777

Provider Gender: Male

License number: A82530

NPI: 1316000649

Provider English Spoken: Yes

Provider Language(s) Spoken:

Ukrainian

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Sharp Memorial Hospital, Tri City

Medical Ctr, Ucsd Medical Ctr,

SURGERY CARDIOVASCULAR

COLETTA, JOELLE M

Provider ID: 206002

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY STE

202

SAN DIEGO, CA 92123-4227

Phone: (858) 966-8030

Fax:

After Hours Phone: (858)

966-8030

Provider Gender: Female

License number: A55001

NPI: 1447222377

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Green Hospital, Sharp Memorial

Hospital, Ucsd Medical Ctr, Rady

Childrens Hospital San Diego,

Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network, Ucsd Medical Group

MADANI, MICHAEL M

Provider ID: 210285
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-3759
Fax: (619) 543-2652
After Hours Phone: (619)
543-3759
Provider Gender: Male
License number: A67201
NPI: 1518999069
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital, Tri City
Medical Ctr, Ucsd Medical Ctr,
Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Rady Childrens Health
Network, Ucsd Medical Group

NIGRO, JOHN J

Provider ID: 114832
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FN D T N
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5841
Fax:
After Hours Phone: (858)
966-5841
Provider Gender: Male
License number: G80887
NPI: 1881707818
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

PERRICONE, ANTHONY

Provider ID: 205580
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY STE
202
SAN DIEGO, CA 92123-4227

Phone: (858) 966-8030
Fax: (858) 966-8032
After Hours Phone: (858)
966-8030
Provider Gender: Male
License number: G65464
NPI: 1104842129
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital, Tri City
Medical Ctr, Ucsd Medical Ctr,
Scripps Memorial Hospital
Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

PRETORIUS, GERT D

Provider ID: 210570
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6886
Fax:
After Hours Phone: (619)
543-6886
Provider Gender: Male
License number: A113774
NPI: 1629385836
Provider English Spoken: Yes
Provider Language(s) Spoken:
Afrikaans
Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Rady
Childrens Hospital San Diego, Tri
City Medical Ctr, Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network, Ucsd Medical Group

PRETORIUS, GERT D

Provider ID: 217681

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3030 CHILDRENS WAY STE
202

SAN DIEGO, CA 92123-4227

Phone: (858) 966-8030

Fax: (858) 966-8032

After Hours Phone: (858)
966-8030

Provider Gender: Male

License number: A113774

NPI: 1629385836

Provider English Spoken: Yes

Provider Language(s) Spoken:
Afrikaans

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego, Tri
City Medical Ctr, Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network, Ucsd Medical Group

THISTLETHWAITE, PATRICIA A

Provider ID: 206159

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3030 CHILDRENS WAY STE
202

SAN DIEGO, CA 92123-4227

Phone: (858) 966-8030

Fax: (858) 966-8032

After Hours Phone: (858)

966-8030

Provider Gender: Female

License number: G84093

NPI: 1831121789

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego, Tri
City Medical Ctr, Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network, Ucsd Medical Group

SURGERY COLON SURGERY

ISHO, MATHEW S , MD

Provider ID: 245185

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

4060 4TH AVE STE 510

SAN DIEGO, CA 92103-2121

Phone: (619) 686-4011

Fax: (619) 686-4014

After Hours Phone: (619)

686-4011

Provider Gender: Male

License number: A93470

NPI: 1841235645

Provider English Spoken: Yes

Provider Language(s) Spoken:
Arabic

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Sharp
Coronado Hosp And Healthcare
Ctr, Scripps Mercy Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 18/100

American Sign Language (ASL):
No

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

LIU, SHANGLEI

Provider ID: 273363

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A128073

NPI: 1043558653

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, University Hsp Of San Diego Co
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LOPEZ, NICOLE E

Provider ID: 117760
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6886
Fax:
After Hours Phone: (619) 543-6886
Provider Gender: Female
License number: A107945
NPI: 1518163005
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA:
PARRY, LISA A
Provider ID: 278553
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 16950 VIA TAZON
 SAN DIEGO, CA 92127-1607
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A131297
NPI: 1235369067
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SURGERY CRITICAL CARE

ADAMS, LAURA M

Provider ID: 284407
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female

License number: A169184
NPI: 1144616541
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HIGGINSON, SARA M

Provider ID: 243002
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A123464
NPI: 1578852471
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Email:
Medical Group(s):
IPA: Ucsd Medical Group

KOBAYASHI, LESLIE M

Provider ID: 64011
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222

Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Female
License number: A90700
NPI: 1255501474

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ *Accessibility:* W
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA:

LEE, JEANNE G

Provider ID: 64031
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222

Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Female
License number: A96295

NPI: 1649334657
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

POTENZA, BRUCE M

Provider ID: 277298
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-7200

Fax:
After Hours Phone: (619)
543-7200

Provider Gender: Male
License number: G77333
NPI: 1548281496
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

POTENZA, BRUCE M
Provider ID: 64144
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Male
License number: G77333
NPI: 1548281496

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Ucsd Medical Group

TADLOCK, MATTHEW D

Provider ID: 272848
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273

Fax: (888) 539-8781
After Hours Phone: (800)
926-8273

Provider Gender: Male
License number: C54740
NPI: 1881666956
Provider English Spoken: Yes

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D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

VENTRO, GEORGE J

Provider ID: 284418
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A169299
NPI: 1548604648
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

WEAVER, JESSICA L

Provider ID: 243239
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A163176
NPI: 1396044657
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SURGERY GENERAL **VASCULAR**

AL-NOURI, OMAR

Provider ID: 275349
Board Certified Specialty: No
UCSD MEDICAL GROUP
4510 EXECUTIVE DR STE 215
SAN DIEGO, CA 92121-3023
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: 20A16931
NPI: 1770742264

Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BANDYK, DENNIS F

Provider ID: 275342
Board Certified Specialty: No
UCSD MEDICAL GROUP
4510 EXECUTIVE DR STE 215
SAN DIEGO, CA 92121-3023
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: G89003
NPI: 1649282039
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

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D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Ucsd Medical Group

BARLEBEN, ANDREW R

Provider ID: 275372
Board Certified Specialty: No
UCSD MEDICAL GROUP
4510 EXECUTIVE DR STE 215
SAN DIEGO, CA 92121-3023
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273

Provider Gender: Male
License number: A99417
NPI: 1497936900

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Ucsd Medical Group

CAJAS-MONSON, LUIS C

Provider ID: 273147
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A124195

NPI: 1972821411
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Ucsd Medical Group

CAJAS-MONSON, LUIS C

Provider ID: 273148
Board Certified Specialty: No
UCSD MEDICAL GROUP
4520 EXECUTIVE DR STE 111
SAN DIEGO, CA 92121-3019
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273

Provider Gender: Male
License number: A124195
NPI: 1972821411

Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CAJAS-MONSON, LUIS C

Provider ID: 275263
Board Certified Specialty: No
UCSD MEDICAL GROUP
4510 EXECUTIVE DR STE 215
SAN DIEGO, CA 92121-3023
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273

Provider Gender: Male
License number: A124195
NPI: 1972821411
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SALLOUM, ALEXANDER C , MD

Provider ID: 268765
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
6402 EL CAJON BLVD # 100
SAN DIEGO, CA 92115-2645

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D. Directorio de proveedores de atención especializada

Phone: (619) 582-4490
Fax: (619) 582-4737
After Hours Phone: (619) 582-4490

Provider Gender: Male
License number: A89300
NPI: 1124176151
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish

Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Paradise Valley Hospital, Palomar Medical Center, Pomerado Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SURGERY GENERAL

AL-NOURI, OMAR

Provider ID: 211903
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273

Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: 20A16931
NPI: 1770742264
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic

Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

ALVORD, PAUL B

Provider ID: 63778
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222

Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A66670
NPI: 1447443809
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ARMANI, AVA
Provider ID: 282141
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (858) 822-6100

Fax:
After Hours Phone: (858) 822-6100
Provider Gender: Female
License number: A118231
NPI: 1861759383
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Medical Ctr At Ucsf, Ucsf Medical Center At Mission Bay, Ucsf Medical Center At Mount Zion, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

AVULOV, VADIM

Provider ID: 125019
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
6699 ALVARADO RD STE 2309
SAN DIEGO, CA 92120-5241
Phone: (619) 396-6637
Fax: (619) 825-3406
After Hours Phone: (619) 396-6637

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D. Directorio de proveedores de atención especializada

Provider Gender: Male
License number: 20A13344
NPI: 1700121472
Provider English Spoken: Yes
Provider Language(s) Spoken: Russian
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc, Paradise Valley Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings Medical Group-Sd

BANDYK, DENNIS F

Provider ID: 63794
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: G89003
NPI: 1649282039
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None

American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BARNES, RYAN M

Provider ID: 129062
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 7910 FROST ST STE 250
 SAN DIEGO, CA 92123-2752
Phone: (858) 565-0104
Fax: (858) 565-0194
After Hours Phone: (858) 565-0104
Provider Gender: Male
License number: 20A12870
NPI: 1831493501
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

BARNES, RYAN M

Provider ID: 83877
Board Certified Specialty: No
 SAN DIEGO GEN AND VASCULAR SURGEONS MED GRP INC
 7910 FROST ST STE 250

SAN DIEGO, CA 92123-2752
Phone: (858) 565-0104
Fax:
After Hours Phone: (858) 565-0104
Provider Gender: Male
License number: 20A12870
NPI: 1831493501
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Sharp Coronado Hosp And Healthcare Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-TH 9AM-5PM, F 9AM-4PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

BENCH, GARY R

Provider ID: 269682
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 7910 FROST ST STE 250
 SAN DIEGO, CA 92123-2752
Phone: (858) 565-0104
Fax: (858) 565-0194
After Hours Phone: (858) 565-0104
Provider Gender: Male
License number: A35873
NPI: 1225007974
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital

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D. Directorio de proveedores de atención especializada

<p>Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ☯ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc</p>	<p>UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 Phone: (619) 543-6222 Fax: After Hours Phone: (619) 543-6222 Provider Gender: Female License number: A105854 NPI: 1457518219 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ☯ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:</p>	<p>Thornton, Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ☯ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network</p>
<p>BENCH, SHAWN R , MD Provider ID: 129060 Board Certified Specialty: Yes COMMUNITY CARE IPA LLC 7910 FROST ST STE 250 SAN DIEGO, CA 92123-2752 Phone: (858) 565-0104 Fax: (858) 565-0194 After Hours Phone: (858) 565-0104 Provider Gender: Male License number: A108975 NPI: 1669700753 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Sharp Memorial Hospital, Sharp Coronado Hosp And Healthcare Ctr, Kern Medical Center Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ☯ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc</p>	<p>BERUMEN, JENNIFER A Provider ID: 113474 Board Certified Specialty: No UCSD MEDICAL GROUP 4510 EXECUTIVE DR # 7 SAN DIEGO, CA 92121-3021 Phone: (858) 657-7729 Fax: After Hours Phone: (858) 657-7729 Provider Gender: Female License number: A106782 NPI: 1558566372 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland Medi-Cal Open Panel: Yes Min/Max Age: 0/99 American Sign Language (ASL): No ☯ Accessibility: Hours: M-SA 9AM-5PM Website: Email:</p>	<p>BERUMEN, JENNIFER A Provider ID: 260052 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 8001 FROST ST SAN DIEGO, CA 92123-2746 Phone: (858) 966-5811 Fax: (858) 966-8035 After Hours Phone: (858) 966-5811 Provider Gender: Female License number: A106782 NPI: 1558566372 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland Medi-Cal Open Panel: Yes Min/Max Age: 0/99 American Sign Language (ASL): No ☯ Accessibility: Hours: M-SA 9AM-5PM Website: Email:</p>
<p>BERNDTSON, ALLISON E Provider ID: 110505 Board Certified Specialty: No</p>		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Rady Childrens Health Network

BERUMEN, JENNIFER A

Provider ID: 86651
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN

8001 FROST ST
SAN DIEGO, CA 92123-2746

Phone: (858) 966-5855

Fax: (858) 966-5815

After Hours Phone: (858) 966-5855

Provider Gender: Female

License number: A106782

NPI: 1558566372

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Rady Childrens

Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL): No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

BRODERICK, RYAN C

Provider ID: 128612

Board Certified Specialty: No
UCSD MEDICAL GROUP

4520 EXECUTIVE DR STE 111

SAN DIEGO, CA 92121-3019

Phone: (858) 657-8860

Fax:

After Hours Phone: (858) 657-8860

Provider Gender: Male

License number: A124721

NPI: 1619252418

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

BRODERICK, RYAN C

Provider ID: 201617

Board Certified Specialty: Yes
UCSD MEDICAL GROUP

4520 EXECUTIVE DR STE 111

SAN DIEGO, CA 92121-3019

Phone: (858) 657-8860

Fax:

After Hours Phone: (858) 657-8860

Provider Gender: Male

License number: A124721

NPI: 1619252418

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

BRODERICK, RYAN C

Provider ID: 247073

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273

Fax:

After Hours Phone: (800) 926-8273

Provider Gender: Male

License number: A124721

NPI: 1619252418

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

BROWN, KRISTIAN L

Provider ID: 213548

Board Certified Specialty: No
HEALTH EXCEL IPA INC

8010 FROST ST STE 510

SAN DIEGO, CA 92123-4284

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 637-4800

Fax: (858) 637-4801

After Hours Phone: (858)
637-4800

Provider Gender: Male

License number: A124291

NPI: 1023272051

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp
Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 18/120

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

BROWN, KRISTIAN L

Provider ID: 97599

Board Certified Specialty: No
BALBOA NEPHROLOGY MED
GRP INC

8010 FROST ST STE 510
SAN DIEGO, CA 92123-4284

Phone: (858) 637-4800

Fax:

After Hours Phone: (858)
637-4800

Provider Gender: Male

License number: A124291

NPI: 1023272051

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp
Memorial Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website: bnmg.org

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

BROWN, KRISTIAN L , MD

Provider ID: 97599

Board Certified Specialty: No
BALBOA NEPHROLOGY MED
GRP INC

8010 FROST ST STE 510
SAN DIEGO, CA 92123-4284

Phone: (858) 637-4800

Fax: (858) 637-4801

After Hours Phone: (858)
637-4800

Provider Gender: Male

License number: A124291

NPI: 1023272051

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp
Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical

Group-Sd

BRUBAKER, ALEAH

Provider ID: 285272

Board Certified Specialty: No
UCSD MEDICAL GROUP

4510 EXECUTIVE DR # 7
SAN DIEGO, CA 92121-3021

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

License number: A137609

NPI: 1790104305

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Stanford
Health Care, Lucile Salter

Packard Childrens Hosp, Ucsd
La Jolla John Sally Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

COIMBRA, RAUL S

Provider ID: 63858

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222

Fax:

After Hours Phone: (619)
543-6222

Provider Gender: Male

License number: A74573

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1356372791
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Portuguese, Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

COSMAN, BARD C
 Provider ID: 65153
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST FL 3
 SAN DIEGO, CA 92103-2030
 Phone: (619) 543-3995
 Fax:
 After Hours Phone: (619) 543-3995
 Provider Gender: Male
 License number: G66321
 NPI: 1477513810
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):

IPA:
COSTANTINI, TODD W
 Provider ID: 63865
 Board Certified Specialty: Yes
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-6222
 Fax:
 After Hours Phone: (619) 543-6222
 Provider Gender: Male
 License number: A95420
 NPI: 1396900064
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

CUBAS, ROBERT F
 Provider ID: 127315
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4520 EXECUTIVE DR STE 111
 SAN DIEGO, CA 92121-3019
 Phone: (858) 657-8860
 Fax:
 After Hours Phone: (858) 657-8860
 Provider Gender: Male
 License number: A133442
 NPI: 1407114382
 Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

DIERKSHEIDE, JULIE E
 Provider ID: 101276
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-6222
 Fax:
 After Hours Phone: (619) 543-6222
 Provider Gender: Female
 License number: A128857
 NPI: 1346465168
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Glendale Memorial Hosp And Health Ctr, Long Beach Memorial Med Ctr, Earl And Lorraine Miller Childrens Hsp, Ucsd La Jolla John Sally Thornton, Kern Medical Center
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W

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D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

DOUCET, JAY J

Provider ID: 63882
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Male
License number: A69243
NPI: 1205993813
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FAIRBANKS, TIMOTHY J

Provider ID: 260842
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123-4232
Phone: (858) 966-7711
Fax: (858) 966-7712
After Hours Phone: (858)
966-7711

Provider Gender: Male
License number: A80244
NPI: 1407010556
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr, Sharp
Memorial Hospital, Scripps
Memorial Hospital, Childrens
Hosp And Resrch Ctr At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

GANTA, SRUJAN

Provider ID: 256383
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5855
Fax:
After Hours Phone: (858)
966-5855
Provider Gender: Male
License number: A166273
NPI: 1265071005
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18

American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network, Ucsd Medical Group

GIESEMANN, LESLIE A

Provider ID: 215127
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY
SAN DIEGO, CA 92123-4232
Phone: (858) 966-7711
Fax: (858) 966-7712
After Hours Phone: (858)
966-7711
Provider Gender: Female
License number: A62713
NPI: 1710901590
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Desert
Regional Med Ctr, Alvarado
Hospital Llc, Paradise Valley
Hospital, Rady Childrens
Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

GIESEMANN, LESLIE A

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Provider ID: 215128
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
8110 BIRMINGHAM WAY FL 2
SAN DIEGO, CA 92123-2758
Phone: (858) 966-7711
Fax: (858) 966-7712
After Hours Phone: (858) 966-7711
Provider Gender: Female
License number: A62713
NPI: 1710901590
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Desert Regional Med Ctr, Alvarado Hospital Llc, Paradise Valley Hospital, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

GODAT, LAURA N

Provider ID: 110346
Board Certified Specialty: Yes
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax: (619) 543-6832
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: A120673

NPI: 1548440100
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GOLTS, EUGENE M

Provider ID: 63922
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A82530
NPI: 1316000649
Provider English Spoken: Yes
Provider Language(s) Spoken: Ukrainian
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Tri City Medical Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network, Ucsd Medical Group

HALLDORSON, JEFFREY B

Provider ID: 120709
Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC
8010 FROST ST STE 510
SAN DIEGO, CA 92123-4284
Phone: (858) 637-4700
Fax:
After Hours Phone: (858) 637-4700
Provider Gender: Male
License number: G86089
NPI: 1558446351
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Coronado Hosp And Healthcare Ctr, Sharp Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website: bnmg.org
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

HALLDORSON, JEFFREY B

Provider ID: 214271
Board Certified Specialty: No

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

HEALTH EXCEL IPA INC
8010 FROST ST STE 510
SAN DIEGO, CA 92123-4284
Phone: (858) 637-4800
Fax: (858) 637-4801
After Hours Phone: (858)
637-4800
Provider Gender: Male
License number: G86089
NPI: 1558446351
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp
Coronado Hosp And Healthcare
Ctr, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/120
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

HALLDORSON, JEFFREY B , MD

Provider ID: 270147
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
8010 FROST ST STE 510
SAN DIEGO, CA 92123-4284
Phone: (858) 637-4800
Fax: (858) 637-4801
After Hours Phone: (858)
637-4800
Provider Gender: Male
License number: G86089
NPI: 1558446351

Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp
Coronado Hosp And Healthcare
Ctr, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

HART, MARQUIS E

Provider ID: 279694
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
8010 FROST ST STE 510
SAN DIEGO, CA 92123-4284
Phone: (858) 637-4700
Fax: (858) 637-4701
After Hours Phone: (858)
637-4700
Provider Gender: Male
License number: A42694
NPI: 1356401442
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/120
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

HORGAN, SANTIAGO

Provider ID: 63962
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 471-0701
Fax: (619) 543-3763
After Hours Phone: (619)
471-0701
Provider Gender: Male
License number: SFP11
NPI: 1932297231
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

IGNACIO, ROMEO C

Provider ID: 217053
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
8110 BIRMINGHAM WAY FL 2
SAN DIEGO, CA 92123-2758

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 966-7711
Fax:
After Hours Phone: (858) 966-7711
Provider Gender: Male
License number: A110729
NPI: 1538147145
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

JACOBSEN, GARTH R
Provider ID: 128247
Board Certified Specialty: No
UCSD MEDICAL GROUP
4520 EXECUTIVE DR STE 111
SAN DIEGO, CA 92121-3019
Phone: (858) 657-8860
Fax:
After Hours Phone: (858) 657-8860
Provider Gender: Male
License number: A99668
NPI: 1265649966
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None

American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

JACOBSEN, GARTH R
Provider ID: 201729
Board Certified Specialty: No
UCSD MEDICAL GROUP
4520 EXECUTIVE DR STE 111
SAN DIEGO, CA 92121-3019
Phone: (858) 657-8860
Fax:
After Hours Phone: (858) 657-8860
Provider Gender: Male
License number: A99668
NPI: 1265649966
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KING, JUSTIN B
Provider ID: 267048
Board Certified Specialty: No
HEALTH EXCEL IPA INC
6699 ALVARADO RD STE 2309
SAN DIEGO, CA 92120-5241

Phone: (619) 286-8803
Fax: (619) 286-2344
After Hours Phone: (619) 286-8803
Provider Gender: Male
License number: A89447
NPI: 1629262258
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital, Alvarado Hospital Llc, Sharp Memorial Hospital, Vibra Hospital Of San Diego, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

KOSOY, DANIEL H , MD
Provider ID: 82513
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
8010 FROST ST STE 510
SAN DIEGO, CA 92123-4284
Phone: (858) 499-1900
Fax: (858) 637-4801
After Hours Phone: (858) 499-1900
Provider Gender: Male
License number: A60375
NPI: 1770627259
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

LANGENBERG, BRET J

Provider ID: 43656
Board Certified Specialty: No
PACIFIC COAST SURGICAL GROUP
4033 3RD AVE STE 204
SAN DIEGO, CA 92103-2130
Phone: (619) 295-8677
Fax: (619) 295-7935
After Hours Phone: (619) 295-8677
Provider Gender: Male
License number: 20A9381
NPI: 1720014038
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 9AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LAZAR, DAVID A
Provider ID: 108403
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
8110 BIRMINGHAM WAY
SAN DIEGO, CA 92123-2758
Phone: (858) 966-8550
Fax:
After Hours Phone: (858) 966-8550
Provider Gender: Male
License number: A105968
NPI: 1538365002
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MADANI, MICHAEL M
Provider ID: 64053
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A67201

NPI: 1518999069
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Tri City Medical Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network, Ucsd Medical Group

MEKEEL, KRISTIN L

Provider ID: 64078
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: C54096
NPI: 1104861947
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

<p>♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Rady Childrens Health Network</p>	<p>NETWORK 7910 FROST ST STE 450 SAN DIEGO, CA 92123-2765 <i>Phone:</i> (858) 565-0104 <i>Fax:</i> (858) 565-0097 <i>After Hours Phone:</i> (858) 565-0104 <i>Provider Gender:</i> Male <i>License number:</i> A41127 <i>NPI:</i> 1629179684 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Vietnamese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Memorial Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No</p>	<p>Spanish, Vietnamese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Memorial Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No</p>
<p>MEKEEL, KRISTIN L <i>Provider ID:</i> 80609 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 8001 FROST ST SAN DIEGO, CA 92123-2746 <i>Phone:</i> (858) 966-5855 <i>Fax:</i> <i>After Hours Phone:</i> (858) 966-5855 <i>Provider Gender:</i> Female <i>License number:</i> C54096 <i>NPI:</i> 1104861947 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No</p>	<p>♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Rady Childrens Health Network</p>	<p>♿ <i>Accessibility:</i> W <i>Hours:</i> M-TH 9AM-5PM, F 9AM-4PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Rady Childrens Health Network</p>
<p>MUELLER, GEORGE A <i>Provider ID:</i> 262917 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH</p>	<p>MUELLER, GEORGE A <i>Provider ID:</i> 54298 <i>Board Certified Specialty:</i> No SAN DIEGO GEN AND VASCULAR SURGEONS MED GRP INC 7910 FROST ST STE 250 SAN DIEGO, CA 92123-2752 <i>Phone:</i> (858) 565-0104 <i>Fax:</i> <i>After Hours Phone:</i> (858) 565-0104 <i>Provider Gender:</i> Male <i>License number:</i> A41127 <i>NPI:</i> 1629179684 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i></p>	<p>MUELLER, GEORGE A , MD <i>Provider ID:</i> 54298 <i>Board Certified Specialty:</i> Yes SAN DIEGO GEN AND VASCULAR SURGEONS MED GRP INC 7910 FROST ST STE 250 SAN DIEGO, CA 92123-2752 <i>Phone:</i> (858) 565-0104 <i>Fax:</i> (858) 565-0097 <i>After Hours Phone:</i> (858) 565-0104 <i>Provider Gender:</i> Male <i>License number:</i> A41127 <i>NPI:</i> 1629179684 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Vietnamese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Memorial Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No</p>
	<p>♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i></p>	<p>♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i></p>

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D. Directorio de proveedores de atención especializada

<i>Email:</i>	UCSD MEDICAL GROUP	<i>Min/Max Age:</i> None
<i>Medical Group(s):</i>	200 W ARBOR DR	<i>American Sign Language (ASL):</i>
<i>IPA:</i> Community Care Ipa Llc, Rady Childrens Health Network	SAN DIEGO, CA 92103-1911	No
	<i>Phone:</i> (619) 543-6222	<i>Accessibility:</i>
	<i>Fax:</i>	<i>Hours:</i> M-SA 9AM-5PM
NGUYEN, TRI T	<i>After Hours Phone:</i> (619)	<i>Website:</i>
<i>Provider ID:</i> 257595	543-6222	<i>Email:</i>
<i>Board Certified Specialty:</i> No	<i>Provider Gender:</i> Male	<i>Medical Group(s):</i>
BLUE SHIELD PROMISE	<i>License number:</i> G84727	<i>IPA:</i>
HEALTH PLAN DIRECT	<i>NPI:</i> 1578506523	POLLACK, LARRY H , MD
7345 LINDA VISTA RD STE A	<i>Provider English Spoken:</i> Yes	<i>Provider ID:</i> 54346
SAN DIEGO, CA 92111-5800	<i>Provider Language(s) Spoken:</i>	<i>Board Certified Specialty:</i> Yes
<i>Phone:</i> (858) 277-5463	<i>Cultural Competency:</i> No	SAN DIEGO GEN AND
<i>Fax:</i> (858) 279-8296	<i>Hospital Affiliation:</i>	VASCULAR SURGEONS MED
<i>After Hours Phone:</i> (858)	<i>Medi-Cal Open Panel:</i> No	GRP INC
277-5463	<i>Min/Max Age:</i> None	7910 FROST ST STE 250
<i>Provider Gender:</i> Male	<i>American Sign Language (ASL):</i>	SAN DIEGO, CA 92123-2752
<i>License number:</i> G79496	No	<i>Phone:</i> (858) 565-0104
<i>NPI:</i> 1962598425	<i>Accessibility:</i> W	<i>Fax:</i> (858) 565-0194
<i>Provider English Spoken:</i> Yes	<i>Hours:</i> M-SA 9AM-5PM	<i>After Hours Phone:</i> (858)
<i>Provider Language(s) Spoken:</i>	<i>Website:</i>	565-0104
Chinese, Vietnamese	<i>Email:</i>	<i>Provider Gender:</i> Male
<i>Cultural Competency:</i> No	<i>Medical Group(s):</i>	<i>License number:</i> A41696
<i>Hospital Affiliation:</i> Scripps Mercy	<i>IPA:</i>	<i>NPI:</i> 1104998400
Hospital, Scripps Mercy Hospital	PAREKH, JUSTIN R	<i>Provider English Spoken:</i> Yes
Chula Vista, Sharp Memorial	<i>Provider ID:</i> 127150	<i>Provider Language(s) Spoken:</i>
Hospital	<i>Board Certified Specialty:</i> No	German, Spanish
<i>Medi-Cal Open Panel:</i> Yes	UCSD MEDICAL GROUP	<i>Cultural Competency:</i> No
<i>Min/Max Age:</i> 0/999	4510 EXECUTIVE DR # 7	<i>Hospital Affiliation:</i> Sharp
<i>American Sign Language (ASL):</i>	SAN DIEGO, CA 92121-3021	Memorial Hospital
No	<i>Phone:</i> (800) 926-8273	<i>Medi-Cal Open Panel:</i> Yes
<i>Accessibility:</i>	<i>Fax:</i>	<i>Min/Max Age:</i> 0/999
<i>Hours:</i> M-SA 9AM-5PM	<i>After Hours Phone:</i> (800)	<i>American Sign Language (ASL):</i>
<i>Website:</i>	926-8273	No
<i>Email:</i>	<i>Provider Gender:</i> Male	<i>Accessibility:</i>
<i>Medical Group(s):</i>	<i>License number:</i> A98665	<i>Hours:</i> M-SA 9AM-5PM
<i>IPA:</i> Blue Shield Promise Health	<i>NPI:</i> 1780866574	<i>Website:</i>
Plan Direct, Community Care Ipa	<i>Provider English Spoken:</i> Yes	<i>Email:</i>
Llc, Health Excel Ipa Inc, Imperial	<i>Provider Language(s) Spoken:</i>	<i>Medical Group(s):</i>
Health Holdings Medical	<i>Cultural Competency:</i> No	<i>IPA:</i> Community Care Ipa Llc
Group-Sd	<i>Hospital Affiliation:</i> Medical Ctr At	RASCHKE, ERIC T
	Ucsf, Ucsd Medical Ctr, Ucsd La	<i>Provider ID:</i> 270297
OWENS, ERIK L	Jolla John Sally Thornton	<i>Board Certified Specialty:</i> No
<i>Provider ID:</i> 64123	<i>Medi-Cal Open Panel:</i> No	
<i>Board Certified Specialty:</i> No		

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D. Directorio de proveedores de atención especializada

UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: 20A17495
NPI: 1316386659
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SAENZ, NICHOLAS C
Provider ID: 52842
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
8110 BIRMINGHAM WAY
SAN DIEGO, CA 92123-2758
Phone: (858) 966-7711
Fax:
After Hours Phone: (858) 966-7711
Provider Gender: Male
License number: G84775
NPI: 1447321203
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish

Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SALLOUM, ALEXANDER C
Provider ID: 104108
Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC
6402 EL CAJON BLVD # 100
SAN DIEGO, CA 92115-2645
Phone: (619) 582-4490
Fax: (619) 582-4737
After Hours Phone: (619) 582-4490
Provider Gender: Male
License number: A89300
NPI: 1124176151
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Paradise Valley Hospital, Palomar Medical Center, Pomerado Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 7:30AM-4PM, SA

9AM-5PM
Website: bnmg.org
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SANDLER, BRYAN J
Provider ID: 64178
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A99837
NPI: 1043410186
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SANTORELLI, JARRETT E
Provider ID: 272303
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273

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D. Directorio de proveedores de atención especializada

Provider Gender: Male
License number: A161482
NPI: 1033529201
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SCHNICKEL, GABRIEL T
Provider ID: 119527
Board Certified Specialty: No
UCSD MEDICAL GROUP
4510 EXECUTIVE DR # 7
SAN DIEGO, CA 92121-3021
Phone: (858) 657-6487
Fax:
After Hours Phone: (858) 657-6487
Provider Gender: Male
License number: A83329
NPI: 1619111440
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network
SCHNICKEL, GABRIEL T
Provider ID: 125421
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
8001 FROST ST
SAN DIEGO, CA 92123-2746
Phone: (858) 966-8354
Fax:
After Hours Phone: (858) 966-8354
Provider Gender: Male
License number: A83329
NPI: 1619111440
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

TALAMINI, MARK A
Provider ID: 64217
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: C51961
NPI: 1588694673
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):

SEDRAK, MICHAEL F
Provider ID: 84774
Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 471-0701
Fax: (619) 543-7785
After Hours Phone: (619) 471-0701
Provider Gender: Male
License number: A82582
NPI: 1750464111
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

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D. Directorio de proveedores de atención especializada

<p>No ☯ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:</p>	<p>SAN DIEGO, CA 92103-1911 Phone: (619) 543-6222 Fax: After Hours Phone: (619) 543-6222 Provider Gender: Female License number: G73000 NPI: 1699732941 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ☯ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:</p>	<p>Hospital Affiliation: Sharp Memorial Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ☯ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc</p>
<p>THANGARAJAH, HARIHARAN Provider ID: 102551 Board Certified Specialty: No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 8110 BIRMINGHAM WAY SAN DIEGO, CA 92123-2758 Phone: (858) 966-5840 Fax: After Hours Phone: (858) 966-5840 Provider Gender: Male License number: A94137 NPI: 1598979593 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Rady Childrens Hospital San Diego Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ☯ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network</p>	<p>WOODWARD, STEPHANIE M , MD Provider ID: 63697 Board Certified Specialty: Yes SAN DIEGO GEN AND VASCULAR SURGEONS MED GRP INC 7910 FROST ST STE 250 SAN DIEGO, CA 92123-2752 Phone: (858) 565-0104 Fax: (858) 565-0194 After Hours Phone: (858) 565-0104 Provider Gender: Female License number: A103828 NPI: 1053435099 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No</p>	<p>WOODWARD, STEPHANIE M Provider ID: 63697 Board Certified Specialty: No SAN DIEGO GEN AND VASCULAR SURGEONS MED GRP INC 7910 FROST ST STE 250 SAN DIEGO, CA 92123-2752 Phone: (858) 565-0104 Fax: After Hours Phone: (858) 565-0104 Provider Gender: Female License number: A103828 NPI: 1053435099 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Sharp Memorial Hospital Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ☯ Accessibility: W Hours: M-TH 9AM-5PM, F 9AM-4PM, SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc</p>
<p>WALLACE, ANNE M Provider ID: 64249 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR</p>	<p>WOODWARD, STEPHANIE M , MD Provider ID: 63697 Board Certified Specialty: Yes SAN DIEGO GEN AND VASCULAR SURGEONS MED GRP INC 7910 FROST ST STE 250 SAN DIEGO, CA 92123-2752 Phone: (858) 565-0104 Fax: (858) 565-0194 After Hours Phone: (858) 565-0104 Provider Gender: Female License number: A103828 NPI: 1053435099 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No</p>	<p>WOODWARD, STEPHANIE M Provider ID: 63697 Board Certified Specialty: No SAN DIEGO GEN AND VASCULAR SURGEONS MED GRP INC 7910 FROST ST STE 250 SAN DIEGO, CA 92123-2752 Phone: (858) 565-0104 Fax: After Hours Phone: (858) 565-0104 Provider Gender: Female License number: A103828 NPI: 1053435099 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Sharp Memorial Hospital Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ☯ Accessibility: W Hours: M-TH 9AM-5PM, F 9AM-4PM, SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc</p>

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D. Directorio de proveedores de atención especializada

YANG, GENE

Provider ID: 280567
Board Certified Specialty: No
UCSD MEDICAL GROUP
4520 EXECUTIVE DR
SAN DIEGO, CA 92121-3018
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A169156
NPI: 1568807089
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SURGERY HAND ORTHOPEDIC

STEPHENSON, SAMUEL K

Provider ID: 284934
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male

License number: A154951
NPI: 1578058665
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SURGERY HAND

ABRAMS, REID

Provider ID: 63766
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222

Provider Gender: Male
License number: G59829
NPI: 1548202245
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

RICKARDS, ENASS N

Provider ID: 212750
Board Certified Specialty: Yes
HEALTH EXCEL IPA INC
9333 GENESEE AVE STE 350
SAN DIEGO, CA 92121-2103
Phone: (858) 455-6460
Fax: (858) 455-7197
After Hours Phone: (858) 455-6460
Provider Gender: Female
License number: G79785
NPI: 1609850080

Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

SURGERY HEAD

COFFEY, CHARLES S

Provider ID: 63857
Board Certified Specialty: No

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D. Directorio de proveedores de atención especializada

UCSD OTOLARYNGOLOGY
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (858) 657-8590
Fax:
After Hours Phone: (858)
657-8590
Provider Gender: Male
License number: A116621
NPI: 1932297330
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Scripps Green Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SURGERY NEUROLOGICAL

AMMIRATI, MARIO
Provider ID: 285542
Board Certified Specialty: No
HEALTH EXCEL IPA INC
11199 SORRENTO VALLEY RD
STE 203
SAN DIEGO, CA 92121-1334
Phone: (619) 566-0640
Fax: (619) 566-0620
After Hours Phone: (619)
566-0640
Provider Gender: Male
License number: A46168
NPI: 1730137043
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

BARBA, DAVID
Provider ID: 244087
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-5720
Fax:
After Hours Phone: (619)
543-5720
Provider Gender: Male
License number: G42092
NPI: 1093730251
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish

Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr, Ucsd La Jolla
John Sally Thornton, Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BARBA, DAVID
Provider ID: 63798
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Male
License number: G42092
NPI: 1093730251
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr, Ucsd La Jolla
John Sally Thornton, Scripps
Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BELVERUD, SHAWN A
Provider ID: 202333
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: 20A13471
NPI: 1073817268
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

FLORES, BRUNO C

Provider ID: 274423
Board Certified Specialty: No
HEALTH EXCEL IPA INC
5395 RUFFIN RD STE 102
SAN DIEGO, CA 92123-1338
Phone: (858) 598-5290
Fax: (858) 598-5296
After Hours Phone: (858)
598-5290
Provider Gender: Male
License number: A151144
NPI: 1396974424
Provider English Spoken: Yes
Provider Language(s) Spoken:
Portuguese, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Scripps
Mercy Hospital, Scripps
Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc
GONDA, DAVID D
Provider ID: 101200
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FN D TN
7910 FROST ST STE 430
SAN DIEGO, CA 92123-2795
Phone: (858) 966-6710
Fax:
After Hours Phone: (858)
966-6710
Provider Gender: Male
License number: A107984
NPI: 1427254937
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Childrens Hosp And Resrch Ctr
At Oakland
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

KHALESSI, ALEXANDER A

Provider ID: 206141
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

7910 FROST ST STE 120
SAN DIEGO, CA 92123-2776
Phone: (858) 966-8574
Fax:
After Hours Phone: (858)
966-8574
Provider Gender: Male
License number: A95850
NPI: 1073786661
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton, Rady Childrens
Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network, Ucsd Medical Group

KHALESSI, ALEXANDER A

Provider ID: 244035
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-5540
Fax:
After Hours Phone: (619)
543-5540
Provider Gender: Male
License number: A95850
NPI: 1073786661
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Spanish

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Rady Childrens Health Network, Ucsd Medical Group

KHALESSI, ALEXANDER A

Provider ID: 63997
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Male
License number: A95850
NPI: 1073786661
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Rady Childrens Health Network, Ucsd Medical Group

Email:
Medical Group(s):
 IPA: Rady Childrens Health Network, Ucsd Medical Group

KHALESSI, ALEXANDER A

Provider ID: 81383
Board Certified Specialty: No
 RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 7910 FROST ST STE 430
 SAN DIEGO, CA 92123-2795
Phone: (858) 966-8574
Fax:
After Hours Phone: (858) 966-8574
Provider Gender: Male
License number: A95850
NPI: 1073786661
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Rady Childrens Health Network, Ucsd Medical Group

After Hours Phone: (858) 966-8574

Provider Gender: Male
License number: A95850

NPI: 1073786661

Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish

Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Rady Childrens Hospital San Diego

Medi-Cal Open Panel: No
Min/Max Age: None

American Sign Language (ASL): No
 ♿ *Accessibility:* W

Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
 IPA: Rady Childrens Health Network, Ucsd Medical Group

After Hours Phone: (858) 966-8574

Provider Gender: Male
License number: G62556

NPI: 1164593927

Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish

Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Childrens Hosp Of Los Angeles

Medi-Cal Open Panel: Yes

Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:

KLUGH, ARNETT

Provider ID: 203236
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR

SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A86867
NPI: 1588852610
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Ucsd Medical Group

After Hours Phone: (800) 926-8273

Provider Gender: Male
License number: A86867

NPI: 1588852610

Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish

Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Rady Childrens Hospital San Diego

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL): No
 ♿ *Accessibility:*

Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
 IPA: Ucsd Medical Group

After Hours Phone: (858) 966-8574

Provider Gender: Male
License number: G62556

NPI: 1164593927

Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish

Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Childrens Hosp Of Los Angeles

Medi-Cal Open Panel: Yes

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D. Directorio de proveedores de atención especializada

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

LEVY, MICHAEL L

Provider ID: 52607

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED
FN D TN

7910 FROST ST STE 430

SAN DIEGO, CA 92123-2795

Phone: (858) 966-6710

Fax:

After Hours Phone: (858)

966-6710

Provider Gender: Male

License number: G62556

NPI: 1164593927

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Ucsd Medical Ctr, Childrens

Hosp Of Los Angeles

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

MARSHALL, LAWRENCE F

Provider ID: 244150

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: C36547

NPI: 1750306171

Provider English Spoken: Yes

Provider Language(s) Spoken:

German, Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

MARSHALL, LAWRENCE F

Provider ID: 64064

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: C36547

NPI: 1750306171

Provider English Spoken: Yes

Provider Language(s) Spoken:

German, Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

MELTZER, HAL

Provider ID: 205339

Board Certified Specialty: Yes

RADY CHILDRENS HEALTH

NETWORK

7910 FROST ST STE 120

SAN DIEGO, CA 92123-2776

Phone: (858) 966-8574

Fax: (858) 966-7930

After Hours Phone: (858)

966-8574

Provider Gender: Male

License number: G70636

NPI: 1588735344

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Tri City

Medical Ctr, Rady Childrens

Hospital San Diego, Ucsd

Medical Ctr, Scripps Memorial

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Rady Childrens Health Network

NGUYEN, ANDREW D

Provider ID: 244135
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273

Fax:

After Hours Phone: (800) 926-8273

Provider Gender: Male

License number: A91563

NPI: 1720216542

Provider English Spoken: Yes

Provider Language(s) Spoken:

French, Spanish, Vietnamese

Cultural Competency: No

Hospital Affiliation: Palomar

Health Downtown Campus, Ucsd

Medical Ctr, Palomar Medical

Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

NGUYEN, ANDREW D

Provider ID: 244137

Board Certified Specialty: No

UCSD MEDICAL GROUP

16950 VIA TAZON

SAN DIEGO, CA 92127-1607

Phone: (800) 962-8273

Fax:

After Hours Phone: (800) 962-8273

Provider Gender: Male

License number: A91563

NPI: 1720216542

Provider English Spoken: Yes

Provider Language(s) Spoken:

French, Spanish, Vietnamese

Cultural Competency: No

Hospital Affiliation: Palomar

Health Downtown Campus, Ucsd

Medical Ctr, Palomar Medical

Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

NGUYEN, ANDREW D

Provider ID: 64107

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273

Fax:

After Hours Phone: (800) 926-8273

Provider Gender: Male

License number: A91563

NPI: 1720216542

Provider English Spoken: Yes

Provider Language(s) Spoken:

French, Spanish, Vietnamese

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Palomar Medical Center

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

OLSON, SCOTT E

Provider ID: 244053

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273

Fax:

After Hours Phone: (800) 926-8273

Provider Gender: Male

License number: A83715

NPI: 1376568659

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Tri City

Medical Ctr, Palomar Health

Downtown Campus, Ucsd

Medical Ctr, Pomerado Hospital,

Palomar Medical Center, Scripps

Green Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

OSORIO, JOSEPH A

Provider ID: 242007
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A128616
NPI: 1437416591
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

PHAM, MARTIN H

Provider ID: 244158
Board Certified Specialty: No
UCSD MEDICAL GROUP
16950 VIA TAZON
SAN DIEGO, CA 92127-1607
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A121590
NPI: 1609130921
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

RAVINDRA, VIJAY M

Provider ID: 277176
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
7910 FROST ST STE 120
SAN DIEGO, CA 92123-2776
Phone: (858) 966-8574
Fax: (858) 966-7930
After Hours Phone: (858)
966-8574
Provider Gender: Male
License number: A161999
NPI: 1982995841
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Scripps
Mercy Hospital, Scripps Mercy
Hospital Chula Vista, Naval
Medical Ctr Sd Rbe, Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

SCHWARTZ, MARC S

Provider ID: 121885
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Male
License number: G86573
NPI: 1508960188
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Good
Samaritan Hospital Los Angeles,
Valley Presbyterian Hosp, Martin
Luther King Jr Community
Hospital, Huntington Memorial
Hospital, Providence Saint Johns
Health Center, Ucsd Medical Ctr,
Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SOUMEKH, MASSOUD HERTZEL

Provider ID: 257468

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: Yes
BLUE SHIELD PROMISE
HEALTH PLAN DIRECT
8008 FROST ST STE 401
SAN DIEGO, CA 92123-4209
Phone: (858) 560-8544
Fax: (858) 560-8546
After Hours Phone: (858)
560-8544
Provider Gender: Male
License number: A37843
NPI: 1265495014
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Sharp Memorial
Hospital, Sharp Chula Vista Med
Ctr, Alvarado Hosp Med Ctr,
Alvarado Hospital Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health
Plan Direct, Community Care Ipa
Llc

SOUMEKH, MASSOUD HERTZEL, MD

Provider ID: 54178
Board Certified Specialty: Yes
MOUNTAIN HLTH & COMM
SERVICES
8008 FROST ST STE 401
SAN DIEGO, CA 92123-4209
Phone: (858) 560-8544
Fax: (858) 560-8546
After Hours Phone: (858)
560-8544

Provider Gender: Male
License number: A37843
NPI: 1265495014
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Sharp Memorial
Hospital, Sharp Chula Vista Med
Ctr, Alvarado Hosp Med Ctr,
Alvarado Hospital Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health
Plan Direct, Community Care Ipa
Llc

TOMLIN, JEFFREY M

Provider ID: 272950
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR FL 1
SAN DIEGO, CA 92103-1911
Phone: (858) 657-8540
Fax:
After Hours Phone: (858)
657-8540

Provider Gender: Male
License number: C161473
NPI: 1366530321
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

U, HOI S

Provider ID: 244132
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: G27898
NPI: 1164468146
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

U, HOI S

Provider ID: 64233
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: G27898
NPI: 1164468146
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SURGERY ORTHOPEDIC

ALLEN, RICHARD T
Provider ID: 63777
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6312
Fax: (619) 543-7480
After Hours Phone: (619) 543-6312
Provider Gender: Male
License number: A83513
NPI: 1962660175
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No

Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:
ATTENELLO, JOHN D
Provider ID: 271082
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A166979
NPI: 1629456553
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BAGHERI, ALI, MD
Provider ID: 117900
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9333 GENESEE AVE # 350A

SAN DIEGO, CA 92121-2111
Phone: (858) 455-6460
Fax: (858) 455-7197
After Hours Phone: (858) 455-6460
Provider Gender: Male
License number: A123272
NPI: 1760632947
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings Medical Group-Sd

BAGHERI, ALI
Provider ID: 262208
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
9333 GENESEE AVE STE 350
SAN DIEGO, CA 92121-2103
Phone: (858) 455-6460
Fax: (858) 455-7197
After Hours Phone: (858) 455-6460
Provider Gender: Male
License number: A123272
NPI: 1760632947
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: No

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D. Directorio de proveedores de atención especializada

Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s): IPA: Imperial Health Holdings Medical Group-Sd

BALLARD, BROOKE L

Provider ID: 262204
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
5555 RESERVOIR DR STE 104
SAN DIEGO, CA 92120-5198
Phone: (619) 286-9480
Fax: (619) 286-4568
After Hours Phone: (619) 286-9480
Provider Gender: Female
License number: A104161
NPI: 1841447950
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc, Sharp Coronado Hosp And Healthcare Ctr, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-F 9AM-5PM, SA 9AM-5PM
Website:

Email:
Medical Group(s): IPA: Imperial Health Holdings Medical Group-Sd
BALL, SCOTT T
Provider ID: 63792
Board Certified Specialty: Yes
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A75221
NPI: 1952325318
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s): IPA:

BATES, JAMES E

Provider ID: 262140
Board Certified Specialty: Yes
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
5555 RESERVOIR DR STE 104
SAN DIEGO, CA 92120-5198
Phone: (619) 286-9480
Fax: (619) 286-4568
After Hours Phone: (619) 286-9480

Provider Gender: Male
License number: G73930
NPI: 1174692206
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc, Sharp Coronado Hosp And Healthcare Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s): IPA: Imperial Health Holdings Medical Group-Sd

BUI, CHRISTOPHER N

Provider ID: 241162
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A127139
NPI: 1619231537
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:

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D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BUKATA, SUSAN V

Provider ID: 277948
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: C55109
NPI: 1932140639
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BURNIKEL, DAVID J

Provider ID: 111158
Board Certified Specialty: No
SAN DIEGO SPORTS
MEDICINE AND
ORTHOPAEDIC CENTER INC
6719 ALVARADO RD STE 200
SAN DIEGO, CA 92120-5256

Phone: (619) 229-3932
Fax:
After Hours Phone: (619)
229-3932
Provider Gender: Male
License number: A138043
NPI: 1457541369
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital Chula Vista, Sharp
Coronado Hosp And Healthcare
Ctr, Grossmont Hospital, Scripps
Mercy Hospital, Alvarado
Hospital Llc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website: www.sdsd.net
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

BURNIKEL, DAVID J , MD

Provider ID: 205079
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
6719 ALVARADO RD STE 200
SAN DIEGO, CA 92120-5256
Phone: (619) 229-3932
Fax: (619) 582-2860
After Hours Phone: (619)
229-3932
Provider Gender: Male
License number: A138043
NPI: 1457541369
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish

Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital Chula Vista, Sharp
Coronado Hosp And Healthcare
Ctr, Grossmont Hospital, Scripps
Mercy Hospital, Alvarado
Hospital Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

CHANG, DOUGLAS G

Provider ID: 63839
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (858) 657-8200
Fax:
After Hours Phone: (858)
657-8200
Provider Gender: Male
License number: A77281
NPI: 1962450031
Provider English Spoken: Yes
Provider Language(s) Spoken:
German
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:

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D. Directorio de proveedores de atención especializada

Email:

Medical Group(s):

IPA:

CHIARAPPA, FRANK E

Provider ID: 244459

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A164466

NPI: 1932536828

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

CHOI, JIHOON

Provider ID: 284788

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A151613

NPI: 1285097741

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

CIDAMBI, EMILY O

Provider ID: 246466

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

3030 CHILDRENS WAY FL 3

SAN DIEGO, CA 92123-4232

Phone: (858) 966-6789

Fax: (858) 966-6706

After Hours Phone: (858)

966-6789

Provider Gender: Female

License number: A127390

NPI: 1659634699

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

CIDAMBI, KRISHNA R

Provider ID: 118283

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-6312

Fax:

After Hours Phone: (619)

543-6312

Provider Gender: Male

License number: A118350

NPI: 1275836959

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Tamil

Cultural Competency: No

Hospital Affiliation: Providence St

Joseph Hospital, Hoag

Orthopedic Institute, Ucsd

Medical Ctr, Ucsd La Jolla John

Sally Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

COVEY, DANA C

Provider ID: 104615

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

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D. Directorio de proveedores de atención especializada

Phone: (619) 543-6222
 Fax:
 After Hours Phone: (619) 543-6222
 Provider Gender: Male
 License number: G89432
 NPI: 1780651794
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

COVEY, DANA C

Provider ID: 104618
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8899 UNIVERSITY CENTER LN
 STE 230
 SAN DIEGO, CA 92122-1010
 Phone: (858) 657-7726
 Fax:
 After Hours Phone: (858) 657-7726
 Provider Gender: Male
 License number: G89432
 NPI: 1780651794
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):

No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:
CURRAN, PATRICK F
 Provider ID: 273670
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 3030 CHILDRENS WAY FL 3
 SAN DIEGO, CA 92123-4232
 Phone: (858) 966-6789
 Fax: (858) 966-8519
 After Hours Phone: (858) 966-6789
 Provider Gender: Male
 License number: A135042
 NPI: 1558666032
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Health Excel Ipa Inc

FINKENBERG, JOHN G

Provider ID: 262199
 Board Certified Specialty: Yes
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 5555 RESERVOIR DR STE 104
 SAN DIEGO, CA 92120-5198

Phone: (619) 286-9480
 Fax: (619) 286-4568
 After Hours Phone: (619) 286-9480
 Provider Gender: Male
 License number: G56283
 NPI: 1285703413
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital, Alvarado Hospital Llc, Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Imperial Health Holdings Medical Group-Sd

FLINT, JAMES H

Provider ID: 203178
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (858) 657-8200
 Fax:
 After Hours Phone: (858) 657-8200
 Provider Gender: Male
 License number: A156864
 NPI: 1629239140
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla

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D. Directorio de proveedores de atención especializada

John Sally Thornton, Ucsd
Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

GARFIN, STEVEN R

Provider ID: 123782

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222

Fax: (858) 657-8235

After Hours Phone: (619)

543-6222

Provider Gender: Male

License number: G29309

NPI: 1679515829

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

GIRARD, PAUL J

Provider ID: 63919

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-6312

Fax: (619) 543-7480

After Hours Phone: (619)

543-6312

Provider Gender: Male

License number: A78346

NPI: 1356319891

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

GOEB, YANNICK L

Provider ID: 284794

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A170529

NPI: 1730542747

Provider English Spoken: Yes

Provider Language(s) Spoken:

German, Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

HENTZEN, ERIC R

Provider ID: 63954

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-6312

Fax: (619) 543-7480

After Hours Phone: (619)

543-6312

Provider Gender: Male

License number: A83117

NPI: 1245411180

Provider English Spoken: Yes

Provider Language(s) Spoken:

German, Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

HOLLNAGEL, KATHARINE F

Provider ID: 284171

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 966-5999

Fax: (858) 966-8519

After Hours Phone: (858)
966-5999

Provider Gender: Female

License number: A172578

NPI: 1295180289

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

HOLLNAGEL, KATHARINE F

Provider ID: 284172

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 3

SAN DIEGO, CA 92123-4232

Phone: (858) 966-6789

Fax: (858) 966-6706

After Hours Phone: (858)

966-6789

Provider Gender: Female

License number: A172578

NPI: 1295180289

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

JACOBSON, MARK D

Provider ID: 262260

Board Certified Specialty: No

IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD

5555 RESERVOIR DR STE 104

SAN DIEGO, CA 92120-5198

Phone: (619) 286-9480

Fax: (619) 286-4568

After Hours Phone: (619)

286-9480

Provider Gender: Male

License number: G71151

NPI: 1760551915

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital, Alvarado Hospital Llc,

Sharp Coronado Hosp And

Healthcare Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Imperial Health Holdings
Medical Group-Sd

KENT, WILLIAM T

Provider ID: 110385

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (858) 657-8200

Fax:

After Hours Phone: (858)

657-8200

Provider Gender: Male

License number: A122546

NPI: 1962794198

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

KIMBALL, MICHAEL P

Provider ID: 212662

Board Certified Specialty: No

HEALTH EXCEL IPA INC

9333 GENESEE AVE STE 350

SAN DIEGO, CA 92121-2103

Phone: (858) 455-6460

Fax: (858) 455-7197

After Hours Phone: (858)

455-6460

Provider Gender: Male

License number: G76060

NPI: 1588648653

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

KIMBALL, MICHAEL P , MD
Provider ID: 38205
Board Certified Specialty: No
GIRARD ORTHOPAEDIC SURGEONS MED GRP
9333 GENESEE AVE STE 350
SAN DIEGO, CA 92121-2103
Phone: (858) 455-6460
Fax: (858) 455-7197
After Hours Phone: (858) 455-6460
Provider Gender: Male
License number: G76060
NPI: 1588648653
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes

Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

KIMBALL, MICHAEL P
Provider ID: 38205
Board Certified Specialty: No
GIRARD ORTHOPAEDIC SURGEONS MED GRP
9333 GENESEE AVE STE 350
SAN DIEGO, CA 92121-2103
Phone: (858) 455-6460
Fax: (858) 455-7197
After Hours Phone: (858) 455-6460
Provider Gender: Male
License number: G76060
NPI: 1588648653
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,

Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

KULIDJIAN, ANNA A
Provider ID: 64022
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: A97060
NPI: 1215183066
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LEE, SCOTT I
Provider ID: 102032
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A121741

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1760790349
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Glendale Adventist Med Ctr, Adventist Health White Memorial
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MEUNIER, MATTHEW J

Provider ID: 64082
Board Certified Specialty: Yes
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A72975
NPI: 1265470553
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA:
MEYER, ROBERT S
Provider ID: 64084
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6312
Fax: (619) 543-7480
After Hours Phone: (619) 543-6312
Provider Gender: Male
License number: G76677
NPI: 1316997646
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MITCHELL, JOSEPH

Provider ID: 271141
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A167659
NPI: 1699161471
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

ORNER, CAITLIN A

Provider ID: 284169
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5999
Fax: (858) 966-8519
After Hours Phone: (858) 966-5999
Provider Gender: Female
License number: A172799
NPI: 1124481254
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

ORNER, CAITLIN A

Provider ID: 284170
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123-4232
Phone: (858) 966-6789
Fax: (858) 966-6706
After Hours Phone: (858) 966-6789
Provider Gender: Female
License number: A172799
NPI: 1124481254
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PAGE, ALEXANDRA E

Provider ID: 109720
Board Certified Specialty: Yes
SAN DIEGO SPORTS MEDICINE AND ORTHOPAEDIC CENTER INC
6719 ALVARADO RD STE 200
SAN DIEGO, CA 92120-5256
Phone: (619) 229-3932
Fax:
After Hours Phone: (619) 229-3932
Provider Gender: Female

License number: G84448
NPI: 1275681157
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Grossmont Hospital, Sharp Coronado Hosp And Healthcare Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website: www.sdsm.net
Email:
Medical Group(s):
IPA:

POMERANTZ, MICHAEL L

Provider ID: 203072
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (858) 657-8200
Fax:
After Hours Phone: (858) 657-8200
Provider Gender: Male
License number: A109105
NPI: 1356505705
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital, Sharp Memorial Hospital, Sharp Chula Vista Med Ctr, Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

POURTAHERI, SINA

Provider ID: 119044
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6312
Fax:
After Hours Phone: (619) 543-6312
Provider Gender: Male
License number: A136713
NPI: 1306153572
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

PRING, MAYA E

Provider ID: 52689
Board Certified Specialty: No
RADY CHILDRENS

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

SPECIALISTS SAN DIEGO MED FNDTN
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (858) 576-5999
 Fax:
 After Hours Phone: (858) 576-5999
 Provider Gender: Female
 License number: A77003
 NPI: 1104997964
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

RAISZADEH, RAMIN

Provider ID: 54392
 Board Certified Specialty: No
 LA JOLLA SPINE INSTITUTE
 MED GRP INC
 6719 ALVARADO RD STE 308
 SAN DIEGO, CA 92120-5268
 Phone: (619) 265-7912
 Fax: (619) 265-7922
 After Hours Phone: (619)
 265-7912
 Provider Gender: Male
 License number: A88341
 NPI: 1518021369
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Farsi, Spanish

Cultural Competency: No
Hospital Affiliation: Sharp
 Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:* W
Hours: M-F 9AM-5PM, SA
 9AM-5PM
Website: www.siosd.com
Email:
Medical Group(s):
 IPA:

RICKARDS, ENASS N , MD

Provider ID: 268909
 Board Certified Specialty: Yes
 COMMUNITY CARE IPA LLC
 9333 GENESEE AVE STE 350
 SAN DIEGO, CA 92121-2103
 Phone: (858) 455-6460
 Fax: (858) 455-7197
 After Hours Phone: (858)
 455-6460
 Provider Gender: Female
 License number: G79785
 NPI: 1609850080
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Arabic
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital, Scripps
 Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc,

Health Excel Ipa Inc, Imperial
 Health Holdings Medical
 Group-Sd

RICKARDS, ENASS N

Provider ID: 65531
 Board Certified Specialty: Yes
 GIRARD ORTHOPAEDIC
 SURGEONS MED GRP
 9333 GENESEE AVE STE 350
 SAN DIEGO, CA 92121-2103
 Phone: (858) 455-6460
 Fax: (858) 455-7197
 After Hours Phone: (858)
 455-6460
 Provider Gender: Female
 License number: G79785
 NPI: 1609850080
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Arabic
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital, Scripps
 Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc, Imperial
 Health Holdings Medical
 Group-Sd

RICKERT, KATHLEEN D

Provider ID: 108390
 Board Certified Specialty: No
 RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDTN

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D. Directorio de proveedores de atención especializada

3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123-4232
Phone: (858) 966-4003

Fax:

After Hours Phone: (858)
966-4003

Provider Gender: Female

License number: A140439

NPI: 1023308921

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

ROBERTSON, CATHERINE M

Provider ID: 64163

Board Certified Specialty: Yes

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222

Fax:

After Hours Phone: (619)

543-6222

Provider Gender: Female

License number: A87544

NPI: 1952565780

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

ROSENFIELD, ALAN L

Provider ID: 212875

Board Certified Specialty: No

HEALTH EXCEL IPA INC

9333 GENESEE AVE STE 350

SAN DIEGO, CA 92121-2103

Phone: (858) 455-6460

Fax: (858) 455-7197

After Hours Phone: (858)

455-6460

Provider Gender: Male

License number: G75293

NPI: 1588648968

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital Chula Vista, Scripps

Memorial Hospital, Paradise

Valley Hospital, Sharp Chula

Vista Med Ctr, Scripps Mercy

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc, Imperial

Health Holdings Medical
Group-Sd

ROSENFIELD, ALAN L , MD

Provider ID: 242938

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

9333 GENESEE AVE STE 350

SAN DIEGO, CA 92121-2103

Phone: (858) 455-6460

Fax: (858) 455-7197

After Hours Phone: (858)

455-6460

Provider Gender: Male

License number: G75293

NPI: 1588648968

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital Chula Vista, Scripps

Memorial Hospital, Paradise

Valley Hospital, Sharp Chula

Vista Med Ctr, Scripps Mercy

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc, Imperial

Health Holdings Medical

Group-Sd

ROSENFIELD, ALAN L

Provider ID: 262177

Board Certified Specialty: No

IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

9333 GENESEE AVE STE 350
SAN DIEGO, CA 92121-2103
Phone: (858) 455-6460

Fax: (858) 455-7197
After Hours Phone: (858)
455-6460

Provider Gender: Male
License number: G75293

NPI: 1588648968
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish

Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Paradise
Valley Hospital, Scripps Mercy
Hospital Chula Vista, Sharp
Chula Vista Med Ctr, Scripps
Mercy Hospital

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

⌘ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

RYNNING, RALPH E

Provider ID: 262195
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD

5555 RESERVOIR DR STE 104
SAN DIEGO, CA 92120-5198
Phone: (619) 286-9480
Fax: (619) 286-4568
After Hours Phone: (619)
286-9480
Provider Gender: Male

License number: A103946
NPI: 1952595316
Provider English Spoken: Yes
Provider Language(s) Spoken:
French, German, Norwegian,
Spanish

Cultural Competency: No
Hospital Affiliation: Alvarado
Hospital Llc, Sharp Coronado
Hosp And Healthcare Ctr,
Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

⌘ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings
Medical Group-Sd

SCHWARTZ, ALEXANDRA K

Provider ID: 64188
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax: (858) 966-6706
After Hours Phone: (619)
543-6222

Provider Gender: Female
License number: A60259
NPI: 1740206747
Provider English Spoken: Yes
Provider Language(s) Spoken:
German
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

⌘ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SHILLITO, MATTHEW C , MD

Provider ID: 247893
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
6719 ALVARADO RD STE 200
SAN DIEGO, CA 92120-5256
Phone: (619) 229-3932
Fax: (619) 582-2860

After Hours Phone: (619)
229-3932
Provider Gender: Male
License number: A109569
NPI: 1538318548
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish

Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Alvarado Hospital Llc,
Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/120
American Sign Language (ASL):
No

⌘ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SIROTA, MICHAEL A

Provider ID: 84579
Board Certified Specialty: No
SAN DIEGO SPORTS
MEDICINE AND
ORTHOPAEDIC CENTER INC
6719 ALVARADO RD STE 200

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

SAN DIEGO, CA 92120-5256

Phone: (619) 229-3932

Fax: (619) 582-2860

After Hours Phone: (619) 229-3932

Provider Gender: Male

License number: A129445

NPI: 1558542423

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont Hospital, Sharp Memorial Hospital, Alvarado Hospital Llc

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL): No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA 9AM-5PM

Website: www.sdsm.net

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

SIROTA, MICHAEL A , MD

Provider ID: 84579

Board Certified Specialty: No
SAN DIEGO SPORTS

MEDICINE AND

ORTHOPAEDIC CENTER INC

6719 ALVARADO RD STE 200

SAN DIEGO, CA 92120-5256

Phone: (619) 229-3932

Fax: (619) 582-2860

After Hours Phone: (619) 229-3932

229-3932

Provider Gender: Male

License number: A129445

NPI: 1558542423

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont Hospital, Sharp Memorial Hospital, Alvarado Hospital Llc

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

SMITH, DAVID G

Provider ID: 283855

Board Certified Specialty: No
HEALTH EXCEL IPA INC

4520 EXECUTIVE DR STE 150

SAN DIEGO, CA 92121-3084

Phone: (858) 453-8060

Fax: (858) 453-8260

After Hours Phone: (858) 453-8060

453-8060

Provider Gender: Male

License number: G37087

NPI: 1962497636

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL): No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

SPEIRS, JOSHUA N

Provider ID: 284217

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 966-5999

Fax: (858) 966-8519

After Hours Phone: (858) 966-5999

Provider Gender: Male

License number: A151041

NPI: 1164876918

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: 0/18

American Sign Language (ASL): No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

SPEIRS, JOSHUA N

Provider ID: 284218

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY # 3
SAN DIEGO, CA 92123-4232

Phone: (858) 966-6789

Fax: (858) 966-6706

After Hours Phone: (858) 966-6789

966-6789

Provider Gender: Male

License number: A151041

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1164876918
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

SULLIVAN, THOMAS B
Provider ID: 285247
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A138132
NPI: 1437565488
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Ucsd Medical Group
TASTO, JAMES P , MD
Provider ID: 218096
Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC
6719 ALVARADO RD STE 200
SAN DIEGO, CA 92120-5256
Phone: (619) 229-3932
Fax: (619) 582-2860
After Hours Phone: (619)
229-3932
Provider Gender: Male
License number: G14672
NPI: 1124021936
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Alvarado Hospital Llc,
Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

TASTO, JAMES P
Provider ID: 44083
Board Certified Specialty: No
SAN DIEGO SPORTS
MEDICINE AND
ORTHOPAEDIC CENTER INC
6719 ALVARADO RD STE 200
SAN DIEGO, CA 92120-5256
Phone: (619) 229-3932
Fax: (619) 582-2860
After Hours Phone: (619)
229-3932

Provider Gender: Male
License number: G14672
NPI: 1124021936
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Alvarado Hospital Llc,
Sharp Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website: www.sdsm.net
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

TAYYAB, NEIL A
Provider ID: 213622
Board Certified Specialty: No
HEALTH EXCEL IPA INC
9333 GENESEE AVE STE 350
SAN DIEGO, CA 92121-2103
Phone: (858) 455-6460
Fax: (858) 455-7197
After Hours Phone: (858)
455-6460
Provider Gender: Male
License number: A94408
NPI: 1831149970
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital Chula Vista, Scripps
Memorial Hospital, Sharp
Memorial Hospital, Scripps
Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>	<p>TAYYAB, NEIL A <i>Provider ID:</i> 35361 <i>Board Certified Specialty:</i> No GIRARD ORTHOPAEDIC SURGEONS MED GRP 9333 GENESEE AVE STE 350 SAN DIEGO, CA 92121-2103 <i>Phone:</i> (858) 455-6460 <i>Fax:</i> (858) 455-7197 <i>After Hours Phone:</i> (858) 455-6460 <i>Provider Gender:</i> Male <i>License number:</i> A94408 <i>NPI:</i> 1831149970 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista, Sharp Memorial Hospital, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>	<p><i>Phone:</i> (619) 291-8930 <i>Fax:</i> (619) 398-4989 <i>After Hours Phone:</i> (619) 291-8930 <i>Provider Gender:</i> Male <i>License number:</i> A69746 <i>NPI:</i> 1659332682 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Paradise Valley Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> W <i>Hours:</i> M-F 8:30AM-5PM, SA 9AM-5PM <i>Website:</i> califortho.com <i>Email:</i> <i>Medical Group(s):</i> IPA:</p>
<p>TAYYAB, NEIL A , MD <i>Provider ID:</i> 268617 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 9333 GENESEE AVE # 350A SAN DIEGO, CA 92121-2111 <i>Phone:</i> (858) 455-6460 <i>Fax:</i> (858) 455-7197 <i>After Hours Phone:</i> (858) 455-6460 <i>Provider Gender:</i> Male <i>License number:</i> A94408 <i>NPI:</i> 1831149970 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Scripps Mercy Hospital, Sharp Memorial Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd</p>	<p>TONTZ, WILLIAM L <i>Provider ID:</i> 66303 <i>Board Certified Specialty:</i> No CALIFORNIA ORTHOPAEDIC INST MED ASSOCS INC 7485 MISSION VALLEY RD STE 104A SAN DIEGO, CA 92108-4422</p>	<p>TRETIAKOV, MIKHAIL <i>Provider ID:</i> 284222 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-5999 <i>Fax:</i> (858) 966-8519 <i>After Hours Phone:</i> (858) 966-5999 <i>Provider Gender:</i> Male <i>License number:</i> A171934 <i>NPI:</i> 1912353772 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady</p>

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D. Directorio de proveedores de atención especializada

Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

TRETIAKOV, MIKHAIL

Provider ID: 284223
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY # 3
SAN DIEGO, CA 92123-4232
Phone: (858) 966-6789
Fax: (858) 966-6706
After Hours Phone: (858)
966-6789
Provider Gender: Male
License number: A171934
NPI: 1912353772
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

VITALE, KENNETH C

Provider ID: 104655
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (858) 657-8200
Fax:
After Hours Phone: (858)
657-8200
Provider Gender: Male
License number: C132964
NPI: 1730176868
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

YASZAY, BURT

Provider ID: 206303
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 576-5999
Fax: (858) 576-8412
After Hours Phone: (858)
576-5999
Provider Gender: Male
License number: A100336
NPI: 1770798647
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

YASZAY, BURT

Provider ID: 206305
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY STE
410
SAN DIEGO, CA 92123-4228
Phone: (858) 966-6789
Fax: (858) 966-6706
After Hours Phone: (858)
966-6789
Provider Gender: Male
License number: A100336
NPI: 1770798647
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/99
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

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D. Directorio de proveedores de atención especializada

IPA: Rady Childrens Health Network

YASZAY, BURT

Provider ID: 206307
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
7910 FROST ST STE 190
SAN DIEGO, CA 92123-2731
Phone: (858) 966-9360
Fax: (858) 966-8519
After Hours Phone: (858) 966-9360
Provider Gender: Male
License number: A100336
NPI: 1770798647
Provider English Spoken: Yes
Provider Language(s) Spoken: Yes
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/99
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

ZLOMISLIC, VINKO

Provider ID: 78122
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax: (858) 657-8235
After Hours Phone: (619) 543-6222

Provider Gender: Male
License number: A112819
NPI: 1346351509
Provider English Spoken: Yes
Provider Language(s) Spoken: Serbo-Croatian, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SURGERY PEDIATRIC

BICKLER, STEPHEN W

Provider ID: 270090
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123-4232
Phone: (858) 966-7711
Fax: (858) 966-7712
After Hours Phone: (858) 966-7711
Provider Gender: Male
License number: G58535
NPI: 1891866653
Provider English Spoken: Yes
Provider Language(s) Spoken: Yes
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/25

American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

GOLLIN, GERALD

Provider ID: 109561
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
8110 BIRMINGHAM WAY
SAN DIEGO, CA 92123-2758
Phone: (858) 966-5840
Fax:
After Hours Phone: (858) 966-5840

Provider Gender: Male
License number: G84953
NPI: 1477598662
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

GOLLIN, GERALD

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider ID: 205905
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
8110 BIRMINGHAM WAY # 2
SAN DIEGO, CA 92123-2758
Phone: (858) 966-7711
Fax:
After Hours Phone: (858) 966-7711
Provider Gender: Male
License number: G84953
NPI: 1477598662
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

GOLTS, EUGENE M

Provider ID: 217715
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY STE 202
SAN DIEGO, CA 92123-4227
Phone: (858) 966-8030
Fax:
After Hours Phone: (858) 966-8030
Provider Gender: Male

License number: A82530
NPI: 1316000649
Provider English Spoken: Yes
Provider Language(s) Spoken: Ukrainian
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Tri City Medical Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network, Ucsd Medical Group

GONDA, DAVID D

Provider ID: 205821
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
7910 FROST ST STE 120
SAN DIEGO, CA 92123-2776
Phone: (858) 966-8574
Fax: (858) 966-7930
After Hours Phone: (858) 966-8574
Provider Gender: Male
License number: A107984
NPI: 1427254937
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland

Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

GOSMAN, AMANDA A

Provider ID: 205841
Board Certified Specialty: Yes
RADY CHILDRENS HEALTH NETWORK
7920 FROST ST STE 200
SAN DIEGO, CA 92123-4289
Phone: (858) 966-5999
Fax: (858) 966-4064
After Hours Phone: (858) 966-5999
Provider Gender: Female
License number: A96153
NPI: 1164436291
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

KELLER, BENJAMIN A

Provider ID: 272196
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
7920 FROST ST STE 200
SAN DIEGO, CA 92123-4289
Phone: (858) 966-5999
Fax: (858) 966-4064
After Hours Phone: (858) 966-5999
Provider Gender: Male
License number: A118158
NPI: 1285953364
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

KELLER, BENJAMIN A

Provider ID: 285941
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-7711
Fax: (858) 966-7712
After Hours Phone: (858) 966-7711
Provider Gender: Male
License number: A118158

NPI: 1285953364
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

KLING, KAREN M

Provider ID: 205340
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
8110 BIRMINGHAM WAY FL 2
SAN DIEGO, CA 92123-2758
Phone: (858) 966-7711
Fax: (858) 966-7712
After Hours Phone: (858) 966-7711
Provider Gender: Female
License number: A53583
NPI: 1982775144
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Sharp Mary Birch Hosp For Women And Newborns, National Naval Med Ctr, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

KLING, KAREN M

Provider ID: 283380
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123-4232
Phone: (858) 966-7711
Fax: (858) 966-7712
After Hours Phone: (858) 966-7711
Provider Gender: Female
License number: A53583
NPI: 1982775144
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Sharp Mary Birch Hosp For Women And Newborns, National Naval Med Ctr, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

LAZAR, DAVID A

Provider ID: 205606

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
8110 BIRMINGHAM WAY FL 2
SAN DIEGO, CA 92123-2758
Phone: (858) 966-7711
Fax: (858) 966-7712
After Hours Phone: (858) 966-7711
Provider Gender: Male
License number: A105968
NPI: 1538365002
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

LAZAR, DAVID A
Provider ID: 283140
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123-4232
Phone: (858) 966-7711
Fax: (858) 966-7712
After Hours Phone: (858) 966-7711
Provider Gender: Male
License number: A105968
NPI: 1538365002
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

MADANI, MICHAEL M
Provider ID: 206267
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-3759
Fax: (619) 543-2652
After Hours Phone: (619) 543-3759
Provider Gender: Male
License number: A67201
NPI: 1518999069
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital, Tri City
Medical Ctr, Ucsd Medical Ctr,
Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Rady Childrens Health
Network, Ucsd Medical Group
SAENZ, NICHOLAS C
Provider ID: 206176
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
8110 BIRMINGHAM WAY FL 2
SAN DIEGO, CA 92123-2758
Phone: (858) 966-7711
Fax: (858) 966-7712
After Hours Phone: (858) 966-7711
Provider Gender: Male
License number: G84775
NPI: 1447321203
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

SAENZ, NICHOLAS C
Provider ID: 283170
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123-4232

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 966-7711
Fax: (858) 966-7712
After Hours Phone: (858) 966-7711
Provider Gender: Male
License number: G84775
NPI: 1447321203
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

THANGARAJAH, HARIHARAN
Provider ID: 206172
Board Certified Specialty: Yes
RADY CHILDRENS HEALTH NETWORK
8110 BIRMINGHAM WAY FL 2
SAN DIEGO, CA 92123-2758
Phone: (858) 966-7711
Fax: (858) 966-7712
After Hours Phone: (858) 966-7711
Provider Gender: Male
License number: A94137
NPI: 1598979593
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego

Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

THANGARAJAH, HARIHARAN
Provider ID: 256194
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123-4232
Phone: (858) 966-7711
Fax:
After Hours Phone: (858) 966-7711
Provider Gender: Male
License number: A94137
NPI: 1598979593

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

GOSMAN, AMANDA A
Provider ID: 52812
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
7920 FROST ST STE 200
SAN DIEGO, CA 92123-4289
Phone: (858) 966-7484

Fax:
After Hours Phone: (858) 966-7484
Provider Gender: Female
License number: A96153
NPI: 1164436291
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

♿ Accessibility: P, EB, IB, E, R, T, W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

GOSMAN, AMANDA A
Provider ID: 63926
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911

SURGERY PLASTIC

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: A96153
NPI: 1164436291
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

GUPTA, DEEPAK

Provider ID: 110728
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A114745
NPI: 1043445950
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HINCHCLIFF, KATHARINE

Provider ID: 277288
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A135631
NPI: 1346674561
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network, Ucsd Medical Group

HINCHCLIFF, KATHARINE

Provider ID: 277965
Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK
7920 FROST ST STE 200
SAN DIEGO, CA 92123-4289
Phone: (858) 966-5999
Fax: (858) 966-8394
After Hours Phone: (858) 966-5999
Provider Gender: Female
License number: A135631
NPI: 1346674561
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network, Ucsd Medical Group

HOLMES, RALPH E

Provider ID: 206105
Board Certified Specialty: Yes
RADY CHILDRENS HEALTH NETWORK
7920 FROST ST STE 200
SAN DIEGO, CA 92123-4289
Phone: (858) 966-5999
Fax: (858) 966-8394
After Hours Phone: (858) 966-5999
Provider Gender: Male
License number: G24863
NPI: 1104899723
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

KIM, ERINN N

Provider ID: 283742
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
7920 FROST ST STE 200
SAN DIEGO, CA 92123-4289
Phone: (858) 966-5999
Fax: (858) 966-4064
After Hours Phone: (858) 966-5999
Provider Gender: Female
License number: A134797
NPI: 1558705061
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Rady Childrens Health Network

KOLB, FREDERIC J

Provider ID: 246239
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: F39
NPI: 1790341832
Provider English Spoken: Yes
Provider Language(s) Spoken: French
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network, Ucsd Medical Group

KOLB, FREDERIC J

Provider ID: 246240
Board Certified Specialty: No
UCSD MEDICAL GROUP
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273

Provider Gender: Female
License number: F39
NPI: 1790341832
Provider English Spoken: Yes
Provider Language(s) Spoken: French
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network, Ucsd Medical Group

KOLB, FREDERIC J

Provider ID: 255575
Board Certified Specialty: No
UCSD MEDICAL GROUP
4520 EXECUTIVE DR
SAN DIEGO, CA 92121-3018
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: F39
NPI: 1790341832
Provider English Spoken: Yes
Provider Language(s) Spoken: French
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Rady Childrens Health Network, Ucsd Medical Group</p>	<p>RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 7920 FROST ST STE 200 SAN DIEGO, CA 92123-4289 <i>Phone:</i> (858) 966-5999 <i>Fax:</i> (858) 966-8394 <i>After Hours Phone:</i> (858) 966-5999 <i>Provider Gender:</i> Male <i>License number:</i> A114551 <i>NPI:</i> 1780811786 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Ucd Davis Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Rady Childrens Health Network, Ucsd Medical Group</p>	<p><i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Ucd Davis Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Rady Childrens Health Network, Ucsd Medical Group</p>
<p>KOLB, FREDERIC J <i>Provider ID:</i> 255576 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 7920 FROST ST STE 200 SAN DIEGO, CA 92123-4289 <i>Phone:</i> (858) 966-5999 <i>Fax:</i> (858) 966-8394 <i>After Hours Phone:</i> (858) 966-5999 <i>Provider Gender:</i> Female <i>License number:</i> F39 <i>NPI:</i> 1790341832 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> French <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Rady Childrens Health Network, Ucsd Medical Group</p>	<p>LANCE, SAMUEL H <i>Provider ID:</i> 110708 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 <i>Phone:</i> (619) 543-6222 <i>Fax:</i> <i>After Hours Phone:</i> (619) 543-6222 <i>Provider Gender:</i> Male <i>License number:</i> A114551 <i>NPI:</i> 1780811786</p>	<p>LANCE, SAMUEL H <i>Provider ID:</i> 205647 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 7920 FROST ST STE 200 SAN DIEGO, CA 92123-4289 <i>Phone:</i> (858) 966-5999 <i>Fax:</i> (858) 966-8394 <i>After Hours Phone:</i> (858) 966-5999 <i>Provider Gender:</i> Male <i>License number:</i> A114551 <i>NPI:</i> 1780811786 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Ucd Davis Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i></p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network, Ucsd Medical Group

LANCE, SAMUEL H

Provider ID: 256644

Board Certified Specialty: No

UCSD MEDICAL GROUP

4520 EXECUTIVE DR

SAN DIEGO, CA 92121-3018

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A114551

NPI: 1780811786

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego, Ucd Davis Medical Ctr, Ucsd La Jolla

John Sally Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network, Ucsd Medical Group

LANCE, SAMUEL H

Provider ID: 256645

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A114551

NPI: 1780811786

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Uc Davis

Medical Ctr, Rady Childrens

Hospital San Diego, Ucsd La

Jolla John Sally Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network, Ucsd Medical Group

POLLACK, LARRY H

Provider ID: 54346

Board Certified Specialty: No

SAN DIEGO GEN AND VASCULAR SURGEONS MED

GRP INC

7910 FROST ST STE 250

SAN DIEGO, CA 92123-2752

Phone: (858) 565-0104

Fax:

After Hours Phone: (858)

565-0104

Provider Gender: Male

License number: A41696

NPI: 1104998400

Provider English Spoken: Yes

Provider Language(s) Spoken:

German, Spanish

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-TH 9AM-5PM, F

9AM-4PM, SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

RECHNIC, MARK

Provider ID: 64155

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222

Fax:

After Hours Phone: (619)

543-6222

Provider Gender: Male

License number: G42815

NPI: 1114060126

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Sharp

Memorial Hospital, Ucsd Medical

Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

REID, CHRISTOPHER M

Provider ID: 224795
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A122947
NPI: 1982964276
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network, Ucsd Medical Group

REID, CHRISTOPHER M

Provider ID: 245523
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
7920 FROST ST STE 200
SAN DIEGO, CA 92123-4289
Phone: (858) 966-5999
Fax: (858) 966-8394
After Hours Phone: (858)
966-5999
Provider Gender: Male
License number: A122947

NPI: 1982964276
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Rady Childrens Health
Network, Ucsd Medical Group

REID, CHRISTOPHER M

Provider ID: 255564
Board Certified Specialty: No
UCSD MEDICAL GROUP
4520 EXECUTIVE DR
SAN DIEGO, CA 92121-3018
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A122947
NPI: 1982964276

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Rady Childrens Health
Network, Ucsd Medical Group

VECCHIONE, THOMAS R

Provider ID: 205702
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3399 1ST AVE
SAN DIEGO, CA 92103-5601
Phone: (619) 297-4433
Fax:

After Hours Phone: (619)
297-4433
Provider Gender: Male
License number: C30357
NPI: 1154415891
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital, Scripps
Mercy Hospital, Scripps Mercy
Hospital Chula Vista, Sharp Mary
Birch Hosp For Women And
Newborns
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

WONG, RYAN K

Provider ID: 64258
Board Certified Specialty: No
UCSD MEDICAL GROUP

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Male
License number: A106001
NPI: 1912101452
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Southwest
Healthcare System Murrieta,
Loma Linda University Med Ctr
Murrieta, Saddleback Memorial
Med Ctr, Hoag Memorial Hospital
Presbyterian, Temecula Valley
Hospital Inc, Ucsd Medical Ctr,
Stanford Health Care, Southwest
Healthcare System Wildomar
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SURGERY THORACIC

ARTRIP, JOHN H
Provider ID: 243973
Board Certified Specialty: No
UCSD MEDICAL GROUP
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8030
Fax: (858) 966-8032
After Hours Phone: (858)
966-8030
Provider Gender: Male

License number: C160728
NPI: 1831141084
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network, Ucsd Medical Group

ARTRIP, JOHN H
Provider ID: 260597
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8030
Fax: (858) 966-8032
After Hours Phone: (858)
966-8030
Provider Gender: Male
License number: C160728
NPI: 1831141084
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/99
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/99
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Rady Childrens Health
Network, Ucsd Medical Group

COLETTA, JOELLE M
Provider ID: 63860
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Female
License number: A55001
NPI: 1447222377
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Green Hospital, Sharp Memorial
Hospital, Ucsd Medical Ctr, Rady
Childrens Hospital San Diego,
Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network, Ucsd Medical Group

Medical Group(s):
IPA: Rady Childrens Health
Network, Ucsd Medical Group

COPELAND, JACK G
Provider ID: 63861
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911

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D. Directorio de proveedores de atención especializada

Phone: (619) 543-6222

Fax:

After Hours Phone: (619)
543-6222

Provider Gender: Male

License number: G19547

NPI: 1730152786

Provider English Spoken: Yes

Provider Language(s) Spoken:

French

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

GANTA, SRUJAN

Provider ID: 275611

Board Certified Specialty: No
UCSD MEDICAL GROUP

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 966-5855

Fax:

After Hours Phone: (858)

966-5855

Provider Gender: Male

License number: A166273

NPI: 1265071005

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network, Ucsd Medical Group

MONTESA, CHRISTINE M

Provider ID: 215266

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3030 CHILDRENS WAY STE
202

SAN DIEGO, CA 92123-4227

Phone: (858) 966-8030

Fax:

After Hours Phone: (858)

966-8030

Provider Gender: Female

License number: A110356

NPI: 1467616581

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: San Antonio
Comm Hosp, Ucsd La Jolla John
Sally Thornton, Ucsd Medical

Ctr, Rady Childrens Hospital San
Diego, Pomona Valley Hosp Med

Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network, Ucsd Medical Group

MONTESA, CHRISTINE M

Provider ID: 239170

Board Certified Specialty: No
UCSD MEDICAL GROUP

3030 CHILDRENS WAY STE
202

SAN DIEGO, CA 92123-4227

Phone: (858) 966-8030

Fax:

After Hours Phone: (858)

966-8030

Provider Gender: Female

License number: A110356

NPI: 1467616581

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: San Antonio
Comm Hosp, Ucsd La Jolla John
Sally Thornton, Ucsd Medical

Ctr, Rady Childrens Hospital San
Diego, Pomona Valley Hosp Med

Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network, Ucsd Medical Group

MORENOCABRAL, RICARDO J

Provider ID: 44149

Board Certified Specialty: No
RICARDO J MORENO MD INC

550 WASHINGTON ST STE 701
SAN DIEGO, CA 92103-2229

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D. Directorio de proveedores de atención especializada

Phone: (619) 297-0008
Fax:
After Hours Phone: (619) 297-0008
Provider Gender: Male
License number: A30738
NPI: 1346217213
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Sharp Chula Vista Med Ctr, Sharp Memorial Hospital, Scripps Mercy Hospital, Paradise Valley Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-4PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

NIGRO, JOHN J

Provider ID: 205367
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY STE 202
SAN DIEGO, CA 92123-4227
Phone: (858) 966-8030
Fax: (858) 966-8032
After Hours Phone: (858) 966-8030
Provider Gender: Male
License number: G80887
NPI: 1881707818
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PRETORIUS, GERT D

Provider ID: 64148
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-7777
Fax:
After Hours Phone: (619) 543-7777
Provider Gender: Male
License number: A113774
NPI: 1629385836
Provider English Spoken: Yes
Provider Language(s) Spoken: Afrikaans
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Tri City Medical Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Rady Childrens Health Network, Ucsd Medical Group

SAKAKIBARA, NAOHIDE

Provider ID: 64171
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A67153
NPI: 1588697916
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SIDERIS, ANTONIOS

Provider ID: 285655
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A173526

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1134495336
Provider English Spoken: Yes
Provider Language(s) Spoken:
French, Greek, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group
RACE, ALICE J
Provider ID: 271830
Board Certified Specialty: No
UCSD MEDICAL GROUP
4520 EXECUTIVE DR
SAN DIEGO, CA 92121-3018
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A169163
NPI: 1982086922
Provider English Spoken: Yes
Provider Language(s) Spoken:
Mandarin
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

Board Certified Specialty: Yes
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY # 107
SAN DIEGO, CA 92123-4223
Phone: (858) 966-7711
Fax:
After Hours Phone: (858)
966-7711
Provider Gender: Female
License number: C54096
NPI: 1104861947
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Rady Childrens Hospital San
Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

SURGICAL ONCOLOGY

BARONE, ROBERT M
Provider ID: 279696
Board Certified Specialty: Yes
UCSD MEDICAL GROUP
3075 HEALTH CENTER DR STE
102
SAN DIEGO, CA 92123-2773
Phone: (858) 268-7777
Fax: (858) 637-7883
After Hours Phone: (858)
268-7777
Provider Gender: Male
License number: G22669
NPI: 1528083573
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Scripps
Memorial Hospital, Scripps
Memorial Hospital, Sharp Mary
Birch Hosp For Women And
Newborns
Medi-Cal Open Panel: Yes

SCHNICKEL, GABRIEL T
Provider ID: 262192
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
8001 FROST ST
SAN DIEGO, CA 92123-2746
Phone: (858) 966-8354
Fax: (858) 966-5815
After Hours Phone: (858)
966-8354
Provider Gender: Male
License number: A83329
NPI: 1619111440
Provider English Spoken: Yes

TRANSPLANT SURGERY

MEKEEL, KRISTIN L
Provider ID: 262109

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken: *Accessibility:* P, EB, IB, E, R, T, W
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

Medical Group(s):
IPA: Health Excel Ipa Inc

BASTUBA, MARTIN D

Provider ID: 212800
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 6699 ALVARADO RD STE 2207
 SAN DIEGO, CA 92120-5240
Phone: (619) 286-3520
Fax: (619) 286-5412
After Hours Phone: (619) 286-3520

Provider Gender: Male
License number: G76872
NPI: 1790769016
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Alvarado Hospital Llc, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

BECHIS, SETH K

Provider ID: 110165
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A139139

ANTHONY, JULIAN N

Provider ID: 212450
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 16918 DOVE CANYON RD STE 103
 SAN DIEGO, CA 92127-3455
Phone: (858) 649-5100
Fax: (858) 649-5099
After Hours Phone: (858) 649-5100

Provider Gender: Male
License number: A82316
NPI: 1841392552
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Paradise Valley Hospital, Sharp Chula Vista Med Ctr, Sharp Memorial Hospital, Pomerado Hospital, Tri City Medical Ctr, Palomar Health Downtown Campus, Palomar Medical Center, Scripps Memorial Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

UROLOGY

ALAGIRI, MADHU

Provider ID: 52903
Board Certified Specialty: No
 RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 7920 FROST ST STE 200
 SAN DIEGO, CA 92123-4289
Phone: (858) 966-7484
Fax:
After Hours Phone: (858) 966-7484
Provider Gender: Male
License number: G83089
NPI: 1619083961
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

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D. Directorio de proveedores de atención especializada

NPI: 1376863746
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BOSCH, PHILIP C
Provider ID: 115863
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Male
License number: G46782
NPI: 1508845983
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA:
BUCKLEY, JILL C
Provider ID: 83249
Board Certified Specialty: No
UCSD MEDICAL GROUP
4520 EXECUTIVE DR STE 111
SAN DIEGO, CA 92121-3019
Phone: (858) 657-8860
Fax: (858) 228-1740
After Hours Phone: (858)
657-8860
Provider Gender: Female
License number: A77631
NPI: 1730198128
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Medical Ctr At
Ucsf, Rady Childrens Hospital
San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CHIANG, GEORGE
Provider ID: 205945
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
7920 FROST ST STE 200
SAN DIEGO, CA 92123-4289
Phone: (858) 966-7484
Fax: (858) 966-4064
After Hours Phone: (858)
966-7484
Provider Gender: Male
License number: A98687
NPI: 1093773954
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Parkview Community Hospital
Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R, T

CHEN, TONY T
Provider ID: 283960
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A171188

NPI: 1245684497
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CHIANG, GEORGE
Provider ID: 205945
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
7920 FROST ST STE 200
SAN DIEGO, CA 92123-4289
Phone: (858) 966-7484
Fax: (858) 966-4064
After Hours Phone: (858)
966-7484
Provider Gender: Male
License number: A98687
NPI: 1093773954
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Parkview Community Hospital
Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R, T

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

CHIANG, GEORGE

Provider ID: 52893

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED

FNDTN

7920 FROST ST STE 200

SAN DIEGO, CA 92123-4289

Phone: (858) 966-7484

Fax:

After Hours Phone: (858)

966-7484

Provider Gender: Male

License number: A98687

NPI: 1093773954

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Parkview Community Hospital

Medical Center

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, R,

T, W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

COHEN, EDWARD S

Provider ID: 120293

Board Certified Specialty: No

GENESIS HEALTHCARE

PARTNERS PC

3444 KEARNY VILLA RD STE

201

SAN DIEGO, CA 92123-1960

Phone: (858) 430-1101

Fax:

After Hours Phone: (858)

430-1101

Provider Gender: Male

License number: G56844

NPI: 1093756827

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital Encinitas,

Scripps Memorial Hospital, Ucsd

Medical Ctr, Scripps Mercy

Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

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

9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc

COHEN, EDWARD S

Provider ID: 260181

Board Certified Specialty: No

HEALTH EXCEL IPA INC

3444 KEARNY VILLA RD STE

201

SAN DIEGO, CA 92123-1960

Phone: (858) 430-1101

Fax:

After Hours Phone: (858)

430-1101

Provider Gender: Male

License number: G56844

NPI: 1093756827

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital Encinitas,

Scripps Memorial Hospital, Ucsd

Medical Ctr, Scripps Mercy

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc

DATO, PAUL E

Provider ID: 257132

Board Certified Specialty: No

HEALTH EXCEL IPA INC

3444 KEARNY VILLA RD STE

201

SAN DIEGO, CA 92123-1960

Phone: (858) 430-1101

Fax: (858) 430-1106

After Hours Phone: (858)

430-1101

Provider Gender: Male

License number: A43540

NPI: 1588632715

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc</p>	<p>PARTNERS PC 3444 KEARNY VILLA RD STE 201 SAN DIEGO, CA 92123-1960 <i>Phone:</i> (858) 430-1101 <i>Fax:</i> <i>After Hours Phone:</i> (858) 430-1101 <i>Provider Gender:</i> Male <i>License number:</i> A43540 <i>NPI:</i> 1588632715 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No</p>	<p>Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Pomerado Hospital, Palomar Medical Center, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Ucsd Medical Ctr, Sharp Memorial Hospital, Kaiser Foundation Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc</p>
<p>DATO, PAUL E , MD <i>Provider ID:</i> 269141 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 3444 KEARNY VILLA RD STE 201 SAN DIEGO, CA 92123-1960 <i>Phone:</i> (858) 430-1101 <i>Fax:</i> (858) 430-1106 <i>After Hours Phone:</i> (858) 430-1101 <i>Provider Gender:</i> Male <i>License number:</i> A43540 <i>NPI:</i> 1588632715 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No</p>	<p><i>♿ Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc</p>	<p>DICKS, BRIAN M <i>Provider ID:</i> 57668 <i>Board Certified Specialty:</i> No GENESIS HEALTHCARE PARTNERS PC 4060 4TH AVE STE 310 SAN DIEGO, CA 92103-2120 <i>Phone:</i> (619) 297-4707 <i>Fax:</i> (858) 429-7927 <i>After Hours Phone:</i> (619) 297-4707 <i>Provider Gender:</i> Male <i>License number:</i> A100413 <i>NPI:</i> 1144425687 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish</p>
<p><i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Health Excel Ipa Inc</p>	<p>DICKS, BRIAN M <i>Provider ID:</i> 257082 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 4060 4TH AVE STE 310 SAN DIEGO, CA 92103-2120 <i>Phone:</i> (619) 297-4707 <i>Fax:</i> (858) 429-7927 <i>After Hours Phone:</i> (619) 297-4707 <i>Provider Gender:</i> Male <i>License number:</i> A100413 <i>NPI:</i> 1144425687 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i></p>	<p><i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Pomerado Hospital, Palomar Medical Center, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Ucsd Medical Ctr, Sharp Memorial Hospital, Kaiser</p>
<p>DATO, PAUL E <i>Provider ID:</i> 42443 <i>Board Certified Specialty:</i> Yes GENESIS HEALTHCARE</p>	<p><i>Provider Language(s) Spoken:</i></p>	

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D. Directorio de proveedores de atención especializada

Foundation Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

DICKS, BRIAN M , MD

Provider ID: 57668
Board Certified Specialty: No
GENESIS HEALTHCARE
PARTNERS PC
4060 4TH AVE STE 310
SAN DIEGO, CA 92103-2120
Phone: (619) 297-4707
Fax: (858) 429-7927
After Hours Phone: (619)
297-4707
Provider Gender: Male
License number: A100413
NPI: 1144425687
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Pomerado
Hospital, Palomar Medical
Center, Scripps Mercy Hospital
Chula Vista, Scripps Mercy
Hospital, Ucsd Medical Ctr,
Sharp Memorial Hospital, Kaiser
Foundation Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

DICKS, BRIAN M

Provider ID: 63876
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Male
License number: A100413
NPI: 1144425687
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Pomerado
Hospital, Palomar Medical
Center, Scripps Mercy Hospital
Chula Vista, Scripps Mercy
Hospital, Ucsd Medical Ctr,
Sharp Memorial Hospital, Kaiser
Foundation Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

GAYLIS, FRANKLIN D , MD

Provider ID: 119549
Board Certified Specialty: No

COMMUNITY CARE IPA LLC
5395 RUFFIN RD STE 202
SAN DIEGO, CA 92123-1338
Phone: (858) 569-7800
Fax: (858) 429-7930
After Hours Phone: (858)
569-7800
Provider Gender: Male
License number: A46251
NPI: 1750360806
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

GODEBU, ELANA

Provider ID: 127348
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (858) 657-7876
Fax:
After Hours Phone: (858)
657-7876
Provider Gender: Female
License number: A119468
NPI: 1609189224
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>Thornton Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group</p>	<p>HEALTH EXCEL IPA INC 4060 4TH AVE STE 310 SAN DIEGO, CA 92103-2120 Phone: (619) 297-4707 Fax: (858) 429-7927 After Hours Phone: (619) 297-4707 Provider Gender: Male License number: A129770 NPI: 1861747396 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital Chula Vista Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Health Excel Ipa Inc</p>	<p>Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Health Excel Ipa Inc</p>
<p>GODEBU, ELANA Provider ID: 203511 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 Phone: (858) 657-7876 Fax: After Hours Phone: (858) 657-7876 Provider Gender: Female License number: A119468 NPI: 1609189224 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group</p>	<p>HOLDEN, MARC M Provider ID: 269620 Board Certified Specialty: No COMMUNITY CARE IPA LLC 4060 4TH AVE STE 310 SAN DIEGO, CA 92103-2120 Phone: (619) 297-4707 Fax: (858) 429-7927 After Hours Phone: (619) 297-4707 Provider Gender: Male License number: A129770 NPI: 1861747396 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital Chula Vista</p>	<p>HSIEH, TUNG CHIN Provider ID: 277238 Board Certified Specialty: No UCSD MEDICAL GROUP 4520 EXECUTIVE DR SAN DIEGO, CA 92121-3018 Phone: (800) 926-8273 Fax: (888) 539-8781 After Hours Phone: (800) 926-8273 Provider Gender: Male License number: A120604 NPI: 1073758652 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group</p>
<p>HOLDEN, MARC M Provider ID: 257169 Board Certified Specialty: No</p>	<p>HSIEH, TUNG CHIN Provider ID: 277240 Board Certified Specialty: No</p>	

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D. Directorio de proveedores de atención especializada

UCSD MEDICAL GROUP
11515 EL CAMINO REAL STE
110
SAN DIEGO, CA 92130-3034
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A120604
NPI: 1073758652
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HSIEH, TUNG CHIN

Provider ID: 63967
Board Certified Specialty: No
UCSD MEDICAL GROUP
4520 EXECUTIVE DR STE 111
SAN DIEGO, CA 92121-3019
Phone: (858) 657-8860
Fax: (858) 228-1740
After Hours Phone: (858)
657-8860
Provider Gender: Male
License number: A120604
NPI: 1073758652
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KANE, CHRISTOPHER J

Provider ID: 63988
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Male
License number: G69249
NPI: 1083636294
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KEILLER, DANNY L , MD

Provider ID: 243958

Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC
3444 KEARNY VILLA RD STE
202
SAN DIEGO, CA 92123-1960
Phone: (619) 299-0670
Fax: (858) 221-5049
After Hours Phone: (619)
299-0670
Provider Gender: Male
License number: C32092
NPI: 1346356961
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
Coronado Hosp And Healthcare
Ctr, Sharp Memorial Hospital,
Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

LAHEY, SUSAN

Provider ID: 128623
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: C137247
NPI: 1366578031
Provider English Spoken: Yes

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D. Directorio de proveedores de atención especializada

<p><i>Provider Language(s) Spoken:</i> IPA: Rady Childrens Health Network</p> <p><i>Cultural Competency:</i> No</p> <p><i>Hospital Affiliation:</i></p> <p><i>Medi-Cal Open Panel:</i> No</p> <p><i>Min/Max Age:</i> None</p> <p><i>American Sign Language (ASL):</i> No</p> <p>♿ <i>Accessibility:</i> W</p> <p><i>Hours:</i> M-SA 9AM-5PM</p> <p><i>Website:</i></p> <p><i>Email:</i></p> <p><i>Medical Group(s):</i> IPA:</p>	<p>MONGA, MANOJ</p> <p><i>Provider ID:</i> 256847</p> <p><i>Board Certified Specialty:</i> No</p> <p>UCSD MEDICAL GROUP</p> <p>200 W ARBOR DR</p> <p>SAN DIEGO, CA 92103-1911</p> <p><i>Phone:</i> (800) 926-8273</p> <p><i>Fax:</i> (888) 539-8781</p> <p><i>After Hours Phone:</i> (800) 926-8273</p> <p><i>Provider Gender:</i> Female</p> <p><i>License number:</i> G81273</p> <p><i>NPI:</i> 1174609127</p> <p><i>Provider English Spoken:</i> Yes</p> <p><i>Provider Language(s) Spoken:</i></p> <p><i>Cultural Competency:</i> No</p> <p><i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton</p> <p><i>Medi-Cal Open Panel:</i> Yes</p> <p><i>Min/Max Age:</i> 0/999</p> <p><i>American Sign Language (ASL):</i> No</p> <p>♿ <i>Accessibility:</i></p> <p><i>Hours:</i> M-SA 9AM-5PM</p> <p><i>Website:</i></p> <p><i>Email:</i></p> <p><i>Medical Group(s):</i> IPA: Ucsd Medical Group</p>	<p><i>NPI:</i> 1174609127</p> <p><i>Provider English Spoken:</i> Yes</p> <p><i>Provider Language(s) Spoken:</i></p> <p><i>Cultural Competency:</i> No</p> <p><i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton</p> <p><i>Medi-Cal Open Panel:</i> Yes</p> <p><i>Min/Max Age:</i> 0/999</p> <p><i>American Sign Language (ASL):</i> No</p> <p>♿ <i>Accessibility:</i></p> <p><i>Hours:</i> M-SA 9AM-5PM</p> <p><i>Website:</i></p> <p><i>Email:</i></p> <p><i>Medical Group(s):</i> IPA: Ucsd Medical Group</p>
<p>MARIETTI SHEPHERD, SARAH R</p> <p><i>Provider ID:</i> 265122</p> <p><i>Board Certified Specialty:</i> No</p> <p>RADY CHILDRENS HEALTH NETWORK</p> <p>7920 FROST ST STE 200</p> <p>SAN DIEGO, CA 92123-4289</p> <p><i>Phone:</i> (858) 966-7484</p> <p><i>Fax:</i> (858) 966-4064</p> <p><i>After Hours Phone:</i> (858) 966-7484</p> <p><i>Provider Gender:</i> Female</p> <p><i>License number:</i> A106447</p> <p><i>NPI:</i> 1801094115</p> <p><i>Provider English Spoken:</i> Yes</p> <p><i>Provider Language(s) Spoken:</i></p> <p><i>Cultural Competency:</i> No</p> <p><i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland</p> <p><i>Medi-Cal Open Panel:</i> Yes</p> <p><i>Min/Max Age:</i> 0/18</p> <p><i>American Sign Language (ASL):</i> No</p> <p>♿ <i>Accessibility:</i> P, EB, IB, E, R, T</p> <p><i>Hours:</i> M-SA 9AM-5PM</p> <p><i>Website:</i></p> <p><i>Email:</i></p> <p><i>Medical Group(s):</i></p>	<p>MONGA, MANOJ</p> <p><i>Provider ID:</i> 274480</p> <p><i>Board Certified Specialty:</i> No</p> <p>UCSD MEDICAL GROUP</p> <p>16950 VIA TAZON</p> <p>SAN DIEGO, CA 92127-1607</p> <p><i>Phone:</i> (800) 926-8273</p> <p><i>Fax:</i> (888) 539-8781</p> <p><i>After Hours Phone:</i> (800) 926-8273</p> <p><i>Provider Gender:</i> Female</p> <p><i>License number:</i> G81273</p>	<p>MOSELEY, WILLIAM G</p> <p><i>Provider ID:</i> 265104</p> <p><i>Board Certified Specialty:</i> No</p> <p>IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD</p> <p>3969 4TH AVE STE 202</p> <p>SAN DIEGO, CA 92103-3165</p> <p><i>Phone:</i> (619) 260-0060</p> <p><i>Fax:</i> (619) 260-0460</p> <p><i>After Hours Phone:</i> (619) 260-0060</p> <p><i>Provider Gender:</i> Male</p> <p><i>License number:</i> G20196</p> <p><i>NPI:</i> 1568564276</p> <p><i>Provider English Spoken:</i> Yes</p> <p><i>Provider Language(s) Spoken:</i></p> <p><i>Cultural Competency:</i> No</p> <p><i>Hospital Affiliation:</i> Sharp Memorial Hospital</p> <p><i>Medi-Cal Open Panel:</i> Yes</p> <p><i>Min/Max Age:</i> 0/999</p> <p><i>American Sign Language (ASL):</i> No</p> <p>♿ <i>Accessibility:</i> W</p> <p><i>Hours:</i> M-SA 9AM-5PM</p> <p><i>Website:</i></p> <p><i>Email:</i></p>

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D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Imperial Health Holdings
Medical Group-Sd

NEUSTEIN, PAUL

Provider ID: 276972
Board Certified Specialty: No
HEALTH EXCEL IPA INC
11770 BERNARDO PLAZA CT
STE 270
SAN DIEGO, CA 92128-2425
Phone: (858) 485-0554
Fax: (858) 429-7933
After Hours Phone: (858)
485-0554

Provider Gender: Male
License number: G42225
NPI: 1578529731
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Doctors Hsp
Of Modesto
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

PARSONS, LOWELL C

Provider ID: 64129
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222

Provider Gender: Male
License number: G33834
NPI: 1588677124
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

PATEL, DEVIN N

Provider ID: 246094
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:

After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A144629
NPI: 1437505559
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton, Cedars Sinai Medical
Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

PE, MARK- RALLY L

Provider ID: 257155
Board Certified Specialty: No
HEALTH EXCEL IPA INC
4060 4TH AVE STE 310
SAN DIEGO, CA 92103-2120
Phone: (619) 297-4707
Fax: (858) 429-7927
After Hours Phone: (619)
297-4707

Provider Gender: Male
License number: A112013
NPI: 1801003694
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Scripps
Mercy Hospital Chula Vista,
Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

PE, MARK- RALLY L

Provider ID: 55252
Board Certified Specialty: No
GENESIS HEALTHCARE
PARTNERS PC
4060 4TH AVE STE 310
SAN DIEGO, CA 92103-2120

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 297-4707
Fax:
After Hours Phone: (619)
297-4707
Provider Gender: Male
License number: A112013
NPI: 1801003694
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Scripps
Mercy Hospital Chula Vista,
Scripps Mercy Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

PE, MARK- RALLY L , MD
Provider ID: 55252
Board Certified Specialty: No
GENESIS HEALTHCARE
PARTNERS PC
4060 4TH AVE STE 310
SAN DIEGO, CA 92103-2120
Phone: (619) 297-4707
Fax: (858) 429-7927
After Hours Phone: (619)
297-4707
Provider Gender: Male
License number: A112013
NPI: 1801003694
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish

Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Scripps
Mercy Hospital Chula Vista,
Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc


REDDY, MADHUMITHA C
Provider ID: 117539
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: 20A15373
NPI: 1568724417
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi, Spanish, Telugu
Cultural Competency: No
Hospital Affiliation: Loma Linda
University Med Ctr Murrieta,
Southwest Healthcare System
Murrieta, Southwest Healthcare
System Wildomar
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA:
ROBERTS, JAMES L
Provider ID: 113321
Board Certified Specialty: Yes
GENESIS HEALTHCARE
PARTNERS PC
3444 KEARNY VILLA RD STE
202
SAN DIEGO, CA 92123-1960
Phone: (619) 299-0670
Fax:
After Hours Phone: (619)
299-0670
Provider Gender: Male
License number: G59945
NPI: 1508972191
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Sharp
Coronado Hosp And Healthcare
Ctr, Scripps Mercy Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health
Plan Direct, Community Care Ipa
Llc, Health Excel Ipa Inc

ROBERTS, JAMES L
Provider ID: 257165
Board Certified Specialty: No
HEALTH EXCEL IPA INC


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D. Directorio de proveedores de atención especializada

3444 KEARNY VILLA RD STE 202
 SAN DIEGO, CA 92123-1960
 Phone: (619) 299-0670
 Fax: (858) 429-7929
 After Hours Phone: (619) 299-0670
 Provider Gender: Male
 License number: G59945
 NPI: 1508972191
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp Memorial Hospital, Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:  Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Health Excel Ipa Inc


ROBERTS, JAMES L

Provider ID: 261707
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 3444 KEARNY VILLA RD STE 201
 SAN DIEGO, CA 92123-1960
 Phone: (858) 430-1101
 Fax: (858) 221-5049
 After Hours Phone: (858) 430-1101
 Provider Gender: Male
 License number: G59945
 NPI: 1508972191


Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp Memorial Hospital, Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:  Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Health Excel Ipa Inc

ROBERTS, JAMES L , MD

Provider ID: 270010
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 3444 KEARNY VILLA RD STE 201
 SAN DIEGO, CA 92123-1960
 Phone: (858) 430-1101
 Fax: (858) 221-5049
 After Hours Phone: (858) 430-1101
 Provider Gender: Male
 License number: G59945
 NPI: 1508972191
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp Memorial Hospital, Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999

American Sign Language (ASL): No
 Accessibility:  Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Health Excel Ipa Inc

ROBERTS, JAMES L , MD

Provider ID: 65495
 Board Certified Specialty: Yes
 COMMUNITY CARE IPA LLC
 4033 3RD AVE STE 400
 SAN DIEGO, CA 92103-2140
 Phone: (619) 299-0670
 Fax: (858) 429-7929
 After Hours Phone: (619) 299-0670
 Provider Gender: Male
 License number: G59945
 NPI: 1508972191
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp Memorial Hospital, Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:  Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Health Excel Ipa Inc

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D. Directorio de proveedores de atención especializada

ROCHESTER, MARIANNE G

Provider ID: 265134
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
3969 4TH AVE STE 202
SAN DIEGO, CA 92103-3165
Phone: (619) 260-0060
Fax: (619) 260-0460
After Hours Phone: (619)
260-0060
Provider Gender: Female
License number: A45939
NPI: 1386746097
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Sharp Chula Vista Med
Ctr, Sharp Memorial Hospital,
Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings
Medical Group-Sd

SAIDIAN, AVA

Provider ID: 284831
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female

License number: A172741
NPI: 1205281912
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SAKAMOTO, KYOKO

Provider ID: 64172
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Female
License number: A80808
NPI: 1740223619
Provider English Spoken: Yes
Provider Language(s) Spoken:
Japanese
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA:

SALEM, CAROL E

Provider ID: 257161
Board Certified Specialty: Yes
HEALTH EXCEL IPA INC
4060 4TH AVE STE 310
SAN DIEGO, CA 92103-2120
Phone: (619) 297-4707
Fax: (858) 429-7927
After Hours Phone: (619)
297-4707
Provider Gender: Female
License number: G75788
NPI: 1336152982
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital Chula Vista, Scripps
Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

SALEM, CAROL E

Provider ID: 56016
Board Certified Specialty: No
GENESIS HEALTHCARE
PARTNERS PC
4060 4TH AVE STE 310
SAN DIEGO, CA 92103-2120

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D. Directorio de proveedores de atención especializada

Phone: (619) 297-4707

Fax: (619) 297-2448

After Hours Phone: (619) 297-4707

Provider Gender: Female

License number: G75788

NPI: 1336152982

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital Chula Vista, Scripps

Mercy Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Health Excel Ipa Inc

SALEM, CAROL E , MD

Provider ID: 56016

Board Certified Specialty: Yes

GENESIS HEALTHCARE

PARTNERS PC

4060 4TH AVE STE 310

SAN DIEGO, CA 92103-2120

Phone: (619) 297-4707

Fax: (858) 429-7927

After Hours Phone: (619) 297-4707

Provider Gender: Female

License number: G75788

NPI: 1336152982

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital Chula Vista, Scripps

Mercy Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc

SALMASI, AMIRALI

Provider ID: 203122

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A135118

NPI: 1609187962

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton, Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Ucsd Medical Group

SANTIAGO-LASTRA, YAHIR A

Provider ID: 110337

Board Certified Specialty: No

UCSD MEDICAL GROUP

4520 EXECUTIVE DR STE 111

SAN DIEGO, CA 92121-3019

Phone: (858) 657-7876

Fax:

After Hours Phone: (858)

657-7876

Provider Gender: Female

License number: A143504

NPI: 1699936609

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

SANTOMAURO, MICHAEL G

Provider ID: 275675

Board Certified Specialty: No

HEALTH EXCEL IPA INC

3444 KEARNY VILLA RD STE

202

SAN DIEGO, CA 92123-1960

Phone: (858) 429-7646

Fax: (858) 429-7929

After Hours Phone: (858)

429-7646

Provider Gender: Male

License number: A96534

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1073675591	No	Provider ID: 283158
Provider English Spoken: Yes	♿ Accessibility:	Board Certified Specialty: No
Provider Language(s) Spoken: Portuguese	Hours: M-SA 9AM-5PM	COMMUNITY CARE IPA LLC
Cultural Competency: No	Website:	3444 KEARNY VILLA RD STE 202
Hospital Affiliation: Sharp Memorial Hospital, Enloe Medical Center Esplanade, Sharp Chula Vista Med Ctr, Grossmont Hospital	Email:	SAN DIEGO, CA 92123-1960
Medi-Cal Open Panel: Yes	Medical Group(s):	Phone: (858) 429-7646
Min/Max Age: 0/999	IPA: Health Excel Ipa Inc	Fax: (858) 429-7929
American Sign Language (ASL): No	SEVILLA, CLAUDIA	After Hours Phone: (858) 429-7646
♿ Accessibility:	Provider ID: 282485	Provider Gender: Female
Hours: M-SA 9AM-5PM	Board Certified Specialty: No	License number: A131270
Website:	HEALTH EXCEL IPA INC	NPI: 1689081275
Email:	3444 KEARNY VILLA RD STE 202	Provider English Spoken: Yes
Medical Group(s):	SAN DIEGO, CA 92123-1960	Provider Language(s) Spoken: Spanish
IPA: Health Excel Ipa Inc	Phone: (858) 429-7646	Cultural Competency: No
	Fax: (858) 429-7929	Hospital Affiliation: Sharp Chula Vista Med Ctr, Alvarado Hospital Llc, Grossmont Hospital, Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
SANTOMAURO, MICHAEL G	After Hours Phone: (858) 429-7646	Medi-Cal Open Panel: Yes
Provider ID: 279950	Provider Gender: Female	Min/Max Age: 16/105
Board Certified Specialty: No	License number: A131270	American Sign Language (ASL): No
HEALTH EXCEL IPA INC	NPI: 1689081275	♿ Accessibility:
3444 KEARNY VILLA RD STE 201	Provider English Spoken: Yes	Hours: M-SA 9AM-5PM
SAN DIEGO, CA 92123-1960	Provider Language(s) Spoken: Spanish	Website:
Phone: (858) 430-1101	Cultural Competency: No	Email:
Fax: (858) 221-5049	Hospital Affiliation: Sharp Chula Vista Med Ctr, Alvarado Hospital Llc, Grossmont Hospital, Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital	Medical Group(s):
After Hours Phone: (858) 430-1101	Medi-Cal Open Panel: Yes	IPA: Community Care Ipa Llc, Health Excel Ipa Inc
Provider Gender: Male	Min/Max Age: 0/999	
License number: A96534	American Sign Language (ASL): No	SPARKS, STEPHEN S
NPI: 1073675591	♿ Accessibility:	Provider ID: 119391
Provider English Spoken: Yes	Hours: M-SA 9AM-5PM	Board Certified Specialty: No
Provider Language(s) Spoken: Portuguese	Website:	UCSD MEDICAL GROUP
Cultural Competency: No	Email:	200 W ARBOR DR
Hospital Affiliation: Sharp Memorial Hospital, Enloe Medical Center Esplanade	Medical Group(s):	SAN DIEGO, CA 92103-1911
Medi-Cal Open Panel: Yes	IPA: Community Care Ipa Llc, Health Excel Ipa Inc	Phone: (619) 543-6222
Min/Max Age: 0/999		Fax:
American Sign Language (ASL):	SEVILLA, CLAUDIA	After Hours Phone: (619) 543-6222

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Male
License number: A103568
NPI: 1962609925
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Hollywood Presbyterian Med Ctr, Childrens Hosp Of Los Angeles, Childrens Hospital National Medical Center, Fairfax Hospital, Medstar Georgetown Medical Center Inc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SUR, ROGER L

Provider ID: 64214
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: G80585
NPI: 1932208022
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:
SWORDS, KELLY
Provider ID: 101215
Board Certified Specialty: No
 RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 7920 FROST ST STE 200
 SAN DIEGO, CA 92123-4289
Phone: (858) 966-7484
Fax:
After Hours Phone: (858) 966-7484
Provider Gender: Female
License number: A136481
NPI: 1316101256
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* P, EB, IB, E, R, T, W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SWORDS, KELLY
Provider ID: 206183
Board Certified Specialty: No
 RADY CHILDRENS HEALTH

NETWORK
 7920 FROST ST STE 200
 SAN DIEGO, CA 92123-4289
Phone: (858) 966-7484
Fax: (858) 966-4064
After Hours Phone: (858) 966-7484
Provider Gender: Female
License number: A136481
NPI: 1316101256
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☯ *Accessibility:* P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

ULOKO, MARIA I

Provider ID: 284961
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 16950 VIA TAZON
 SAN DIEGO, CA 92127-1607
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A166093
NPI: 1326426016
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

ULOKO, MARIA I

Provider ID: 284962
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4520 EXECUTIVE DR STE 360
 SAN DIEGO, CA 92121-3020
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A166093
NPI: 1326426016
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

UNTERBERG, STEPHEN H

Provider ID: 275683
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 4060 4TH AVE STE 310
 SAN DIEGO, CA 92103-2120
Phone: (619) 297-4707
Fax: (858) 429-7933
After Hours Phone: (619) 297-4707
Provider Gender: Male
License number: A133758
NPI: 1215374210
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 16/110
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

Provider ID: 284664
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 4060 4TH AVE STE 310
 SAN DIEGO, CA 92103-2120
Phone: (619) 297-4707
Fax: (858) 429-7933
After Hours Phone: (619) 297-4707
Provider Gender: Male
License number: A133758
NPI: 1215374210
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 16/110
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

UNTERBERG, STEPHEN H

Provider ID: 275925
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 11770 BERNARDO PLAZA CT
 STE 270
 SAN DIEGO, CA 92128-2425
Phone: (619) 297-4707
Fax: (858) 429-0554
After Hours Phone: (619) 297-4707
Provider Gender: Male
License number: A133758
NPI: 1215374210
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 16/110
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

UNTERBERG, STEPHEN H

Provider ID: 284664
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 4060 4TH AVE STE 310
 SAN DIEGO, CA 92103-2120
Phone: (619) 297-4707
Fax: (858) 429-7933
After Hours Phone: (619) 297-4707
Provider Gender: Male
License number: A133758
NPI: 1215374210
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 16/110
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

UNTERBERG, STEPHEN H

Provider ID: 284665
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
11770 BERNARDO PLAZA CT
STE 270
SAN DIEGO, CA 92128-2425
Phone: (619) 297-4707
Fax: (858) 429-0554
After Hours Phone: (619)
297-4707
Provider Gender: Male
License number: A133758
NPI: 1215374210
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 16/110
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

VAPNEK, EVAN M

Provider ID: 114201
Board Certified Specialty: No
GENESIS HEALTHCARE
PARTNERS PC
3444 KEARNY VILLA RD STE
202
SAN DIEGO, CA 92123-1960
Phone: (858) 429-7646
Fax:
After Hours Phone: (858)
429-7646
Provider Gender: Male

License number: G75357
NPI: 1811003411
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista, Sharp Coronado
Hosp And Healthcare Ctr, Sharp
Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

VAPNEK, EVAN M

Provider ID: 257162
Board Certified Specialty: No
HEALTH EXCEL IPA INC
3444 KEARNY VILLA RD STE
202
SAN DIEGO, CA 92123-1960
Phone: (858) 429-7646
Fax: (858) 429-7929
After Hours Phone: (858)
429-7646
Provider Gender: Male
License number: G75357
NPI: 1811003411
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista, Sharp Coronado
Hosp And Healthcare Ctr, Sharp
Memorial Hospital
Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

VAPNEK, EVAN M

Provider ID: 261600
Board Certified Specialty: No
HEALTH EXCEL IPA INC
3444 KEARNY VILLA RD STE
201
SAN DIEGO, CA 92123-1960
Phone: (858) 430-1101
Fax: (858) 221-5049
After Hours Phone: (858)
430-1101
Provider Gender: Male
License number: G75357
NPI: 1811003411
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista, Sharp Coronado
Hosp And Healthcare Ctr, Sharp
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

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D. Directorio de proveedores de atención especializada

VAPNEK, EVAN M , MD

Provider ID: 270006
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
3444 KEARNY VILLA RD STE 201
SAN DIEGO, CA 92123-1960
Phone: (858) 430-1101
Fax: (858) 221-5049
After Hours Phone: (858) 430-1101
Provider Gender: Male
License number: G75357
NPI: 1811003411
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Sharp Coronado Hosp And Healthcare Ctr, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

VAPNEK, EVAN M , MD

Provider ID: 65497
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4033 3RD AVE STE 400
SAN DIEGO, CA 92103-2140
Phone: (619) 299-0670
Fax: (858) 429-7929
After Hours Phone: (619) 299-0670

Provider Gender: Male
License number: G75357
NPI: 1811003411
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Sharp Coronado Hosp And Healthcare Ctr, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

WITTHAUS, MICHAEL W

Provider ID: 285494
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A174216
NPI: 1871987180
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):

No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

WOO, JASON R

Provider ID: 98954
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-3572
Fax: (619) 543-3475
After Hours Phone: (619) 543-3572
Provider Gender: Male
License number: A114634
NPI: 1437380086
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

YUH, BENJAMIN J

Provider ID: 279931
Board Certified Specialty: No
HEALTH EXCEL IPA INC
3444 KEARNY VILLA RD STE 201
SAN DIEGO, CA 92123-1960

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D. Directorio de proveedores de atención especializada

Phone: (858) 430-1101
Fax: (858) 221-5049
After Hours Phone: (858)
430-1101

Provider Gender: Male
License number: A125637
NPI: 1487092417
Provider English Spoken: Yes
Provider Language(s) Spoken:
Mandarin, Spanish

Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Methodist
Hosp Of Southern California, City
Of Hope National Med Ctr,
Huntington Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

YUH, BENJAMIN J

Provider ID: 279932
Board Certified Specialty: No
HEALTH EXCEL IPA INC
11770 BERNARDO PLAZA CT
STE 270
SAN DIEGO, CA 92128-2425
Phone: (858) 485-0554
Fax: (858) 429-7933
After Hours Phone: (858)
485-0554

Provider Gender: Male
License number: A125637
NPI: 1487092417
Provider English Spoken: Yes
Provider Language(s) Spoken:
Mandarin, Spanish

Cultural Competency: No
Hospital Affiliation: Huntington
Memorial Hospital, Methodist
Hosp Of Southern California, City
Of Hope National Med Ctr,
Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

SAN MARCOS

CARDIOLOGY

MOHAMEDALI, BURHAN, MD

Provider ID: 245578
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
955 BOARDWALK STE 100
SAN MARCOS, CA 92078-2659
Phone: (760) 798-8855
Fax: (619) 616-2104
After Hours Phone: (760)
798-8855

Provider Gender: Male
License number: A125669
NPI: 1831393289
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Swahili
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

MOUSSAVIAN, MEHRAN, MD

Provider ID: 242265
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
955 BOARDWALK STE 100
SAN MARCOS, CA 92078-2659
Phone: (760) 798-8855
Fax: (760) 755-5245
After Hours Phone: (760)
798-8855

Provider Gender: Male
License number: 20A7241
NPI: 1689788234
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr, Tri City Medical
Ctr, Sharp Memorial Hospital,
Alvarado Hospital Llc, Grossmont
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 16/120
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

NARAYANAN, MEENA R , MD

Provider ID: 247696
Board Certified Specialty: No

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D. Directorio de proveedores de atención especializada

COMMUNITY CARE IPA LLC
 955 BOARDWALK STE 100
 SAN MARCOS, CA 92078-2659
 Phone: (760) 798-8855
 Fax: (619) 616-2104
 After Hours Phone: (760)
 798-8855
 Provider Gender: Female
 License number: A113448
 NPI: 1508170697
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Farsi, Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp Chula
 Vista Med Ctr, Sharp Memorial
 Hospital
 Medi-Cal Open Panel: No
 Min/Max Age: 18/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc

CARDIOVASCULAR DISEASE

CARLSON, STEVEN K
 Provider ID: 238129
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 955 BOARDWALK STE 100
 SAN MARCOS, CA 92078-2659
 Phone: (760) 798-8855
 Fax: (760) 755-5245
 After Hours Phone: (760)
 798-8855
 Provider Gender: Male
 License number: A109957
 NPI: 1467602946
 Provider English Spoken: Yes

Provider Language(s) Spoken: No
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Garfield
 Medical Center, Santa Monica
 Ucla Med Ctr, Ronald Reagan
 Ucla Med Ctr, Scripps Mercy
 Hospital, Sharp Chula Vista Med
 Ctr, Sharp Memorial Hospital,
 Alvarado Hospital Llc, Grossmont
 Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/99
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc

MOHAMEDALI, BURHAN
 Provider ID: 238122
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 955 BOARDWALK STE 100
 SAN MARCOS, CA 92078-2659
 Phone: (760) 798-8855
 Fax: (619) 616-2104
 After Hours Phone: (760)
 798-8855
 Provider Gender: Male
 License number: A125669
 NPI: 1831393289
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish, Swahili
 Cultural Competency: No
 Hospital Affiliation: Sharp Chula
 Vista Med Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL):

No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc
MOUSSAVIAN, MEHRAN
 Provider ID: 238397
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 955 BOARDWALK STE 100
 SAN MARCOS, CA 92078-2659
 Phone: (760) 798-8855
 Fax: (760) 755-5245
 After Hours Phone: (760)
 798-8855
 Provider Gender: Male
 License number: 20A7241
 NPI: 1689788234
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Farsi, Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp Chula
 Vista Med Ctr, Tri City Medical
 Ctr, Sharp Memorial Hospital,
 Alvarado Hospital Llc, Grossmont
 Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 16/120
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc
NARAYANAN, MEENA R
 Provider ID: 238134

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D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
HEALTH EXCEL IPA INC
955 BOARDWALK STE 100
SAN MARCOS, CA 92078-2659
Phone: (760) 798-8855
Fax: (619) 616-2104
After Hours Phone: (760)
798-8855
Provider Gender: Female
License number: A113448
NPI: 1508170697
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Sharp Chula
Vista Med Ctr

Medi-Cal Open Panel: Yes
Min/Max Age: 18/99
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

SHETABI, KAMBIZ

Provider ID: 278854
Board Certified Specialty: No
HEALTH EXCEL IPA INC
955 BOARDWALK STE 100
SAN MARCOS, CA 92078-2659
Phone: (760) 798-8855
Fax: (760) 755-5245
After Hours Phone: (760)
798-8855
Provider Gender: Male
License number: A126187
NPI: 1972827806
Provider English Spoken: Yes
Provider Language(s) Spoken:

Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/99
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

CERTIFIED BEHAVIORAL ANALYST MASTERS

BARMAKIAN, HEATHER

Provider ID: 116921
Board Certified Specialty: No
CENTER FOR AUTISM AND
RELATED DISORDER
334 VIA VERA CRUZ STE 107
SAN MARCOS, CA 92078-2637
Phone: (760) 304-5010
Fax: (818) 449-0994
After Hours Phone: (760)
304-5010
Provider Gender: Female
License number: BCBA3668
NPI: 1891950861
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA:

LOCKE, BREANNA

Provider ID: 123282
Board Certified Specialty: No
CENTER FOR AUTISM AND
RELATED DISORDER
334 VIA VERA CRUZ STE 107
SAN MARCOS, CA 92078-2637
Phone: (760) 304-5010
Fax: (760) 539-9849
After Hours Phone: (760)
304-5010
Provider Gender: Female
License number: BCBA17469
NPI: 1861887416
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CERTIFIED NURSE PRACTITIONER

ANDREW, SHIRLEY A

Provider ID: 284888
Board Certified Specialty: No
HEALTH EXCEL IPA INC
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069-3599
Phone: (760) 748-8935
Fax: (760) 466-0078
After Hours Phone: (760)
748-8935

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Female
License number: NP95017459
NPI: 1528731403
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 17/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

BUCKLEY, PATRICIA J
Provider ID: 279059
Board Certified Specialty: No
HEALTH EXCEL IPA INC
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069-3599
Phone: (760) 747-8935
Fax: (760) 466-0078
After Hours Phone: (760)
747-8935
Provider Gender: Female
License number: NP95015705
NPI: 1700470200
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 17/120
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,

Health Excel Ipa Inc
BUCKLEY, PATRICIA J
Provider ID: 280382
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069-3599
Phone: (760) 747-8935
Fax: (760) 466-0078
After Hours Phone: (760)
747-8935
Provider Gender: Female
License number: NP95015705
NPI: 1700470200
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

CHUNG, JAYME F
Provider ID: 280138
Board Certified Specialty: No
HEALTH EXCEL IPA INC
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069-3599
Phone: (760) 747-8935
Fax: (858) 609-7190
After Hours Phone: (760)
747-8935
Provider Gender: Female
License number: NP95016703
NPI: 1861794943
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 17/120
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

COYLE, JENNIFER M
Provider ID: 122758
Board Certified Specialty: No
CALIFORNIA CANCER
ASSOCS FOR RESEARCH AND
EXCELL
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069-3599
Phone: (760) 747-8935
Fax:
After Hours Phone: (760)
747-8935
Provider Gender: Female
License number: NP95006591
NPI: 1538689310
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

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D. Directorio de proveedores de atención especializada

COYLE, JENNIFER M , NPA

Provider ID: 253094
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069-3599
Phone: (760) 748-8935
Fax: (760) 466-0078
After Hours Phone: (760) 748-8935
Provider Gender: Female
License number: NP95006591
NPI: 1538689310
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

COYLE, JENNIFER M
Provider ID: 279275
Board Certified Specialty: No
HEALTH EXCEL IPA INC
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069-3599
Phone: (760) 748-8935
Fax: (760) 466-0078
After Hours Phone: (760) 748-8935
Provider Gender: Female
License number: NP95006591
NPI: 1538689310
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 16/120
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

FAIQ, JAMILA, NPA

Provider ID: 254825
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069-3599
Phone: (760) 474-8935
Fax:
After Hours Phone: (760) 474-8935
Provider Gender: Female
License number: NP95004759
NPI: 1518414366
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 16/120
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

FAIQ, JAMILA

Provider ID: 262384
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069-3599
Phone: (760) 474-8935
Fax:
After Hours Phone: (760) 474-8935
Provider Gender: Female
License number: NP95004759
NPI: 1518414366
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

FRANZ, CORTNEY D , NPA

Provider ID: 257616
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069-3599
Phone: (760) 474-8935
Fax: (760) 466-0078
After Hours Phone: (760) 474-8935
Provider Gender: Female
License number: NP95004258
NPI: 1174077507

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc,
 Imperial Health Holdings Medical
 Group-Sd

FRANZ, CORTNEY D

Provider ID: 262399
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 838 NORDAHL RD STE 300
 SAN MARCOS, CA 92069-3599
Phone: (760) 474-8935
Fax: (760) 466-0078
After Hours Phone: (760)
 474-8935
Provider Gender: Female
License number: NP95004258
NPI: 1174077507
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc,
 Imperial Health Holdings Medical
 Group-Sd

MOGA, CLAIRE S , NPA

Provider ID: 257025
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 838 NORDAHL RD FL 3
 SAN MARCOS, CA 92069-3595
Phone: (760) 747-8935
Fax:
After Hours Phone: (760)
 747-8935
Provider Gender: Female
License number: NP95007255
NPI: 1144748211
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 16/120
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Imperial Health Holdings
 Medical Group-Sd

MOGA, CLAIRE S

Provider ID: 262368
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 838 NORDAHL RD STE 300
 SAN MARCOS, CA 92069-3599

Phone: (760) 747-8935
Fax:
After Hours Phone: (760)
 747-8935
Provider Gender: Female
License number: NP95007255
NPI: 1144748211
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Imperial Health Holdings
 Medical Group-Sd

MWAURA, WAIRIMU R , NPA

Provider ID: 269681
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 838 NORDAHL RD STE 300
 SAN MARCOS, CA 92069-3599
Phone: (760) 747-8935
Fax:
After Hours Phone: (760)
 747-8935
Provider Gender: Female
License number: NP95009639
NPI: 1598320996
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City
 Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

MWAURA, WAIRIMU R

Provider ID: 280177
Board Certified Specialty: No
HEALTH EXCEL IPA INC
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069-3599
Phone: (760) 747-8935

Fax:
After Hours Phone: (760)
747-8935
Provider Gender: Female
License number: NP95009639
NPI: 1598320996
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

PALEN, BARBARA A

Provider ID: 257459
Board Certified Specialty: No
BLUE SHIELD PROMISE
HEALTH PLAN DIRECT
150 VALPREDA RD
SAN MARCOS, CA 92069-2973

Phone: (760) 736-6767
Fax:
After Hours Phone: (760)
736-6767
Provider Gender: Female
License number: NP3108
NPI: 1265447601
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health
Plan Direct

RORABAUGH, EMILY N

Provider ID: 263140
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
1582 W SAN MARCOS BLVD
STE 203
SAN MARCOS, CA 92078-4081
Phone: (760) 744-6710
Fax: (760) 744-6156
After Hours Phone: (760)
744-6710
Provider Gender: Female
License number: NP95004705
NPI: 1619424959
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):

No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

WILLEY, MARTI L

Provider ID: 280143
Board Certified Specialty: No
HEALTH EXCEL IPA INC
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069-3599
Phone: (760) 747-8935
Fax: (760) 466-0078
After Hours Phone: (760)
747-8935
Provider Gender: Female
License number: NP22548
NPI: 1144574062
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 17/120
American Sign Language (ASL):
No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

CHIROPRACTOR

MAUSER, JILL ELLEN A

Provider ID: 270661
Board Certified Specialty: No
COMMUNITY CARE IPA LLC

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

1146 SAN MARINO DR
SAN MARCOS, CA 92078-4649
Phone: (760) 471-2033
Fax: (760) 471-2083
After Hours Phone: (760)
471-2033
Provider Gender: Female
License number: DC17617
NPI: 1033274311
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

DERMATOLOGY

KIM, JESSICA Y
Provider ID: 247631
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
838 NORDAHL RD STE 250
SAN MARCOS, CA 92069-3596
Phone: (760) 738-7600
Fax:
After Hours Phone: (760)
738-7600
Provider Gender: Female
License number: 20A17031
NPI: 1245663228
Provider English Spoken: Yes
Provider Language(s) Spoken:
Korean
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

VENKAT, ARUN P , MD
Provider ID: 269347
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
838 NORDAHL RD STE 250
SAN MARCOS, CA 92069-3596
Phone: (760) 738-7600
Fax: (760) 738-7616
After Hours Phone: (760)
738-7600
Provider Gender: Male
License number: A125103
NPI: 1952436354
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

VENKAT, ARUN P
Provider ID: 72869
Board Certified Specialty: No
DERMATOLOGY SPECIALISTS
INC
838 NORDAHL RD STE 250
SAN MARCOS, CA 92069-3596

Phone: (760) 738-7600
Fax:
After Hours Phone: (760)
738-7600
Provider Gender: Male
License number: A125103
NPI: 1952436354
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

FAMILY PRACTICE

NATH, DEVARSHI
Provider ID: 51773
Board Certified Specialty: No
IHP N COUNTY HEALTH SAN
MARCOS HEALTH CT
150 VALPRED A RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767
Fax:
After Hours Phone: (760)
736-6767
Provider Gender: Male
License number: C54157
NPI: 1275630618
Provider English Spoken: Yes
Provider Language(s) Spoken:
Bengali
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T, W
Hours: M-SA 8AM-5PM
Website: www.ihpsocal.org
Email:
Medical Group(s): North County Health Services San Marcos
IPA:

NATH, DEVARSHI

Provider ID: 51773
Board Certified Specialty: No
NORTH COUNTY HEALTH SERVICES SAN MARCOS
150 VALPRED A RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767
Fax:
After Hours Phone: (760) 736-6767
Provider Gender: Male
License number: C54157
NPI: 1275630618
Provider English Spoken: Yes
Provider Language(s) Spoken: Bengali
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None

American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T, W
Hours: M-SA 8AM-5PM
Website: www.ihpsocal.org
Email:
Medical Group(s): North County Health Services San Marcos
IPA:

WALKER, SHAYNA T

Provider ID: 75271

Board Certified Specialty: No
NORTH COUNTY HEALTH SERVICES SAN MARCOS
150 VALPRED A RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767
Fax:
After Hours Phone: (760) 736-6767
Provider Gender: Female
License number: A107393
NPI: 1760688295
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T, W
Hours: M-SA 8AM-5PM
Website: www.ihpsocal.org
Email:
Medical Group(s): North County Health Services San Marcos
IPA:

HEMATOLOGY / ONCOLOGY

BESSUDO, ALBERTO

Provider ID: 125411
Board Certified Specialty: No
CALIFORNIA CANCER ASSOCS FOR RESEARCH AND EXCELL
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069-3599
Phone: (760) 452-3340
Fax:
After Hours Phone: (760) 452-3340
Provider Gender: Male

License number: A50309
NPI: 1003888074
Provider English Spoken: Yes
Provider Language(s) Spoken: Hebrew, Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s): Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

BESSUDO, ALBERTO, MD

Provider ID: 256963
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069-3599
Phone: (760) 747-8935
Fax: (760) 466-0078
After Hours Phone: (760) 747-8935
Provider Gender: Male
License number: A50309
NPI: 1003888074
Provider English Spoken: Yes
Provider Language(s) Spoken: Hebrew, Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

EISENBERG, STEVEN G

Provider ID: 242456

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069-3599

Phone: (760) 747-8935

Fax: (760) 747-7951

After Hours Phone: (760)
747-8935

Provider Gender: Male

License number: 20A8293

NPI: 1831162627

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

Hospital Affiliation: Palomar

Health Downtown Campus

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

KOSMO, MICHAEL A , MD

Provider ID: 241034

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069-3599

Phone: (760) 747-8935

Fax: (760) 747-7951

After Hours Phone: (760)
747-8935

Provider Gender: Male

License number: G54074

NPI: 1891742847

Provider English Spoken: Yes

Provider Language(s) Spoken:
French, German, Spanish,
Tagalog

Cultural Competency: No

Hospital Affiliation: Pomerado
Hospital, Palomar Medical
Center

Medi-Cal Open Panel: Yes

Min/Max Age: 18/120

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

LAMON, JOEL M , MD

Provider ID: 241037

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069-3599

Phone: (760) 747-8935

Fax: (858) 609-7190

After Hours Phone: (760)
747-8935

Provider Gender: Male

License number: G28164

NPI: 1699721035

Provider English Spoken: Yes

Provider Language(s) Spoken:
French, German, Spanish,
Tagalog

Cultural Competency: No

Hospital Affiliation: Palomar
Health Downtown Campus

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

SULLIVAN, JESSICA E , MD

Provider ID: 269662

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069-3599

Phone: (760) 747-8935

Fax: (760) 747-7951

After Hours Phone: (760)

747-8935

Provider Gender: Female

License number: 20A16273

NPI: 1942407150

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Scripps Memorial Hospital Encinitas, Temecula Valley Hospital Inc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Health Excel Ipa Inc

HOSPICE AND PALLIATIVE MEDICINE

PASHA, SABIHA

Provider ID: 276669

Board Certified Specialty: No
 COMMUNITY CARE IPA LLC

838 NORDAHL RD STE 300
 SAN MARCOS, CA 92069-3599

Phone: (760) 747-8935

Fax: (760) 466-0078

After Hours Phone: (760) 747-8935

Provider Gender: Female

License number: C50413

NPI: 1871529461

Provider English Spoken: Yes

Provider Language(s) Spoken:

German, Spanish, Urdu

Cultural Competency: No

Hospital Affiliation: Palomar Medical Center, Mercy Medical Center Redding, Palomar Health Downtown Campus, Pomerado Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

INTERNAL MEDICINE

JEFFERIS, LAUREN R

Provider ID: 34915

Board Certified Specialty: No

NORTH COUNTY HEALTH SERVICES SAN MARCOS

150 VALPREDA RD

SAN MARCOS, CA 92069-2973

Phone: (760) 736-6767

Fax:

After Hours Phone: (760)

736-6767

Provider Gender: Female

License number: A80674

NPI: 1346354776

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* P, EB, IB, E, R, T, W

Hours: M-SA 8AM-5PM

Website: www.ihpsocal.org

Email:

Medical Group(s): North County

Health Services San Marcos

IPA:

MCCLAY, EDWARD F , MD

Provider ID: 243932

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

838 NORDAHL RD STE 300

SAN MARCOS, CA 92069-3599

Phone: (760) 747-8935

Fax: (760) 747-7951

After Hours Phone: (760) 747-8935

Provider Gender: Male

License number: G64594

NPI: 1497727465

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Tri City

Medical Ctr, Scripps Memorial

Hospital Encinitas, Palomar

Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Health Excel Ipa Inc, Imperial

Health Holdings Medical

Group-Sd

PARIKH, MILIND D

Provider ID: 238196

Board Certified Specialty: No

HEALTH EXCEL IPA INC

955 BOARDWALK STE 100

SAN MARCOS, CA 92078-2659

Phone: (619) 616-2100

Fax: (619) 616-2104

After Hours Phone: (619)

616-2100

Provider Gender: Male

License number: 20A13745

NPI: 1194161406

Provider English Spoken: Yes

Provider Language(s) Spoken:

Gujarati, Hindi, Spanish

Cultural Competency: No

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/99
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

WITCZAK, IZABELA

Provider ID: 24822
Board Certified Specialty: No
 NORTH COUNTY HEALTH SERVICES SAN MARCOS
 150 VALPREDA RD
 SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767
Fax:
After Hours Phone: (760) 736-6767
Provider Gender: Female
License number: A71311
NPI: 1184735201
Provider English Spoken: Yes
Provider Language(s) Spoken: Polish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T, W
Hours: M-SA 8AM-5PM
Website: www.ihpsocal.org
Email:
Medical Group(s): North County Health Services San Marcos

IPA:

INTERVENTIONAL CARDIOLOGY

CARLSON, STEVEN K , MD

Provider ID: 244811
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 955 BOARDWALK STE 100
 SAN MARCOS, CA 92078-2659
Phone: (760) 798-8855
Fax: (760) 755-5245
After Hours Phone: (760) 798-8855
Provider Gender: Male
License number: A109957
NPI: 1467602946
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Garfield Medical Center, Santa Monica Ucla Med Ctr, Ronald Reagan Ucla Med Ctr, Scripps Mercy Hospital, Sharp Chula Vista Med Ctr, Sharp Memorial Hospital, Alvarado Hospital Llc, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

MOUSSAVIAN, MEHRAN

Provider ID: 121818
Board Certified Specialty: No

CARDIOVASCULAR INSTITUTE OF SAN DIEGO
 955 BOARDWALK STE 100
 SAN MARCOS, CA 92078-2659
Phone: (760) 798-8855
Fax:
After Hours Phone: (760) 798-8855
Provider Gender: Male
License number: 20A7241
NPI: 1689788234
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Tri City Medical Ctr, Sharp Memorial Hospital, Alvarado Hospital Llc, Grossmont Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc

MEDICAL ONCOLOGY

KOSMO, MICHAEL A

Provider ID: 53701
Board Certified Specialty: No
 CA CANCER ASSOC FOR RES & EXCEL-ESCONDID
 838 NORDAHL RD STE 300
 SAN MARCOS, CA 92069-3599
Phone: (760) 747-8935
Fax: (760) 747-7951
After Hours Phone: (760) 747-8935

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D. Directorio de proveedores de atención especializada

Provider Gender: Male
License number: G54074
NPI: 1891742847
Provider English Spoken: Yes
Provider Language(s) Spoken: French, German, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Palomar Medical Center, Palomar Health Downtown Campus, Pomerado Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

NEPHROLOGY

AFSHAR, MASOUD

Provider ID: 284628
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 334 VIA VERA CRUZ STE 251
 SAN MARCOS, CA 92078-2642
Phone: (760) 736-8091
Fax: (760) 736-8092
After Hours Phone: (760) 736-8091
Provider Gender: Male
License number: A105324
NPI: 1225287378
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Turkish
Cultural Competency: No

Hospital Affiliation: El Centro Regional Medical Center, Pioneers Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

NEUROLOGY

KAYAL, ANAS

Provider ID: 283752
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 334 VIA VERA CRUZ STE 251
 SAN MARCOS, CA 92078-2642
Phone: (760) 736-8091
Fax: (760) 736-8092
After Hours Phone: (760) 736-8091
Provider Gender: Male
License number: A112450
NPI: 1851376917
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Palomar Medical Center, Temecula Valley Hospital Inc, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

OBSTETRICS / GYNECOLOGY

MAZAREI, RAHELE

Provider ID: 67755
Board Certified Specialty: No
 NORTH COUNTY HEALTH SERVICES SAN MARCOS
 150 VALPREDA RD
 SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767
Fax: (760) 758-7057
After Hours Phone: (760) 736-6767
Provider Gender: Female
License number: 20A7358
NPI: 1639170459
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T, W
Hours: M-SA 8AM-5PM
Website: www.ihpsocal.org
Email:
Medical Group(s): North County Health Services San Marcos
IPA: Health Excel Ipa Inc

MAZAREI, RAHELE

Provider ID: 67755
Board Certified Specialty: No

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D. Directorio de proveedores de atención especializada

IHP N COUNTY HEALTH SAN
MARCOS HEALTH CT
150 VALPRED A RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767
Fax: (760) 758-7057
After Hours Phone: (760)
736-6767
Provider Gender: Female
License number: 20A7358
NPI: 1639170459
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr, Sharp Memorial
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
T, W
Hours: M-SA 8AM-5PM
Website: www.ihpsocal.org
Email:
Medical Group(s): North County
Health Services San Marcos
IPA: Health Excel Ipa Inc

POUNTNEY, MARLENE E
Provider ID: 257452
Board Certified Specialty: No
BLUE SHIELD PROMISE
HEALTH PLAN DIRECT
150 VALPRED A RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760)
736-6767
Provider Gender: Female
License number: A93248
NPI: 1174703680

Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health
Plan Direct

POUNTNEY, MARLENE E
Provider ID: 78200
Board Certified Specialty: No
NORTH COUNTY HEALTH
SERVICES SAN MARCOS
150 VALPRED A RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6700
Fax:
After Hours Phone: (760)
736-6700
Provider Gender: Female
License number: A93248
NPI: 1174703680
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
T, W
Hours: M-SA 8AM-5PM

Website: www.ihpsocal.org
Email:
Medical Group(s): North County
Health Services San Marcos
IPA: Blue Shield Promise Health
Plan Direct

SCHWEIKERT, SUZANNE M
Provider ID: 77220
Board Certified Specialty: No
NORTH COUNTY HEALTH
SERVICES SAN MARCOS
150 VALPRED A RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6700
Fax:
After Hours Phone: (760)
736-6700
Provider Gender: Female
License number: A60958
NPI: 1477560142
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Tri City
Medical Ctr, Sharp Mary Birch
Hosp For Women And Newborns
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
T, W
Hours: M-SA 8AM-5PM
Website: www.ihpsocal.org
Email:
Medical Group(s): North County
Health Services San Marcos
IPA:
SCHWEIKERT, SUZANNE M
Provider ID: 77220
Board Certified Specialty: No

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D. Directorio de proveedores de atención especializada

IHP N COUNTY HEALTH SAN
MARCOS HEALTH CT
150 VALPREDADA RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6700
Fax:
After Hours Phone: (760)
736-6700
Provider Gender: Female
License number: A60958
NPI: 1477560142
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Tri City
Medical Ctr, Sharp Mary Birch
Hosp For Women And Newborns
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
T, W
Hours: M-SA 8AM-5PM
Website: www.ihpsocal.org
Email:
Medical Group(s): North County
Health Services San Marcos
IPA:

ONCOLOGY MEDICAL

EISENBERG, STEVEN G
Provider ID: 257271
Board Certified Specialty: No
HEALTH EXCEL IPA INC
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069-3599
Phone: (760) 747-8935
Fax: (760) 747-7951
After Hours Phone: (760)
747-8935
Provider Gender: Male

License number: 20A8293
NPI: 1831162627
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Palomar
Health Downtown Campus
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd
EISENBERG, STEVEN G
Provider ID: 54040
Board Certified Specialty: No
CA CANCER ASSOC FOR RES
& EXCEL-ESCONDID
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069-3599
Phone: (760) 747-8935
Fax: (760) 747-7951
After Hours Phone: (760)
747-8935
Provider Gender: Male
License number: 20A8293
NPI: 1831162627
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Palomar
Health Downtown Campus
Medi-Cal Open Panel: Yes
Min/Max Age: 16/120
American Sign Language (ASL):

No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd
FRAKES, LAURIE A , MD
Provider ID: 269134
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069-3599
Phone: (760) 747-8935
Fax: (760) 466-0078
After Hours Phone: (760)
747-8935
Provider Gender: Female
License number: A52663
NPI: 1174595144
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr, Scripps Memorial
Hospital, Scripps Memorial
Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

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D. Directorio de proveedores de atención especializada

FRAKES, LAURIE A

Provider ID: 273453
Board Certified Specialty: No
HEALTH EXCEL IPA INC
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069-3599
Phone: (760) 747-8935
Fax: (760) 466-0078
After Hours Phone: (760) 747-8935
Provider Gender: Female
License number: A52663
NPI: 1174595144
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

KOSMO, MICHAEL A

Provider ID: 70373
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069-3599

Phone: (760) 747-8935
Fax: (760) 747-7951
After Hours Phone: (760) 747-8935
Provider Gender: Male
License number: G54074
NPI: 1891742847
Provider English Spoken: Yes
Provider Language(s) Spoken: French, German, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Palomar Medical Center, Palomar Health Downtown Campus, Pomerado Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 16/120
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

MCCLAY, EDWARD F

Provider ID: 276709
Board Certified Specialty: No
HEALTH EXCEL IPA INC
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069-3599
Phone: (760) 747-8935
Fax: (760) 747-7951
After Hours Phone: (760) 747-8935
Provider Gender: Male
License number: G64594
NPI: 1497727465
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital Encinitas, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

MCCLAY, EDWARD F

Provider ID: 54085
Board Certified Specialty: No
CA CANCER ASSOC FOR RES & EXCEL-ESCONDID
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069-3599
Phone: (760) 747-8935
Fax: (760) 747-7951
After Hours Phone: (760) 747-8935
Provider Gender: Male
License number: G64594
NPI: 1497727465
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital Encinitas, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 16/120
American Sign Language (ASL): No
Accessibility:

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D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

SINCLAIR, JAMES M , MD

Provider ID: 257003

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

838 NORDAHL RD STE 300
SAN MARCOS, CA 92069-3599

Phone: (760) 474-8935

Fax:

After Hours Phone: (760)
474-8935

Provider Gender: Male

License number: G48926

NPI: 1356300230

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps
Memorial Hospital, Scripps
Memorial Hospital Encinitas

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc, Imperial
Health Holdings Medical
Group-Sd

OPHTHALMOLOGY

GARFF, KEVIN

Provider ID: 272611

Board Certified Specialty: No

HEALTH EXCEL IPA INC
100 N RANCHO SANTA FE RD
STE 126

SAN MARCOS, CA 92069-1294

Phone: (760) 598-0400

Fax: (760) 598-7044

After Hours Phone: (760)

598-0400

Provider Gender: Male

License number: A160988

NPI: 1609258920

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc, Ucsd
Medical Group

PRESTERA, TORY, MD

Provider ID: 204707

Board Certified Specialty: No

COMMUNITY CARE IPA LLC
100 N RANCHO SANTA FE RD
STE 126

SAN MARCOS, CA 92069-1294

Phone: (760) 598-0400

Fax: (760) 290-7044

After Hours Phone: (760)

598-0400

Provider Gender: Male

License number: A62321

NPI: 1346224557

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Thai

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Health Excel Ipa Inc

PRESTERA, TORY

Provider ID: 272528

Board Certified Specialty: No

HEALTH EXCEL IPA INC

100 N RANCHO SANTA FE RD
STE 126

SAN MARCOS, CA 92069-1294

Phone: (760) 598-0400

Fax: (760) 290-7044

After Hours Phone: (760)

598-0400

Provider Gender: Male

License number: A62321

NPI: 1346224557

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Thai

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc

Provider ID: 269280
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 838 NORDAHL RD STE 250
 SAN MARCOS, CA 92069-3596
 Phone: (760) 738-7600
 Fax: (760) 738-7616
 After Hours Phone: (760)
 738-7600

Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Health Excel Ipa Inc

PEDIATRICS

POSADAS, EMERITO D

Provider ID: 257536
 Board Certified Specialty: No
 BLUE SHIELD PROMISE
 HEALTH PLAN DIRECT
 150 VALPREDIA RD
 SAN MARCOS, CA 92069-2973
 Phone: (760) 736-6767
 Fax: (760) 736-8740
 After Hours Phone: (760)
 736-6767
 Provider Gender: Male
 License number: A48980
 NPI: 1720093198
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish, Tagalog
 Cultural Competency: No
 Hospital Affiliation: Palomar
 Health Downtown Campus, Tri
 City Medical Ctr, Palomar
 Medical Center

Provider Gender: Female
 License number: PA19459
 NPI: 1013198720
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

DESROSIERS, GARRETT R

Provider ID: 270990
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 137 S LAS POSAS RD STE 254
 SAN MARCOS, CA 92078-2475
 Phone: (760) 290-3121
 Fax: (760) 290-3126
 After Hours Phone: (760)
 290-3121
 Provider Gender: Male
 License number: PT291404
 NPI: 1679921084
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish

REGISTERED PHYSICAL THERAPIST

Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 ♿ Accessibility: P, EB, IB, E, R, T
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Blue Shield Promise Health
 Plan Direct

DE FARIA, GABRIEL J
 Provider ID: 271016
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 137 S LAS POSAS RD STE 254
 SAN MARCOS, CA 92078-2475
 Phone: (760) 290-3121
 Fax: (760) 290-3126
 After Hours Phone: (760)
 290-3121
 Provider Gender: Male
 License number: PT292374
 NPI: 1134669120
 Provider English Spoken: Yes
 Provider Language(s) Spoken:

Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Health Excel Ipa Inc

PHYSICIANS ASSISTANT

SERING, MALIA A , NPA

DESROSIERS, KAYLEIGH A

Provider ID: 271012
 Board Certified Specialty: No

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D. Directorio de proveedores de atención especializada

HEALTH EXCEL IPA INC
137 S LAS POSAS RD STE 254
SAN MARCOS, CA 92078-2475
Phone: (760) 290-3121
Fax: (760) 290-3126
After Hours Phone: (760)
290-3121
Provider Gender: Female
License number: PT291392
NPI: 1689039349
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

DUENAS, STEVEN

Provider ID: 270982
Board Certified Specialty: No
HEALTH EXCEL IPA INC
137 S LAS POSAS RD STE 254
SAN MARCOS, CA 92078-2475
Phone: (760) 290-3121
Fax: (760) 290-3126
After Hours Phone: (760)
290-3121
Provider Gender: Male
License number: PT294820
NPI: 1457841165
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):

No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

DUONG, ANDREW Q

Provider ID: 269953
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
2115 MONTIEL RD STE 103
SAN MARCOS, CA 92069-3587
Phone: (760) 839-2905
Fax: (760) 839-2901
After Hours Phone: (760)
839-2905
Provider Gender: Male
License number: PT40674
NPI: 1154745404
Provider English Spoken: Yes
Provider Language(s) Spoken:
Vietnamese
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

JIMENEZ, MONICA C

Provider ID: 108896
Board Certified Specialty: No
SAN DIEGO SPINE AND
SPORT INC
2115 MONTIEL RD STE 103
SAN MARCOS, CA 92069-3587

JIMENEZ, MONICA C

Provider ID: 108896
Board Certified Specialty: No
SAN DIEGO SPINE AND
SPORT INC
2115 MONTIEL RD STE 103
SAN MARCOS, CA 92069-3587

Phone: (760) 839-2905
Fax:
After Hours Phone: (760)
839-2905
Provider Gender: Female
License number: PT33505
NPI: 1952446650
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 7AM-6PM, SA
7AM-2PM
Website:
www.spineandsport.com
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

JIMENEZ, MONICA C

Provider ID: 269773
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
2115 MONTIEL RD STE 103
SAN MARCOS, CA 92069-3587
Phone: (760) 839-2905
Fax: (760) 839-2901
After Hours Phone: (760)
839-2905
Provider Gender: Female
License number: PT33505
NPI: 1952446650
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

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D. Directorio de proveedores de atención especializada

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

KURTZ, BENJAMIN W

Provider ID: 270332
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
277 RANCHEROS DR STE 150
SAN MARCOS, CA 92069-2976
Phone: (951) 696-9353
Fax:
After Hours Phone: (951)
696-9353
Provider Gender: Male
License number: PT291545
NPI: 1437555489
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

LANE, JENNIFER A

Provider ID: 270663
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
2115 MONTIEL RD # 200
SAN MARCOS, CA 92069-3587

Phone: (760) 839-2905
Fax: (760) 839-2901
After Hours Phone: (760)
839-2905
Provider Gender: Female
License number: PT37920
NPI: 1477849537
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MALLINSON, DARREN

Provider ID: 271147
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
2115 MONTIEL RD STE 103
SAN MARCOS, CA 92069-3587
Phone: (760) 839-2905
Fax:
After Hours Phone: (760)
839-2905
Provider Gender: Male
License number: PT28994
NPI: 1871607283
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SHANNON, MICHAEL J

Provider ID: 269581
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
2115 MONTIEL RD STE 103
SAN MARCOS, CA 92069-3587
Phone: (760) 839-2905
Fax: (760) 839-2901
After Hours Phone: (760)
839-2905
Provider Gender: Male
License number: PT27069
NPI: 1952577983
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SHAO, PAULA J

Provider ID: 269785
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
2115 MONTIEL RD STE 103
SAN MARCOS, CA 92069-3587
Phone: (760) 839-2905
Fax: (760) 839-2901
After Hours Phone: (760)
839-2905
Provider Gender: Female

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D. Directorio de proveedores de atención especializada

License number: PT19297
NPI: 1457649287
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

YAP, AMANDA E

Provider ID: 270649
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
2115 MONTIEL RD STE 103
SAN MARCOS, CA 92069-3587
Phone: (760) 839-2905
Fax: (760) 839-2901
After Hours Phone: (760)
839-2905
Provider Gender: Female
License number: PT292801
NPI: 1992224141
Provider English Spoken: Yes
Provider Language(s) Spoken:
Chinese, Vietnamese
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

RHEUMATOLOGY

AL NAHLAWI, BASMA

Provider ID: 279079
Board Certified Specialty: No
HEALTH EXCEL IPA INC
334 VIA VERA CRUZ STE 251
SAN MARCOS, CA 92078-2642
Phone: (760) 736-8091
Fax: (760) 736-8092
After Hours Phone: (760)
736-8091
Provider Gender: Female
License number: A115924
NPI: 1144455262
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic
Cultural Competency: No
Hospital Affiliation: Palomar
Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

SURGERY NEUROLOGICAL

NGUYEN, ANDREW D

Provider ID: 244136
Board Certified Specialty: No
UCSD MEDICAL GROUP
277 RANCHEROS DR STE 100
SAN MARCOS, CA 92069-2959
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273

Provider Gender: Male
License number: A91563
NPI: 1720216542
Provider English Spoken: Yes
Provider Language(s) Spoken:
French, Spanish, Vietnamese
Cultural Competency: No
Hospital Affiliation: Palomar
Health Downtown Campus, Ucsd
Medical Ctr, Palomar Medical
Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SAN YSIDRO

CERTIFIED NURSE PRACTITIONER

BALINGIT, KAT T

Provider ID: 265325
Board Certified Specialty: No
HEALTH EXCEL IPA INC
4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619)
662-4100
Provider Gender: Female
License number: NP95012642
NPI: 1538790605
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes

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D. Directorio de proveedores de atención especializada

Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

DA CUNHA, MARIA LUISA B

Provider ID: 270251
Board Certified Specialty: No
HEALTH EXCEL IPA INC
3364 BEYER BLVD # 102
SAN YSIDRO, CA 92173-1322
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
662-4100
Provider Gender: Female
License number: NP95000200
NPI: 1750708434
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

LIEBER, CAROL L

Provider ID: 253207
Board Certified Specialty: No
HEALTH EXCEL IPA INC
4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007

Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619)
662-4100
Provider Gender: Female
License number: NP20849
NPI: 1487889846
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

LIEBER, CAROL L

Provider ID: 253208
Board Certified Specialty: No
HEALTH EXCEL IPA INC
1601 PRECISION PARK LN
SAN YSIDRO, CA 92173-1345
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619)
662-4100
Provider Gender: Female
License number: NP20849
NPI: 1487889846
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

FAMILY PRACTICE

TALAVERA, GREGORY A

Provider ID: 24808
Board Certified Specialty: No
SAN YSIDRO HEALTH CENTER
4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
662-4100
Provider Gender: Male
License number: A40061
NPI: 1740337161
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-F 8AM-5:30PM, SA
8:30AM-2PM
Website: www.ihpsocal.org
Email:
Medical Group(s): San Ysidro
Health San Ysidro Health Center
IPA:

MATERNAL AND FETAL MEDICINE

FAKSH, ARIJ

Provider ID: 282276
Board Certified Specialty: No
HEALTH EXCEL IPA INC

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D. Directorio de proveedores de atención especializada

4050 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
 Phone: (619) 662-4100
 Fax: (619) 205-1967
 After Hours Phone: (619) 662-4100
 Provider Gender: Female
 License number: 20A14222
 NPI: 1912166737
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp Memorial Hospital, Tri City Medical Ctr, Scripps Mercy Hospital, Scripps Green Hospital, Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL): No
 Accessability:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Health Excel Ipa Inc

NEPHROLOGY

SOLTERO, RICARDO A
 Provider ID: 265281
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
 Phone: (619) 662-4100
 Fax: (619) 205-6305
 After Hours Phone: (619) 662-4100
 Provider Gender: Male
 License number: A68995

NPI: 1841295482
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/120
 American Sign Language (ASL): No
 Accessability:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Health Excel Ipa Inc, Imperial Health Holdings Medical Group-Sd

OBSTETRICS / GYNECOLOGY

GOLDSTEIN, EDWARD M
 Provider ID: 244759
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
 Phone: (619) 662-4100
 Fax: (619) 205-1967
 After Hours Phone: (619) 662-4100
 Provider Gender: Male
 License number: G20087
 NPI: 1982617494
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp Memorial Hospital, Sharp Chula Vista Med Ctr, Scripps Mercy

Hospital Chula Vista, Scripps Memorial Hospital, Scripps Mercy Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 16/999
 American Sign Language (ASL): No
 Accessability:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Health Excel Ipa Inc

SEFA-BOAKYE, KOFI D

Provider ID: 265323
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
 Phone: (619) 662-4100
 Fax: (619) 205-6305
 After Hours Phone: (619) 662-4100
 Provider Gender: Male
 License number: G59670
 NPI: 1902993660
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp Chula Vista Med Ctr, Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital Chula Vista
 Medi-Cal Open Panel: Yes
 Min/Max Age: 12/110
 American Sign Language (ASL): No
 Accessability:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):

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D. Directorio de proveedores de atención especializada

IPA: Health Excel Ipa Inc, Rady
Childrens Health Network

WESTERMANN, MELISSA L

Provider ID: 245878
Board Certified Specialty: No
HEALTH EXCEL IPA INC
4050 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619)
662-4100
Provider Gender: Female
License number: A130149
NPI: 1760730758
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Mary
Birch Hosp For Women And
Newborns, Earl And Lorraine
Miller Childrens Hsp, Long Beach
Memorial Med Ctr, University Of
California Irvine Med Ctr, Sharp
Memorial Hospital, Grossmont
Hospital
Medi-Cal Open Panel: No
Min/Max Age: 16/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

PEDIATRICS

BARBADILLO, FERDINAND F

Provider ID: 24669
Board Certified Specialty: No
SAN YSIDRO HEALTH CENTER

4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
662-4100
Provider Gender: Male
License number: A49307
NPI: 1982662193
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Paradise
Valley Hospital, Sharp Chula
Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-F 8AM-5:30PM, SA
8:30AM-2PM
Website: www.ihpsocal.org
Email:
Medical Group(s): San Ysidro
Health San Ysidro Health Center
IPA:

HERMAN, ANDREA M

Provider ID: 257603
Board Certified Specialty: No
BLUE SHIELD PROMISE
HEALTH PLAN DIRECT
4050 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: (619) 428-4463
Fax: (619) 428-2625
After Hours Phone: (619)
428-4463
Provider Gender: Female
License number: A72721
NPI: 1518970037
Provider English Spoken: Yes
Provider Language(s) Spoken:

Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital Chula Vista, Sharp
Chula Vista Med Ctr, Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health
Plan Direct

PHYSICIANS ASSISTANT

ARMENDARIZ DIAZ, ARTURO A

Provider ID: 208801
Board Certified Specialty: No
HEALTH EXCEL IPA INC
4630 BORDER VILLAGE RD
STE H
SAN YSIDRO, CA 92173-3154
Phone: (619) 428-3780
Fax: (619) 428-3782
After Hours Phone: (619)
428-3780
Provider Gender: Male
License number: PA55678
NPI: 1992286231
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM

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D. Directorio de proveedores de atención especializada

Website:
 Email:
 Medical Group(s):
 IPA: Health Excel Ipa Inc

ARMENDARIZ, ARTURO A
 Provider ID: 208799
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 4630 BORDER VILLAGE RD
 STE H
 SAN YSIDRO, CA 92173-3154
 Phone: (619) 428-3780
 Fax: (619) 428-3782
 After Hours Phone: (619)
 428-3780
 Provider Gender: Male
 License number: PA18311
 NPI: 1568488195
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Health Excel Ipa Inc

SURGERY ORTHOPEDIC

ROSENFELD, ALAN L
 Provider ID: 265306
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007

Phone: (619) 662-4100
 Fax: (619) 205-6305
 After Hours Phone: (619)
 662-4100
 Provider Gender: Male
 License number: G75293
 NPI: 1588648968
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy
 Hospital Chula Vista, Scripps
 Memorial Hospital, Paradise
 Valley Hospital, Sharp Chula
 Vista Med Ctr, Scripps Mercy
 Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc, Imperial
 Health Holdings Medical
 Group-Sd

UROLOGY

SALEM, CAROL E
 Provider ID: 265301
 Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
 Phone: (619) 662-4100
 Fax: (619) 205-6305
 After Hours Phone: (619)
 662-4100
 Provider Gender: Female
 License number: G75788

NPI: 1336152982
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy
 Hospital Chula Vista, Scripps
 Mercy Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc

SANTEE

ALLERGY IMMUNOLOGY

REDDY, SUMANA
 Provider ID: 69230
 Board Certified Specialty: No
 SUMANA AND ANANTHRAM
 REDDY MD INC
 9456 CUYAMACA ST STE 102
 SANTEE, CA 92071-5919
 Phone: (619) 588-4074
 Fax:
 After Hours Phone: (619)
 588-4074
 Provider Gender: Female
 License number: C52581
 NPI: 1053300251
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cambodian, Hindi, Spanish,
 Telugu
 Cultural Competency: No
 Hospital Affiliation: Grossmont
 Hospital

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D. Directorio de proveedores de atención especializada

<p>Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd</p>	<p>Group-Sd</p> <hr/> <p>CERTIFIED NURSE PRACTITIONER</p> <hr/> <p>GRIMM, HANA R Provider ID: 261036 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 9600 CUYAMACA ST STE 101 SANTEE, CA 92071-2692 Phone: (619) 749-2150 Fax: (619) 456-9744 After Hours Phone: (619) 749-2150 Provider Gender: Female License number: NP22474 NPI: 1831463751 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: No Min/Max Age: 0/18 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network</p>	<p>Phone: (619) 749-2150 Fax: After Hours Phone: (619) 749-2150 Provider Gender: Female License number: NP7154 NPI: 1194905489 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: No Min/Max Age: 0/18 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network</p>
<p>REDDY, SUMANA, MD Provider ID: 69230 Board Certified Specialty: Yes SUMANA AND ANANTHRAM REDDY MD INC 9456 CUYAMACA ST STE 102 SANTEE, CA 92071-5919 Phone: (619) 377-6565 Fax: (619) 451-2111 After Hours Phone: (619) 377-6565 Provider Gender: Female License number: C52581 NPI: 1053300251 Provider English Spoken: Yes Provider Language(s) Spoken: Cambodian, Hindi, Spanish, Telugu Cultural Competency: No Hospital Affiliation: Grossmont Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical</p>	<p>9600 CUYAMACA ST STE 101 SANTEE, CA 92071-2692 Phone: (619) 749-2150 Fax: (619) 456-9744 After Hours Phone: (619) 749-2150 Provider Gender: Female License number: NP22474 NPI: 1831463751 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: No Min/Max Age: 0/18 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network</p>	<hr/> <p>GASTROENTEROLOGY</p> <hr/> <p>REDDY, ANANTHRAM P , MD Provider ID: 69412 Board Certified Specialty: No SUMANA AND ANANTHRAM REDDY MD INC 9456 CUYAMACA ST STE 102 SANTEE, CA 92071-5919 Phone: (619) 588-4074 Fax: (619) 588-4004 After Hours Phone: (619) 588-4074 Provider Gender: Male License number: C52423 NPI: 1124014923 Provider English Spoken: Yes Provider Language(s) Spoken: Cambodian, Hindi, Spanish Cultural Competency: No Hospital Affiliation: Grossmont Hospital, Alvarado Hospital Llc</p>

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D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

REDDY, ANANTHRAM P

Provider ID: 69412

Board Certified Specialty: No
SUMANA AND ANANTHRAM
REDDY MD INC

9456 CUYAMACA ST STE 102
SANTEE, CA 92071-5919

Phone: (619) 588-4074

Fax: (619) 326-0380

After Hours Phone: (619)
588-4074

Provider Gender: Male

License number: C52423

NPI: 1124014923

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cambodian, Hindi, Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont
Hospital, Alvarado Hospital Llc

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

REDDY, ANANTHRAM P

Provider ID: 69412

Board Certified Specialty: No
SUMANA AND ANANTHRAM
REDDY MD INC

9456 CUYAMACA ST STE 102
SANTEE, CA 92071-5919

Phone: (619) 588-4074

Fax: (619) 588-4004

After Hours Phone: (619)
588-4074

Provider Gender: Male

License number: C52423

NPI: 1124014923

Provider English Spoken: Yes
Provider Language(s) Spoken:

Cambodian, Hindi, Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont
Hospital, Alvarado Hospital Llc

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

REDDY, JOSEPH B

Provider ID: 69226

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD

9456 CUYAMACA ST STE 102
SANTEE, CA 92071-5919

Phone: (619) 588-4074

Fax: (619) 588-4004

After Hours Phone: (619)
588-4074

Provider Gender: Male

License number: A46472

NPI: 1245215391

Provider English Spoken: Yes

Provider Language(s) Spoken:

Hindi, Spanish, Telugu

Cultural Competency: No

Hospital Affiliation: Grossmont
Hospital, Alvarado Hospital Llc

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Imperial Health Holdings
Medical Group-Sd

PHYSICIANS ASSISTANT

COOL, JAY M , NPA

Provider ID: 241374

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
120 TOWN CENTER PKWY
SANTEE, CA 92071-5801

Phone: (619) 445-6200

Fax: (619) 478-9164

After Hours Phone: (619)
445-6200

Provider Gender: Male

License number: PA53135

NPI: 1407887227

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E

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D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MERCER, KELLY C

Provider ID: 257507
Board Certified Specialty: No
BLUE SHIELD PROMISE
HEALTH PLAN DIRECT
10538 MISSION GORGE RD
STE 100
SANTEE, CA 92071-3154
Phone: (619) 456-0033
Fax:
After Hours Phone: (619)
456-0033
Provider Gender: Female
License number: PA21625
NPI: 1154609790
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health
Plan Direct, Health Excel Ipa Inc

ROSENBLATT, SHERI

Provider ID: 284992
Board Certified Specialty: No
HEALTH EXCEL IPA INC
120 TOWN CENTER PKWY
SANTEE, CA 92071-5801

Phone: (619) 662-4100
Fax: (619) 873-3476
After Hours Phone: (619)
662-4100
Provider Gender: Female
License number: PA22872
NPI: 1114041621
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

RADIOLOGY DIAGNOSTIC X-RAY

BRANNIGAN, THOMAS J

Provider ID: 114570
Board Certified Specialty: No
X RAY MEDICAL GROUP INC
9640 MISSION GORGE RD STE
H
SANTEE, CA 92071-3854
Phone: (619) 258-8552
Fax:
After Hours Phone: (619)
258-8552
Provider Gender: Male
License number: G65789
NPI: 1598710030
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

CHANG, WEILING

Provider ID: 37540
Board Certified Specialty: No
X RAY MEDICAL GROUP INC
9640 MISSION GORGE RD STE
H
SANTEE, CA 92071-3854
Phone: (619) 258-8552
Fax: (619) 668-0377
After Hours Phone: (619)
258-8552
Provider Gender: Female
License number: A90535
NPI: 1659326460
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

ELLISON, HARRY P

Provider ID: 114775
Board Certified Specialty: No
X RAY MEDICAL GROUP INC

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D. Directorio de proveedores de atención especializada

9640 MISSION GORGE RD STE H
 SANTEE, CA 92071-3854
 Phone: (619) 258-8552
 Fax:
 After Hours Phone: (619) 258-8552
 Provider Gender: Male
 License number: G50309
 NPI: 1780639039
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

ELLISON, JON G

Provider ID: 111123
 Board Certified Specialty: No
 X RAY MEDICAL GROUP INC
 9640 MISSION GORGE RD STE H
 SANTEE, CA 92071-3854
 Phone: (619) 258-8552
 Fax:
 After Hours Phone: (619) 258-8552
 Provider Gender: Male
 License number: A117199
 NPI: 1760630669
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital

Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

JACOBSEN, JAMES C

Provider ID: 37544
 Board Certified Specialty: No
 X RAY MEDICAL GROUP INC
 9640 MISSION GORGE RD STE H
 SANTEE, CA 92071-3854
 Phone: (619) 258-8552
 Fax:
 After Hours Phone: (619) 258-8552
 Provider Gender: Male
 License number: A87878
 NPI: 1356394811
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

Provider ID: 111123
 Board Certified Specialty: No
 X RAY MEDICAL GROUP INC
 9640 MISSION GORGE RD STE H
 SANTEE, CA 92071-3854
 Phone: (619) 258-8552
 Fax:
 After Hours Phone: (619) 258-8552
 Provider Gender: Male
 License number: A117199
 NPI: 1760630669
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital

MOORE, BRIAN S

Provider ID: 115365
 Board Certified Specialty: No
 X RAY MEDICAL GROUP INC

9640 MISSION GORGE RD STE H
 SANTEE, CA 92071-3854
 Phone: (619) 258-8552
 Fax:
 After Hours Phone: (619) 258-8552
 Provider Gender: Male
 License number: G68336
 NPI: 1831144005
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

NAUMANN, MICHAEL T

Provider ID: 113620
 Board Certified Specialty: No
 X RAY MEDICAL GROUP INC
 9640 MISSION GORGE RD STE H
 SANTEE, CA 92071-3854
 Phone: (619) 258-8552
 Fax: (619) 460-2774
 After Hours Phone: (619) 258-8552
 Provider Gender: Female
 License number: A116596
 NPI: 1386821171
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital

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D. Directorio de proveedores de atención especializada

<p> <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc </p>	<p> 9640 MISSION GORGE RD STE H SANTEE, CA 92071-3854 <i>Phone:</i> (619) 258-8552 <i>Fax:</i> <i>After Hours Phone:</i> (619) 258-8552 <i>Provider Gender:</i> Female <i>License number:</i> A115423 <i>NPI:</i> 1396068573 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sutter Auburn Faith Hosp, Sutter Davis Hospital, Sutter Roseville Medical Center, Sutter Medical Center Sacramento, Cedars Sinai Medical Center, Grossmont Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc </p>	<p> <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc </p>
<p> NAUMANN, MICHAEL T , MD <i>Provider ID:</i> 269663 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 9640 MISSION GORGE RD STE H SANTEE, CA 92071-3854 <i>Phone:</i> (619) 258-8552 <i>Fax:</i> (619) 258-8553 <i>After Hours Phone:</i> (619) 258-8552 <i>Provider Gender:</i> Female <i>License number:</i> A116596 <i>NPI:</i> 1386821171 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc </p>	<p> TULADHAR, PREETI <i>Provider ID:</i> 37566 <i>Board Certified Specialty:</i> No X RAY MEDICAL GROUP INC 9640 MISSION GORGE RD STE H SANTEE, CA 92071-3854 <i>Phone:</i> (619) 258-8552 <i>Fax:</i> <i>After Hours Phone:</i> (619) 258-8552 <i>Provider Gender:</i> Female <i>License number:</i> A94944 <i>NPI:</i> 1578586640 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> </p>	
<p> TAGHAVI, MARGARET S <i>Provider ID:</i> 113625 <i>Board Certified Specialty:</i> No X RAY MEDICAL GROUP INC </p>	<p> TROUT, TERE E <i>Provider ID:</i> 37552 <i>Board Certified Specialty:</i> No X RAY MEDICAL GROUP INC 9640 MISSION GORGE RD STE H SANTEE, CA 92071-3854 <i>Phone:</i> (619) 258-8552 <i>Fax:</i> <i>After Hours Phone:</i> (619) 258-8552 <i>Provider Gender:</i> Female <i>License number:</i> G70276 <i>NPI:</i> 1649223140 </p>	

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D. Directorio de proveedores de atención especializada

URIESTE, ALEXANDER S

Provider ID: 114934
Board Certified Specialty: No
X RAY MEDICAL GROUP INC
 9640 MISSION GORGE RD STE
 H
 SANTEE, CA 92071-3854
Phone: (619) 258-8552
Fax: (619) 460-2774
After Hours Phone: (619)
 258-8552
Provider Gender: Male
License number: A78795
NPI: 1528011020
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
 Hospital, Ucsd La Jolla John
 Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

VENKATESH, VIJAY B

Provider ID: 114940
Board Certified Specialty: No
X RAY MEDICAL GROUP INC
 9640 MISSION GORGE RD STE
 H
 SANTEE, CA 92071-3854
Phone: (619) 258-8552
Fax: (619) 668-0377
After Hours Phone: (619)
 258-8552
Provider Gender: Male
License number: A94476

NPI: 1689627085
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
 Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

RADIOLOGY

JACOBSEN, JAMES C , MD

Provider ID: 243976
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 9640 MISSION GORGE RD STE
 H
 SANTEE, CA 92071-3854
Phone: (619) 460-2770
Fax: (619) 460-2274
After Hours Phone: (619)
 460-2770
Provider Gender: Male
License number: A87878
NPI: 1356394811
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
 Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MOORE, BRIAN S , MD

Provider ID: 243961
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 9640 MISSION GORGE RD STE
 H
 SANTEE, CA 92071-3854
Phone: (619) 460-2770
Fax:
After Hours Phone: (619)
 460-2770
Provider Gender: Male
License number: G68336
NPI: 1831144005

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
 Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

VENKATESH, VIJAY B , MD

Provider ID: 269661
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 9640 MISSION GORGE RD STE
 H
 SANTEE, CA 92071-3854
Phone: (619) 460-2770
Fax: (619) 460-2774
After Hours Phone: (619)
 460-2770

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Male
License number: A94476
NPI: 1689627085
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

REGISTERED PHYSICAL THERAPIST

BOUTELLE, DAVID C
Provider ID: 248308
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9830 PROSPECT AVE STE A
SANTEE, CA 92071-4375
Phone: (619) 448-4860
Fax: (619) 448-1639
After Hours Phone: (619) 448-4860
Provider Gender: Male
License number: PT12422
NPI: 1063461101
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc
DAHER, NICOLE M
Provider ID: 270343
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9830 PROSPECT AVE STE A
SANTEE, CA 92071-4375
Phone: (619) 448-4860
Fax: (619) 448-1639
After Hours Phone: (619) 448-4860

Provider Gender: Female
License number: PT42881
NPI: 1790155844
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

DANSEY, ASHLEY R
Provider ID: 270339
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9830 PROSPECT AVE STE A
SANTEE, CA 92071-4375
Phone: (619) 448-4860
Fax: (619) 448-1639
After Hours Phone: (619) 448-4860
Provider Gender: Female
License number: PT36952

NPI: 1962716076
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

GRIEGER, NANCY N
Provider ID: 270118
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
8790 CUYAMACA ST STE A
SANTEE, CA 92071-4295
Phone: (619) 596-5969
Fax: (619) 596-5970
After Hours Phone: (619) 596-5969
Provider Gender: Female
License number: PT40167
NPI: 1003956798
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

MILLER, LAURA C

Provider ID: 271143
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
8790 CUYAMACA ST STE A
SANTEE, CA 92071-4295
Phone: (619) 596-5969
Fax: (619) 596-5970
After Hours Phone: (619)
596-5969
Provider Gender: Female
License number: PT26121
NPI: 1265454557
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MONROE, MAX

Provider ID: 126576
Board Certified Specialty: No
SAN DIEGO SPINE AND
SPORT INC
8790 CUYAMACA ST STE A
SANTEE, CA 92071-4295
Phone: (619) 596-5969
Fax:
After Hours Phone: (619)
596-5969
Provider Gender: Male
License number: PT294368
NPI: 1295234433
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-F 7AM-6PM, SA
7AM-2PM
Website:
www.spineandsport.com
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MONROE, MAX

Provider ID: 269925
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
8790 CUYAMACA ST STE A
SANTEE, CA 92071-4295
Phone: (619) 596-5969
Fax: (619) 596-5970
After Hours Phone: (619)
596-5969
Provider Gender: Male
License number: PT294368
NPI: 1295234433
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

ROUILLARD, NORMA K

Provider ID: 269600

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
8790 CUYAMACA ST STE A
SANTEE, CA 92071-4295
Phone: (619) 596-5969
Fax: (619) 596-5970
After Hours Phone: (619)
596-5969
Provider Gender: Female
License number: PT29262
NPI: 1194727305
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SOLANA BEACH

DERMATOLOGY

GILBOA, RUTH, MD

Provider ID: 269415
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
530 LOMAS SANTA FE DR STE
D
SOLANA BEACH, CA
92075-1346
Phone: (858) 259-0056
Fax: (858) 259-0187
After Hours Phone: (858)
259-0056
Provider Gender: Female
License number: A46557
NPI: 1205873197

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City
 Medical Ctr, Tri City Hospital
 West, Scripps Memorial Hospital
 Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

ROSS, ANDREW L , MD

Provider ID: 269335
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 530 LOMAS SANTA FE DR STE
 D
 SOLANA BEACH, CA
 92075-1346
Phone: (858) 259-0056
Fax: (858) 259-0187
After Hours Phone: (858)
 259-0056
Provider Gender: Male
License number: A140430
NPI: 1700140738
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Community Care Ipa Llc
VENKAT, ARUN P , MD
Provider ID: 269346
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 530 LOMAS SANTA FE DR STE
 D
 SOLANA BEACH, CA
 92075-1346
Phone: (858) 259-2256
Fax: (858) 259-0187
After Hours Phone: (858)
 259-2256
Provider Gender: Male
License number: A125103
NPI: 1952436354
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

Provider ID: 269335
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 530 LOMAS SANTA FE DR STE
 D
 SOLANA BEACH, CA
 92075-1346
Phone: (858) 259-0056
Fax: (858) 259-0187
After Hours Phone: (858)
 259-0056
Provider Gender: Male
License number: A140430
NPI: 1700140738
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

HEARING AID DEALER / SUPPLIER

DANDURAND, JOHN M
Provider ID: 252963
Board Certified Specialty: No
 HEALTH EXCEL IPA INC
 740 LOMAS SANTA FE DR STE
 110
 SOLANA BEACH, CA
 92075-1441

Phone: (858) 259-4182
Fax: (805) 530-3989
After Hours Phone: (858)
 259-4182
Provider Gender: Male
License number: HA2056
NPI: 1497901680
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
 Health Excel Ipa Inc

DANDURAND, JOHN M , MD
Provider ID: 269779
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 740 LOMAS SANTA FE DR STE
 110
 SOLANA BEACH, CA
 92075-1441
Phone: (858) 259-4182
Fax: (805) 530-3989
After Hours Phone: (858)
 259-4182
Provider Gender: Male
License number: HA2056
NPI: 1497901680
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Health Excel Ipa Inc	<i>Board Certified Specialty:</i> No GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2555 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2555 <i>Provider Gender:</i> Male <i>License number:</i> A55932 <i>NPI:</i> 1962436451 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Tagalog <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medical Group(s):</i> Grossmont Spring Valley Family Hlth Ctrs Inc <i>IPA:</i>	<i>NPI:</i> 1366824971 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Mandarin <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medical Group(s):</i> Grossmont Spring Valley Family Hlth Ctrs Inc <i>IPA:</i>
WYMAN, WENDY A <i>Provider ID:</i> 252977 <i>Board Certified Specialty:</i> No HEALTH EXCEL IPA INC 740 LOMAS SANTA FE DR STE 110 SOLANA BEACH, CA 92075-1441 <i>Phone:</i> (858) 259-4182 <i>Fax:</i> (858) 259-4853 <i>After Hours Phone:</i> (858) 259-4182 <i>Provider Gender:</i> Female <i>License number:</i> HA8365 <i>NPI:</i> 1922668631 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Health Excel Ipa Inc	<i>Board Certified Specialty:</i> No GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2555 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2555 <i>Provider Gender:</i> Female <i>License number:</i> A149063	OBSTETRICS / GYNECOLOGY ALIMONOS, LYSISTRATI A <i>Provider ID:</i> 114830 <i>Board Certified Specialty:</i> No GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2555 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2555 <i>Provider Gender:</i> Female <i>License number:</i> 20A14919 <i>NPI:</i> 1619397031 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Grossmont Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None
SPRING VALLEY	CONSTANTINO, STEPHANIE L <i>Provider ID:</i> 128126 <i>Board Certified Specialty:</i> No GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2555 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2555 <i>Provider Gender:</i> Female <i>License number:</i> A149063	
FAMILY PRACTICE		
CARDONES, ARTHUR J <i>Provider ID:</i> 25609		

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D. Directorio de proveedores de atención especializada

<p><i>American Sign Language (ASL):</i> No <i>Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medical Group(s):</i> Grossmont Spring Valley Family Hlth Ctrs Inc <i>IPA:</i></p>	<p>Spring Valley Family Hlth Ctrs Inc <i>IPA:</i></p>	<p>SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2555 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2555 <i>Provider Gender:</i> Female <i>License number:</i> A118095 <i>NPI:</i> 1073701041 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medical Group(s):</i> Grossmont Spring Valley Family Hlth Ctrs Inc <i>IPA:</i></p>
<p>BUECHNER, CHARLENE A <i>Provider ID:</i> 127438 <i>Board Certified Specialty:</i> No GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2555 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2555 <i>Provider Gender:</i> Female <i>License number:</i> A68463 <i>NPI:</i> 1376663831 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Sharp Mary Birch Hosp For Women And Newborns <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medical Group(s):</i> Grossmont</p>	<p>CARTER, KHALIL J <i>Provider ID:</i> 127378 <i>Board Certified Specialty:</i> No GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2555 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2555 <i>Provider Gender:</i> Male <i>License number:</i> A113001 <i>NPI:</i> 1225231582 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medical Group(s):</i> Grossmont Spring Valley Family Hlth Ctrs Inc <i>IPA:</i></p>	<p>FOLCH TORRES-AGUIAR, BEATRIZ M <i>Provider ID:</i> 120515 <i>Board Certified Specialty:</i> No GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2555 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2555 <i>Provider Gender:</i> Female <i>License number:</i> A148014</p>
<p>CERVANTES, SANDRA M <i>Provider ID:</i> 114873 <i>Board Certified Specialty:</i> No GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC 8788 JAMACHA RD</p>	<p>CERVANTES, SANDRA M <i>Provider ID:</i> 114873 <i>Board Certified Specialty:</i> No GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC 8788 JAMACHA RD</p>	<p>FOLCH TORRES-AGUIAR, BEATRIZ M <i>Provider ID:</i> 120515 <i>Board Certified Specialty:</i> No GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2555 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2555 <i>Provider Gender:</i> Female <i>License number:</i> A148014</p>

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D. Directorio de proveedores de atención especializada

<p>NPI: 1457794752 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Yue Chinese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Grossmont Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medical Group(s):</i> Grossmont Spring Valley Family Hlth Ctrs Inc <i>IPA:</i></p>	<p><i>American Sign Language (ASL):</i> No <i>Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medical Group(s):</i> Grossmont Spring Valley Family Hlth Ctrs Inc <i>IPA:</i></p>	<p><i>IPA:</i></p>
<p>LIPSCHITZ, LISA S <i>Provider ID:</i> 25619 <i>Board Certified Specialty:</i> No GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2555 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2555 <i>Provider Gender:</i> Female <i>License number:</i> A72005 NPI: 1649208711 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Grossmont Hospital, Sharp Coronado Hosp And Healthcare Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None</p>	<p>LOEFFLER, ALLISON M <i>Provider ID:</i> 115547 <i>Board Certified Specialty:</i> No GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2555 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2555 <i>Provider Gender:</i> Female <i>License number:</i> A116680 NPI: 1700073962 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medical Group(s):</i> Grossmont Spring Valley Family Hlth Ctrs Inc <i>IPA:</i></p>	<p>MELLENDEZ BERRIOS, IARA DEL M <i>Provider ID:</i> 115042 <i>Board Certified Specialty:</i> No GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2555 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2555 <i>Provider Gender:</i> Female <i>License number:</i> A114181 NPI: 1740514249 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medical Group(s):</i> Grossmont Spring Valley Family Hlth Ctrs Inc <i>IPA:</i></p>
		<p>RODRIGUEZ JEREZ, ROBERTO D <i>Provider ID:</i> 130082 <i>Board Certified Specialty:</i> No GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC 8788 JAMACHA RD</p>

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D. Directorio de proveedores de atención especializada

SPRING VALLEY, CA
91977-4035

Phone: (619) 515-2555

Fax:

After Hours Phone: (619)
515-2555

Provider Gender: Male

License number: A154298

NPI: 1710316450

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Sharp Coronado Hosp
And Healthcare Ctr, Grossmont
Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Grossmont
Spring Valley Family Hlth Ctrs
Inc

IPA:

WINESBURG, JENNIFER J

Provider ID: 114807

Board Certified Specialty: No
GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035

Phone: (619) 515-2555

Fax:

After Hours Phone: (619)
515-2555

Provider Gender: Female

License number: 20A11535

NPI: 1811162456

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Desert

Regional Med Ctr, Sharp
Coronado Hosp And Healthcare
Ctr, Grossmont Hospital, Scripps
Mercy Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Grossmont
Spring Valley Family Hlth Ctrs
Inc

IPA:

ZIEG, ALAN J

Provider ID: 25637

Board Certified Specialty: No
GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035

Phone: (619) 515-2555

Fax:

After Hours Phone: (619)
515-2555

Provider Gender: Male

License number: G78814

NPI: 1699790634

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Grossmont
Hospital, Scripps Mercy Hospital,
Sharp Coronado Hosp And
Healthcare Ctr, Scripps Mercy
Hospital Chula Vista

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Grossmont
Spring Valley Family Hlth Ctrs
Inc

IPA:

PHYSICIANS ASSISTANT

LOPEZ, MARIO A

Provider ID: 115102

Board Certified Specialty: No
GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035

Phone: (619) 515-2555

Fax:

After Hours Phone: (619)
515-2555

Provider Gender: Male

License number: PA21385

NPI: 1932335080

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Grossmont
Spring Valley Family Hlth Ctrs
Inc

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

IPA:	<i>Phone:</i> (760) 941-4444 <i>Fax:</i> (760) 941-8902 <i>After Hours Phone:</i> (760) 941-4444 <i>Provider Gender:</i> Male <i>License number:</i> A30813 <i>NPI:</i> 1215933148 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Dutch, French, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Tri City Medical Ctr, Palomar Medical Center <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-TH 8:30AM-4PM, F 7:30AM-4PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc	<i>Center</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc
TURNER, ERIC M <i>Provider ID:</i> 122064 <i>Board Certified Specialty:</i> No GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2555 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2555 <i>Provider Gender:</i> Male <i>License number:</i> PA55067 <i>NPI:</i> 1669756128 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medical Group(s):</i> Grossmont Spring Valley Family Hlth Ctrs Inc <i>IPA:</i>		

VISTA

ALLERGY IMMUNOLOGY

ZIERING, ROBERT W

Provider ID: 26578
Board Certified Specialty: No
ALLERGY AND IMMUNOLOGY
2067 W VISTA WAY STE 140
VISTA, CA 92083-6032

ZIERING, ROBERT W , MD

Provider ID: 269520
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
2067 W VISTA WAY STE 140
VISTA, CA 92083-6032
Phone: (760) 941-4444
Fax: (760) 941-8902
After Hours Phone: (760) 941-4444
Provider Gender: Male
License number: A30813
NPI: 1215933148
Provider English Spoken: Yes
Provider Language(s) Spoken: Dutch, French, Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Palomar Medical

KABRA, ASHISH N , MD

Provider ID: 271714
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
2067 W VISTA WAY STE 225
VISTA, CA 92083-6001
Phone: (760) 224-7766
Fax: (760) 450-9655
After Hours Phone: (760) 224-7766
Provider Gender: Male
License number: A122620
NPI: 1639373798
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

CERTIFIED NURSE PRACTITIONER

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

ALVAREZ, LISA J

Provider ID: 278537
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 414-3892
Fax: (760) 631-5000
After Hours Phone: (760) 414-3892
Provider Gender: Female
License number: NP19911
NPI: 1417262718
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

AYELE, MAHOGANY A

Provider ID: 257586
Board Certified Specialty: No
BLUE SHIELD PROMISE
HEALTH PLAN DIRECT
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
License number: NP19570
NPI: 1902120421
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health Plan Direct

AYELE, MAHOGANY A

Provider ID: 257587
Board Certified Specialty: No
BLUE SHIELD PROMISE
HEALTH PLAN DIRECT
134 GRAPEVINE RD
VISTA, CA 92083-4004
Phone: (844) 308-5003
Fax: (760) 414-3763
After Hours Phone: (844) 308-5003
Provider Gender: Female
License number: NP19570
NPI: 1902120421
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health Plan Direct

BAKER, SHANNON

Provider ID: 279979
Board Certified Specialty: No
HEALTH EXCEL IPA INC
2375 S MELROSE DR
VISTA, CA 92081-8788
Phone: (760) 305-1900
Fax: (760) 305-1910
After Hours Phone: (760) 305-1900
Provider Gender: Female
License number: NP95016279
NPI: 1518191014
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: P, EB, IB, E
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

BROMAN, GRETCHEN L

Provider ID: 280191
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
License number: NP95007885
NPI: 1922421288
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes
Min/Max Age: 0/0
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

BROMAN, GRETCHEN L

Provider ID: 280193
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
134 GRAPEVINE RD
VISTA, CA 92083-4004
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Provider Gender: Female
License number: NP95007885
NPI: 1922421288
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/0
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

CHAMBERLIN, KALIANA, NPA

Provider ID: 271067
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1000 VALE TERRACE DR
VISTA, CA 92084-5218

Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Provider Gender: Female
License number: NP95013030
NPI: 1457995706
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

CHATHAM, OLIVIA K

Provider ID: 279263
Board Certified Specialty: No
HEALTH EXCEL IPA INC
950 CIVIC CENTER DR # A
VISTA, CA 92083-5208
Phone: (760) 439-4839
Fax: (760) 439-4841
After Hours Phone: (760)
439-4839
Provider Gender: Female
License number: NP95009164
NPI: 1740772698
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/21
American Sign Language (ASL):
No
♿ Accessibility:

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

CLARK, CYNTHIA, NPA

Provider ID: 240000
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
134 GRAPEVINE RD
VISTA, CA 92083-4004
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Provider Gender: Female
License number: NP16833
NPI: 1679698849
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

CORY, ALLISON H , NPA

Provider ID: 245207
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
134 GRAPEVINE RD
VISTA, CA 92083-4004
Phone: (760) 631-5000
Fax:
After Hours Phone: (760)
631-5000

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Female
License number: NP20497
NPI: 1194027706
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

DEKKERS-O'HARE, INGRID F , NPA

Provider ID: 241299
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax:
After Hours Phone: (760)
631-5000
Provider Gender: Female
License number: NP8665
NPI: 1013938968
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Vietnamese
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Community Care Ipa Llc
EKLUND, BONNIE L , NPA
Provider ID: 243623
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax: (760) 414-3763
After Hours Phone: (760)
631-5000

Provider Gender: Female
License number: NP15285
NPI: 1811978992
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

EKLUND, BONNIE L , NPA
Provider ID: 243624
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
134 GRAPEVINE RD
VISTA, CA 92083-4004
Phone: (760) 631-5000
Fax: (760) 414-3763
After Hours Phone: (760)
631-5000
Provider Gender: Female
License number: NP15285
NPI: 1811978992
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

HALGEDAHL, YI T , NPA
Provider ID: 241907
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Provider Gender: Female
License number: NP95006826
NPI: 1619246907
Provider English Spoken: Yes
Provider Language(s) Spoken:
Chinese
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc
KAHL, NICHOLAS D
Provider ID: 279942

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
134 GRAPEVINE RD
VISTA, CA 92083-4004
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000

Provider Gender: Male
License number: NP95006360
NPI: 1821306598

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

KORMANIK, PATRICIA A

Provider ID: 282072
Board Certified Specialty: No
UCSD MEDICAL GROUP
910 SYCAMORE AVE STE 102
VISTA, CA 92081-7833
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: NP9707
NPI: 1093895047

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Ucsd Medical Group

KOUSARI, JHALEH, NPA

Provider ID: 239793
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax:

After Hours Phone: (760)
631-5000
Provider Gender: Female
License number: NP20893
NPI: 1811262405
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Spanish

Cultural Competency: No
Hospital Affiliation: Scripps
Green Hospital, Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

METZGER, JULIA

Provider ID: 262139
Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK
2067 W VISTA WAY STE 180
VISTA, CA 92083-6033

Phone: (760) 945-3434
Fax: (760) 945-6761
After Hours Phone: (760)
945-3434

Provider Gender: Female
License number: NP95010547
NPI: 1982050514

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

NICHOLAS, ESTELA M , NPA

Provider ID: 239866
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax:

After Hours Phone: (760)
631-5000
Provider Gender: Female
License number: NP11448
NPI: 1558384792
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<p>Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc</p> <p>PATEMAN, CAROLYN U , NPA Provider ID: 239976 Board Certified Specialty: No COMMUNITY CARE IPA LLC 1000 VALE TERRACE DR VISTA, CA 92084-5218 Phone: (760) 631-5000 Fax: (760) 414-3892 After Hours Phone: (760) 631-5000 Provider Gender: Female License number: NP10896 NPI: 1205859444 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc</p> <p>PRICE, MADELINE R Provider ID: 278000 Board Certified Specialty: No COMMUNITY CARE IPA LLC 1000 VALE TERRACE DR</p>	<p>VISTA, CA 92084-5218 Phone: (760) 631-5000 Fax: (760) 414-3892 After Hours Phone: (760) 631-5000 Provider Gender: Female License number: NP95016147 NPI: 1740804095 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc</p> <p>PRICE, MADELINE R Provider ID: 278001 Board Certified Specialty: No COMMUNITY CARE IPA LLC 134 GRAPEVINE RD VISTA, CA 92083-4004 Phone: (760) 631-5000 Fax: (760) 414-3892 After Hours Phone: (760) 631-5000 Provider Gender: Female License number: NP95016147 NPI: 1740804095 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL):</p>	<p>No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc</p> <p>PRITZKER, JOELY R , NPA Provider ID: 239773 Board Certified Specialty: No COMMUNITY CARE IPA LLC 1000 VALE TERRACE DR VISTA, CA 92084-5218 Phone: (760) 631-5000 Fax: After Hours Phone: (760) 631-5000 Provider Gender: Female License number: NP95000955 NPI: 1619384351 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: Yes Min/Max Age: 12/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc</p> <p>SMITH, SHARON T , NPA Provider ID: 242508 Board Certified Specialty: No COMMUNITY CARE IPA LLC 1000 VALE TERRACE DR VISTA, CA 92084-5218</p>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Provider Gender: Female
License number: NP15444
NPI: 1780603597
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SMITH, SHARON T , NPA
Provider ID: 242508
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Provider Gender: Female
License number: RN428876
NPI: 1780603597
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SRILASAK, MICHELE
Provider ID: 281857
Board Certified Specialty: No
UCSD MEDICAL GROUP
910 SYCAMORE AVE STE 102
VISTA, CA 92081-7833
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NP13694
NPI: 1265487326
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

DERMATOLOGY

HENDERSON, GREGORY P
Provider ID: 284505
Board Certified Specialty: No
HEALTH EXCEL IPA INC
1934 VIA CTR # B
VISTA, CA 92081-6056

Phone: (760) 295-2299
Fax: (760) 216-5300
After Hours Phone: (760) 295-2299
Provider Gender: Male
License number: A125261
NPI: 1619109519
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

HENDERSON, GREGORY P
Provider ID: 284506
Board Certified Specialty: No
HEALTH EXCEL IPA INC
2395 S MELROSE DR
VISTA, CA 92081-8788
Phone: (760) 216-5313
Fax: (760) 216-5300
After Hours Phone: (760) 216-5313
Provider Gender: Male
License number: A125261
NPI: 1619109519
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM

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D. Directorio de proveedores de atención especializada

Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

NICKERSON, DEREK W

Provider ID: 284535
Board Certified Specialty: No
HEALTH EXCEL IPA INC
1934 VIA CTR # B
VISTA, CA 92081-6056
Phone: (760) 295-2299
Fax: (760) 216-5300
After Hours Phone: (760)
295-2299

Provider Gender: Male

License number: A171167

NPI: 1265895619

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Health Excel Ipa Inc

VALENTINE, JOHANNAH K

Provider ID: 284572

Board Certified Specialty: No

HEALTH EXCEL IPA INC

1934 VIA CTR # B

VISTA, CA 92081-6056

Phone: (760) 295-2299

Fax: (760) 216-5300

After Hours Phone: (760)

295-2299

Provider Gender: Female

License number: C136249

NPI: 1508932294

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

VALENTINE, JOHANNAH K

Provider ID: 284573

Board Certified Specialty: No

HEALTH EXCEL IPA INC

2395 S MELROSE DR

VISTA, CA 92081-8788

Phone: (760) 216-5313

Fax: (760) 216-5300

After Hours Phone: (760)

216-5313

Provider Gender: Female

License number: C136249

NPI: 1508932294

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

KETCHEL, CLINT

Provider ID: 100838

Board Certified Specialty: No

VISTA COMMUNITY CLNC

1000 VALE TERRACE DR

VISTA, CA 92084-5218

Phone: (760) 631-5000

Fax:

After Hours Phone: (760)

631-5000

Provider Gender: Male

License number: A135564

NPI: 1699038125

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Southwest

Healthcare System Murrieta,

Southwest Healthcare System

Wildomar, Scripps Memorial

Hospital Encinitas, Tri City

Medical Ctr, Whittier Hospital

Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-TH 8AM-8PM, F

8AM-5PM, SA 9AM-4PM

Website:

www.vistacommunityclinic.org

Email:

Medical Group(s): Vista

Community Clinic

IPA:

GYNECOLOGIC ONCOLOGY

ESKANDER, RAMEZ N

Provider ID: 282163

Board Certified Specialty: No

UCSD MEDICAL GROUP

910 SYCAMORE AVE STE 102

VISTA, CA 92081-7833

FAMILY PRACTICE

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Phone: (760) 536-7737
Fax: (760) 536-7959
After Hours Phone: (760) 536-7737
Provider Gender: Male
License number: A102482
NPI: 1144486929
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: University Of California Irvine Med Ctr, Earl And Lorraine Miller Childrens Hsp, Long Beach Memorial Med Ctr, Providence St Joseph Hospital, Providence St Jude Medical Center, Orange Coast Mem Med Ctr, Fountain Valley Regional Hosp And Med Ctr, Corona Regional Med Ctr, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HEMATOLOGY / ONCOLOGY

SIDDIQUI, FAREEHA H
Provider ID: 282173
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 910 SYCAMORE AVE STE 102
 VISTA, CA 92081-7833
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273

Provider Gender: Female
License number: A108879
NPI: 1104848720
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish, Urdu
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital Encinitas, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SUBRAMANIAN, RUPA
Provider ID: 282181
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 910 SYCAMORE AVE STE 102
 VISTA, CA 92081-7833
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273

Provider Gender: Female
License number: A67026
NPI: 1376547174
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Tamil
Cultural Competency: No
Hospital Affiliation: Corona Regional Med Ctr, Tri City Medical Ctr, Ucsd Medical Ctr, Scripps Memorial Hospital Encinitas, Fountain Valley

Regional Hosp And Med Ctr, University Of California Irvine Med Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HOSPICE AND PALLIATIVE MEDICINE

RUBENSIK, TAMARA T
Provider ID: 282128
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 910 SYCAMORE AVE STE 102
 VISTA, CA 92081-7833
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A119245
NPI: 1811200652
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

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D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Ucsd Medical Group

INTERNAL MEDICINE

EISMAN, SCOTT A

Provider ID: 259625
Board Certified Specialty: No
HEALTH EXCEL IPA INC
2023 W VISTA WAY STE B
VISTA, CA 92083-6030
Phone: (760) 230-8994
Fax: (760) 944-1309
After Hours Phone: (760)
230-8994
Provider Gender: Male
License number: G54742
NPI: 1275511420
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

SAVAGE, ROBERT T

Provider ID: 259636
Board Certified Specialty: No
HEALTH EXCEL IPA INC
2023 W VISTA WAY STE B
VISTA, CA 92083-6030
Phone: (760) 230-8994
Fax: (760) 944-1309
After Hours Phone: (760)
230-8994
Provider Gender: Male

License number: G27715
NPI: 1881694891
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

NEONATAL / PERINATAL MEDICINE

MOVAHHEDIAN, HAMID R , MD

Provider ID: 246863
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax:
After Hours Phone: (760)
631-5000
Provider Gender: Male
License number: A49253
NPI: 1619920816
Provider English Spoken: Yes
Provider Language(s) Spoken:
Faroese, Farsi
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/1
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

OBSTETRICS / GYNECOLOGY

BINDER, PRATIBHA S

Provider ID: 282168
Board Certified Specialty: No
UCSD MEDICAL GROUP
910 SYCAMORE AVE STE 102
VISTA, CA 92081-7833
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A149945
NPI: 1174758031
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LOPEZ, SANDRA

Provider ID: 77549
Board Certified Specialty: No
VISTA COMMUNITY CLNC
1000 VALE TERRACE DR
VISTA, CA 92084-5218

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D. Directorio de proveedores de atención especializada

Phone: (760) 631-5000
Fax: (858) 715-1316
After Hours Phone: (760) 631-5000
Provider Gender: Female
License number: A73316
NPI: 1962421651
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Palomar Medical Center, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-TH 8AM-8PM, F 8AM-5PM, SA 9AM-4PM
Website: www.vistacommunityclinic.org
Email:
Medical Group(s): Vista Community Clinic
IPA:

OPHTHALMOLOGY

CHEN, HEATHER
Provider ID: 276910
Board Certified Specialty: No
HEALTH EXCEL IPA INC
2067 W VISTA WAY STE 120
VISTA, CA 92083-6032
Phone: (760) 758-2020
Fax: (760) 758-1410
After Hours Phone: (760) 758-2020
Provider Gender: Female
License number: A155386
NPI: 1164881603
Provider English Spoken: Yes

Provider Language(s) Spoken: Hindi, Persian, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

GREIDER, BRADLEY W
Provider ID: 38114
Board Certified Specialty: Yes
HEALTH EXCEL IPA INC
2067 W VISTA WAY STE 120
VISTA, CA 92083-6032
Phone: (760) 758-2020
Fax: (760) 758-1410
After Hours Phone: (740) 758-2020
Provider Gender: Male
License number: G46461
NPI: 1508979006
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

ZAVERI, MAULIK S
Provider ID: 214275
Board Certified Specialty: No
HEALTH EXCEL IPA INC
2067 W VISTA WAY STE 120
VISTA, CA 92083-6032
Phone: (760) 758-2020
Fax: (760) 758-1410
After Hours Phone: (760) 758-2020
Provider Gender: Male
License number: A127841
NPI: 1780848937
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

PEDIATRICS

HOKE, EILEEN M
Provider ID: 121167
Board Certified Specialty: No
VISTA COMMUNITY CLNC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (844) 308-5003
Fax:
After Hours Phone: (844) 308-5003
Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: A62558
NPI: 1528031457
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-TH 8AM-8PM, F
8AM-5PM, SA 9AM-4PM
Website:
www.vistacommunityclinic.org
Email:
Medical Group(s): Vista
Community Clinic
IPA:

PARK, SUE A

Provider ID: 24766
Board Certified Specialty: No
VISTA COMMUNITY CLNC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax:
After Hours Phone: (760)
631-5000
Provider Gender: Female
License number: A64003
NPI: 1538176201
Provider English Spoken: Yes
Provider Language(s) Spoken:
Korean, Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-TH 8AM-8PM, F

8AM-5PM, SA 9AM-4PM
Website:
www.vistacommunityclinic.org
Email:
Medical Group(s): Vista
Community Clinic
IPA:

RAHIMI, NASSRIN

Provider ID: 24779
Board Certified Specialty: No
VISTA COMMUNITY CLNC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax:
After Hours Phone: (760)
631-5000
Provider Gender: Female
License number: A56214
NPI: 1063438166
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-TH 8AM-8PM, F
8AM-5PM, SA 9AM-4PM
Website:
www.vistacommunityclinic.org
Email:
Medical Group(s): Vista
Community Clinic
IPA: Blue Shield Promise Health
Plan Direct

RAHIMI, NASSRIN

Provider ID: 24779
Board Certified Specialty: No

IHP VISTA COMMUNITY CLINIC
VALE TERRACE
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax:
After Hours Phone: (760)
631-5000
Provider Gender: Female
License number: A56214
NPI: 1063438166
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-TH 8AM-8PM, F
8AM-5PM, SA 9AM-4PM
Website:
www.vistacommunityclinic.org
Email:
Medical Group(s): Vista
Community Clinic
IPA: Blue Shield Promise Health
Plan Direct

RAHIMI, NASSRIN

Provider ID: 257581
Board Certified Specialty: No
BLUE SHIELD PROMISE
HEALTH PLAN DIRECT
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Provider Gender: Female
License number: A56214

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1063438166
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health Plan Direct

PHYSICIANS ASSISTANT

BAZA-VARGAS, ARMANDO
Provider ID: 247016
Board Certified Specialty: No
HEALTH EXCEL IPA INC
969 S SANTA FE AVE # A
VISTA, CA 92083-6910
Phone: (760) 941-7050
Fax: (760) 941-7142
After Hours Phone: (760) 941-7050
Provider Gender: Male
License number: PA17924
NPI: 1922087253
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Health Excel Ipa Inc
CANSECO, EDILBERTO A
Provider ID: 245805
Board Certified Specialty: No
HEALTH EXCEL IPA INC
969 S SANTA FE AVE
VISTA, CA 92083-6910
Phone: (760) 941-7050
Fax: (760) 941-7142
After Hours Phone: (760) 941-7050
Provider Gender: Male
License number: PA54520
NPI: 1023546025
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

MENDOZA, SILVIA P
Provider ID: 269876
Board Certified Specialty: No
HEALTH EXCEL IPA INC
969 S SANTA FE AVE # A
VISTA, CA 92083-6910
Phone: (760) 941-7050
Fax: (760) 941-7142
After Hours Phone: (760) 941-7050
Provider Gender: Female
License number: PA17208
NPI: 1245232404
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

EGAN, SCHEREZADE Y
Provider ID: 279256
Board Certified Specialty: No
HEALTH EXCEL IPA INC
969 S SANTA FE AVE # A
VISTA, CA 92083-6910
Phone: (760) 941-7050
Fax: (760) 941-7142
After Hours Phone: (760) 941-7050
Provider Gender: Female
License number: PA58666
NPI: 1528666740

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

SUAREZ, JOSE L

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider ID: 269850
Board Certified Specialty: No
HEALTH EXCEL IPA INC
969 S SANTA FE AVE # A
VISTA, CA 92083-6910
Phone: (760) 941-7050
Fax: (760) 941-7142
After Hours Phone: (760)
941-7050
Provider Gender: Male
License number: PA17072
NPI: 1497757728
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

WALLACE, STEPHANIE C , NPA

Provider ID: 239770
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Provider Gender: Female
License number: PA19629
NPI: 1518104942
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish

Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

WILLIAMS, STEPHANIE C

Provider ID: 245716
Board Certified Specialty: No
HEALTH EXCEL IPA INC
969 S SANTA FE AVE # A
VISTA, CA 92083-6910
Phone: (760) 941-7050
Fax: (760) 941-7142
After Hours Phone: (760)
941-7050
Provider Gender: Female
License number: PA52356
NPI: 1922491521
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Health Excel Ipa Inc

RADIOLOGY

ALLEN, DERRICK R , MD

Provider ID: 269616
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (858) 888-4444
Fax: (866) 558-4329
After Hours Phone: (858)
888-4444
Provider Gender: Male
License number: A69840
NPI: 1215982970
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

DOEMENY, JOHN M

Provider ID: 269754
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (858) 888-4444
Fax: (866) 558-4329
After Hours Phone: (858)
888-4444
Provider Gender: Male
License number: G50925
NPI: 1841243912
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

MOFFIT, BRIAN J

Provider ID: 269532

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

1000 VALE TERRACE DR

VISTA, CA 92084-5218

Phone: (858) 888-4444

Fax: (866) 558-4329

After Hours Phone: (858)

888-4444

Provider Gender: Male

License number: G51551

NPI: 1508817305

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital, Scripps Mercy Hospital

Chula Vista

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

REGISTERED PHYSICAL THERAPIST

AMBROSE, CHRISTOPHER S

Provider ID: 248009

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

2067 W VISTA WAY STE 185

VISTA, CA 92083-6033

Phone: (760) 631-5888

Fax: (760) 631-5880

After Hours Phone: (760)

631-5888

Provider Gender: Male

License number: PT26311

NPI: 1114977535

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 8/125

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

SMITH, DENNIS R

Provider ID: 247478

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

2067 W VISTA WAY STE 185

VISTA, CA 92083-6033

Phone: (760) 631-5888

Fax: (760) 631-5880

After Hours Phone: (760)

631-5888

Provider Gender: Male

License number: PT22171

NPI: 1699724054

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 8/125

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

RHEUMATOLOGY

BEJKO, ETEVA

Provider ID: 281355

Board Certified Specialty: No

HEALTH EXCEL IPA INC

2023 W VISTA WAY STE H

VISTA, CA 92083-6030

Phone: (760) 724-5800

Fax: (760) 724-1617

After Hours Phone: (760)

724-5800

Provider Gender: Female

License number: A169155

NPI: 1164804431

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Tri City

Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: 18/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

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D. Directorio de proveedores de atención especializada

IPA: Health Excel Ipa Inc

SURGERY GENERAL

ARMANI, AVA

Provider ID: 282144

Board Certified Specialty: No

UCSD MEDICAL GROUP

910 SYCAMORE AVE STE 102

VISTA, CA 92081-7833

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: A118231

NPI: 1861759383

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Medical Ctr At

Ucsf, Ucsf Medical Center At

Mission Bay, Ucsf Medical

Center At Mount Zion, Ucsd La

Jolla John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

FIERER, ADAM S

Provider ID: 86667

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

2385 S MELROSE DR

VISTA, CA 92081-8788

Phone: (760) 300-3647

Fax: (858) 207-0034

After Hours Phone: (760)

300-3647

Provider Gender: Male

License number: G69685

NPI: 1205831161

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Tri City

Medical Ctr, Scripps Memorial

Hospital Encinitas, Palomar

Medical Center, Palomar Health

Downtown Campus

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

GROVE, JAY R , MD

Provider ID: 245227

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

2385 S MELROSE DR

VISTA, CA 92081-8788

Phone: (760) 300-3647

Fax: (858) 207-0034

After Hours Phone: (760)

300-3647

Provider Gender: Male

License number: A60426

NPI: 1912971334

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Pomerado

Hospital, Palomar Medical

Center, Tri City Medical Ctr,

Palomar Health Downtown

Campus, Scripps Memorial

Hospital Encinitas, Scripps Mercy

Hospital Chula Vista, Scripps

Mercy Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

HANNA, KAREN J , MD

Provider ID: 246422

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

2385 S MELROSE DR

VISTA, CA 92081-8788

Phone: (760) 300-3647

Fax: (858) 207-0034

After Hours Phone: (760)

300-3647

Provider Gender: Female

License number: G88851

NPI: 1184687337

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital Encinitas, Tri

City Medical Ctr, Palomar

Medical Center, Palomar Health

Downtown Campus

Medi-Cal Open Panel: Yes

Min/Max Age: 13/100

American Sign Language (ASL):

No

♿ Accessibility:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

E. Directorio de hospitales - Hospital general de atención aguda

ALVARADO HOSPITAL LLC

Provider ID: 170056
6655 ALVARADO RD
SAN DIEGO, CA 92120-5208
Phone: (619) 287-3270
After Hours Phone: (619) 287-3270
Accepting New Patients: No
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hospital Accreditation Status: JCAHO
Hours: M-SA 9AM-5PM
License number:
NPI: 1265468946
Website:
www.alvaradohospital.com
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes

GROSSMONT HOSPITAL

Provider ID: 170046
5555 GROSSMONT CENTER DR
LA MESA, CA 91942-3019
Phone: (619) 465-0711
After Hours Phone: (619) 465-0711
Accepting New Patients: No
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hospital Accreditation Status: JCAHO
Hours: M-SA 9AM-5PM
License number: 080000006
NPI: 1528041811

Website:
www.sharp.com/hospitals/grossmont/
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes

KINDRED HOSPITAL SAN DIEGO

Provider ID: 169663
1940 EL CAJON BLVD
SAN DIEGO, CA 92104-1005
Phone: (619) 543-4500
After Hours Phone: (619) 543-4500
Accepting New Patients: No
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hospital Accreditation Status: JCAHO
Hours: M-SA 9AM-5PM
License number:
NPI: 1992880512
Website:
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes

PALOMAR MEDICAL CENTER

Provider ID: 173011
2185 CITRACADO PKWY
ESCONDIDO, CA 92029-4159
Phone: (442) 281-5000
After Hours Phone: (442) 281-5000
Accepting New Patients: No
Min/Max Age: None

Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hospital Accreditation Status: JCAHO
Hours: M-SA 9AM-5PM
License number: 080000083
NPI: 1457321317
Website:
www.palomarhealth.org/facilities/palomar-medical-center
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes

PARADISE VALLEY HOSPITAL

Provider ID: 170057
2400 E 4TH ST
NATIONAL CITY, CA 91950-2026
Phone: (619) 470-4321
After Hours Phone: (619) 470-4321
Accepting New Patients: No
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hospital Accreditation Status: JCAHO
Hours: M-SA 9AM-5PM
License number:
NPI: 1356410351
Website:
www.paradisevalleyhospital.net
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

E. Directorio de hospitales - Hospital general de atención aguda

POMERADO HOSPITAL

Provider ID: 170052
15615 POMERADO RD
POWAY, CA 92064-2405
Phone: (858) 613-4000
After Hours Phone: (858) 613-4000
Accepting New Patients: No
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hospital Accreditation Status: JCAHO
Hours: M-SA 9AM-5PM
License number: 080000127
NPI: 1376513754
Website:
www.palomarhealth.org/facilities/palomar-poway-outpatient
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes

RADY CHILDRENS HOSPITAL SAN DIEGO

Provider ID: 171083
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 576-1700
After Hours Phone: (858) 576-1700
Accepting New Patients: No
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hospital Accreditation Status: JCAHO
Hours: M-SA 9AM-5PM
License number:

NPI: 1710065933
Website: www.rchsd.org
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes

SCRIPPS GREEN HOSPITAL

Provider ID: 171084
10666 N TORREY PINES RD
MS 220
LA JOLLA, CA 92037
Phone: (858) 455-9100
After Hours Phone: (858) 455-9100
Accepting New Patients: No
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hospital Accreditation Status: JCAHO
Hours: M-SA 9AM-5PM
License number: 080000139
NPI: 1841233780
Website:
www.scripps.org/locations/hospitals__scripps-green-hospital

American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes

SCRIPPS MEMORIAL HOSPITAL

Provider ID: 170045
9888 GENESEE AVE
LA JOLLA, CA 92037-1205
Phone: (858) 457-4123
After Hours Phone: (858) 457-4123

Accepting New Patients: No
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hospital Accreditation Status: JCAHO
Hours: M-SA 9AM-5PM
License number: 080000050
NPI: 1841277704
Website:
www.scripps.org/locations/hospitals__scripps-memorial-hospital-la-jolla
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes

SCRIPPS MEMORIAL HOSPITAL ENCINITAS

Provider ID: 170305
354 SANTA FE DR
ENCINITAS, CA 92024-5142
Phone: (760) 753-6501
After Hours Phone: (760) 753-6501
Accepting New Patients: No
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hospital Accreditation Status: JCAHO
Hours: M-SA 9AM-5PM
License number: 080000148
NPI: 1700829199
Website:
www.scripps.org/locations/hospitals__scripps-memorial-hospital-encinitas
American Sign Language (ASL): No

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E. Directorio de hospitales - Hospital general de atención aguda

Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes

SCRIPPS MERCY HOSPITAL

Provider ID: 170048
4077 5TH AVE
SAN DIEGO, CA 92103-2105
Phone: (619) 294-8111
After Hours Phone: (619) 294-8111

Accepting New Patients: No

Min/Max Age: None

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

Hospital Accreditation Status:

JCAHO

Hours: M-SA 9AM-5PM

License number:

NPI: 1659359446

Website:

www.scripps.org/locations/hospitals__scripps-mercy-hospital__scripps-mercy-hospital-san-diego
American Sign Language (ASL): No

Please contact provider for

Accessibility information

Public transportation (within 1/2 mile from Site): Yes

SCRIPPS MERCY HOSPITAL CHULA VISTA

Provider ID: 170256
435 H ST
CHULA VISTA, CA 91910-4307
Phone: (619) 691-7000
After Hours Phone: (619) 691-7000

Accepting New Patients: No

Min/Max Age: None

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

Hospital Accreditation Status:

JCAHO

Hours: M-SA 9AM-5PM

License number: 090000074

NPI: 1306161914

Website:

www.scripps.org/locations/hospitals__scripps-mercy-hospital__scripps-mercy-hospital-chula-vista
American Sign Language (ASL): No

Please contact provider for

Accessibility information

Public transportation (within 1/2 mile from Site): Yes

SHARP CHULA VISTA MED CTR

Provider ID: 170251
751 MEDICAL CENTER CT
CHULA VISTA, CA 91911-6617
Phone: (619) 502-5800

After Hours Phone: (619)

502-5800

Accepting New Patients: No

Min/Max Age: None

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

Hospital Accreditation Status:

JCAHO

Hours: M-SA 9AM-5PM

License number: 090000008

NPI: 1396728630

Website:

www.sharp.com/hospitals/chula-vista/
American Sign Language (ASL): No

Please contact provider for

Accessibility information

Public transportation (within 1/2 mile from Site): Yes

SHARP CORONADO HOSP AND HEALTHCARE CTR

Provider ID: 170252
250 PROSPECT PL
CORONADO, CA 92118-1943
Phone: (619) 522-3600

After Hours Phone: (619)

522-3600

Accepting New Patients: No

Min/Max Age: None

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

Hospital Accreditation Status:

JCAHO

Hours: M-SA 9AM-5PM

License number:

NPI: 1154304475

Website:

www.sharp.com/hospitals/coronado/
American Sign Language (ASL): No

Please contact provider for

Accessibility information

Public transportation (within 1/2 mile from Site): Yes

SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS

Provider ID: 170054
3003 HEALTH CENTER DR
SAN DIEGO, CA 92123-2700
Phone: (858) 939-3400

After Hours Phone: (858)

939-3400

Accepting New Patients: No

Min/Max Age: None

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

Hospital Accreditation Status:

JCAHO

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E. Directorio de hospitales - Hospital general de atención aguda

Hours: M-SA 9AM-5PM
 License number: 080000039
 NPI: 1407839921
 Website:
 www.specialtyobstetrics.com
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Public transportation (within 1/2
 mile from Site): Yes

SHARP MEMORIAL HOSPITAL

Provider ID: 170047
 7901 FROST ST
 SAN DIEGO, CA 92123-2701
 Phone: (858) 499-4352
 After Hours Phone: (858)
 499-4352
 Accepting New Patients: No
 Min/Max Age: None
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Cultural Competency: No
 Hospital Accreditation Status:
 JCAHO
 Hours: M-SA 9AM-5PM
 License number:
 NPI: 1407839921
 Website:
 www.sharp.com/hospitals/memor
 ial/
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Public transportation (within 1/2
 mile from Site): Yes

TRI CITY MEDICAL CTR

Provider ID: 170049
 4002 VISTA WAY
 OCEANSIDE, CA 92056-4506

Phone: (760) 724-8411
 After Hours Phone: (760)
 724-8411
 Accepting New Patients: No
 Min/Max Age: None
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Cultural Competency: No
 Hospital Accreditation Status:
 JCAHO
 Hours: M-SA 9AM-5PM
 License number:
 NPI: 1801861190
 Website: www.tricitymed.org
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Public transportation (within 1/2
 mile from Site): Yes

UCSD LA JOLLA JOHN SALLY THORNTON

Provider ID: 170053
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-7000
 After Hours Phone: (858)
 657-7000
 Accepting New Patients: No
 Min/Max Age: None
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Cultural Competency: No
 Hospital Accreditation Status:
 JCAHO
 Hours: M-SA 9AM-5PM
 License number: 090000101
 NPI: 1497021265
 Website:
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Public transportation (within 1/2

mile from Site): Yes

UCSD MEDICAL CTR

Provider ID: 170051
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-6222
 After Hours Phone: (619)
 543-6222
 Accepting New Patients: No
 Min/Max Age: None
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Cultural Competency: No
 Hospital Accreditation Status:
 JCAHO
 Hours: M-SA 9AM-5PM
 License number: 090000101
 NPI: 1184722779
 Website:
[https://health.ucsd.edu/locations/
 pages/hillcrest.aspx](https://health.ucsd.edu/locations/pages/hillcrest.aspx)
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Public transportation (within 1/2
 mile from Site): Yes

VIBRA HOSPITAL OF SAN DIEGO

Provider ID: 170165
 555 WASHINGTON ST
 SAN DIEGO, CA 92103-2289
 Phone: (619) 260-8300
 After Hours Phone: (619)
 260-8300
 Accepting New Patients: No
 Min/Max Age: None
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Cultural Competency: No
 Hospital Accreditation Status:
 JCAHO
 Hours: M-SA 9AM-5PM

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E. Directorio de hospitales - Hospital general de atención aguda

License number: 090000404

NPI: 1639172133

Website:

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Public transportation (within 1/2 mile from Site): Yes

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F. Centros de enfermería especializada

CHULA VISTA

BIRCH PATRICK CONV CTR

Provider ID: 171998
751 MEDICAL CENTER CT
CHULA VISTA, CA 91911-6617
Phone: (619) 502-3600
Fax: (619) 502-5835
After Hours Phone: (619)
502-3600

Accepting New Patients: No
Hours: M-SA 9AM-5PM
License number:

NPI: 1538142369

Website:

www.sharp.com/hospitals/chula-vista/departments/skilled-nursing.cfm

Credentials and/or certifications:

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

American Sign Language (ASL):

No

♿ Accessibility: W

Public transportation (within 1/2 mile from Site): Yes

SOUTH BAY POST ACUTE CARE

Provider ID: 394308
553 F ST
CHULA VISTA, CA 91910-3515
Phone: (619) 426-8611
Fax: (619) 427-0780
After Hours Phone: (619)
426-8611

Accepting New Patients: No

Hours: M-SA 9AM-5PM

License number: 090000120

NPI: 1376946277

Website:

<http://southbaypostacute.com>

Credentials and/or certifications:

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

American Sign Language (ASL):

No

♿ Accessibility: W

Public transportation (within 1/2 mile from Site): Yes

CORONADO

VILLA CORONADO CONVALESCENT

Provider ID: 172644
233 PROSPECT PL
CORONADO, CA 92118-1967
Phone: (619) 552-3900

Fax:

After Hours Phone: (619)

552-3900

Accepting New Patients: No

Hours: M-SA 9AM-5PM

License number:

NPI: 1184607418

Website:

www.sharp.com/hospitals/coronado/departments/long-term-care.cfm

Credentials and/or certifications:

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

American Sign Language (ASL):

No

♿ Accessibility:

Public transportation (within 1/2 mile from Site): Yes

EL CAJON

AVOCADO POST ACUTE

Provider ID: 171985
510 E WASHINGTON AVE
EL CAJON, CA 92020-5324

Phone: (619) 440-1211

Fax: (619) 440-4956

After Hours Phone: (619)
440-1211

Accepting New Patients: No

Hours: M-SA 9AM-5PM

License number: 090000117

NPI: 1568484517

Website:

www.avocadopostacute.com

Credentials and/or certifications:

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

American Sign Language (ASL):

No

♿ Accessibility: W

Public transportation (within 1/2 mile from Site): Yes

COTTONWOOD CANYON HEALTHCARE CENTER

Provider ID: 171983
1391 E MADISON AVE
EL CAJON, CA 92021-8568
Phone: (619) 444-1107

Fax: (619) 444-1403

After Hours Phone: (619)

444-1107

Accepting New Patients: No

Hours: M-SU 12AM-11:59PM

License number:

NPI: 1013953199

Website:

<http://cottonwoodcanyonhc.com>

Credentials and/or certifications:

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

American Sign Language (ASL):

No

♿ Accessibility: P, R, W

Public transportation (within 1/2 mile from Site): Yes

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F. Centros de enfermería especializada

COUNTRY HILLS HEALTH CARE CENTER

Provider ID: 416853
1580 BROADWAY
EL CAJON, CA 92021-5124
Phone: (619) 441-8745
Fax: (619) 442-2553
After Hours Phone: (619) 441-8745
Accepting New Patients: No
Hours: M-SU 12AM-11:59PM
License number: 08000361
NPI: 1700973963
Website: www.countryhills.com
Credentials and/or certifications:
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language,
Arabic, Korean, Spanish,
Tagalog, Farsi, Vietnamese,
Mandarin
Cultural Competency: No
American Sign Language (ASL):
Yes
♿ *Accessibility:* P, R
Public transportation (within 1/2 mile from Site): Yes

MAGNOLIA POST ACUTE CARE

Provider ID: 380518
635 S MAGNOLIA AVE
EL CAJON, CA 92020-6012
Phone: (616) 442-8826
Fax: (619) 442-0288
After Hours Phone: (616) 442-8826
Accepting New Patients: No
Hours: M-SU 8AM-6PM
License number: 090000072
NPI: 1316340227
Website:
Credentials and/or certifications:
Site English Spoken: Yes

Site Language(s) Spoken:
American Sign Language,
Korean, Khmer, Spanish
Cultural Competency: No
American Sign Language (ASL):
Yes
♿ *Accessibility:* P, R, W
Public transportation (within 1/2 mile from Site): Yes

PARKSIDE HEALTH AND WELLNESS CENTER

Provider ID: 349923
444 W LEXINGTON AVE
EL CAJON, CA 92020-4416
Phone: (619) 442-7744
Fax: (619) 447-0641
After Hours Phone: (619) 442-7744
Accepting New Patients: No
Hours: M-SU 12AM-11:59PM
License number: 090000068
NPI: 1447653340
Website: http://parksidehealth.net
Credentials and/or certifications:
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
American Sign Language (ASL):
No
♿ *Accessibility:* P, EB, IB, E, R,
T, W
Public transportation (within 1/2 mile from Site): Yes

SAN DIEGO POST ACUTE CENTER

Provider ID: 173508
1201 S ORANGE AVE
EL CAJON, CA 92020-7521
Phone: (619) 441-1988
Fax: (619) 441-7416
After Hours Phone: (619) 441-1988
Accepting New Patients: No

Hours: M-SA 9AM-5PM
License number:
NPI: 1285061085
Website: http://sdpostacute.com
Credentials and/or certifications:
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
American Sign Language (ASL):
No
♿ *Accessibility:* W
Public transportation (within 1/2 mile from Site): Yes

SOMERSET SUBACUTE AND CARE

Provider ID: 348526
151 CLAYDELLE AVE
EL CAJON, CA 92020-4505
Phone: (619) 442-0245
Fax: (614) 423-3631
After Hours Phone: (619) 442-0245
Accepting New Patients: No
Hours: M-SU 12AM-11:59PM
License number: 090000027
NPI: 1073916987
Website:
http://somensubacute.com
Credentials and/or certifications:
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
American Sign Language (ASL):
No
♿ *Accessibility:* W
Public transportation (within 1/2 mile from Site): Yes

THE BRADLEY COURT

Provider ID: 419158
675 E BRADLEY AVE
EL CAJON, CA 92021-3110

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F. Centros de enfermería especializada

Phone: (619) 448-6633
 Fax: (619) 448-5462
 After Hours Phone: (619) 448-6633
 Accepting New Patients: No
 Hours: M-SU 12AM-11:59PM
 License number:
 NPI: 1629129267
 Website:
 Credentials and/or certifications:
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Tagalog, Spanish
 Cultural Competency: No
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Public transportation (within 1/2
 mile from Site): Yes

VICTORIA POST ACUTE CARE

Provider ID: 387720
 654 S ANZA ST
 EL CAJON, CA 92020-6602
 Phone: (619) 440-5005
 Fax: (619) 442-8271
 After Hours Phone: (619) 440-5005
 Accepting New Patients: No
 Hours: M-SU 12AM-11:59PM
 License number: 090000025
 NPI: 1326441239
 Website:
<http://victoriapostacute.com>
 Credentials and/or certifications:
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Cultural Competency: No
 American Sign Language (ASL):
 No
 ♿ Accessibility: P, EB, IB, E, R, T
 Public transportation (within 1/2
 mile from Site): Yes

VICTORIA POST ACUTE CARE

Provider ID: 387720
 654 S ANZA ST
 EL CAJON, CA 92020-6602
 Phone: (619) 440-5005
 Fax: (619) 442-8271
 After Hours Phone: (619) 440-5005
 Accepting New Patients: No
 Hours: M-SU 12AM-11:59PM
 License number: 090000025
 NPI: 1326441239
 Website:
www.victoriapostacute.com
 Credentials and/or certifications:
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Cultural Competency: No
 American Sign Language (ASL):
 No
 ♿ Accessibility: P, EB, IB, E, R, T
 Public transportation (within 1/2
 mile from Site): Yes

VILLA LAS PALMAS HEALTHCARE CTR

Provider ID: 172020
 622 S ANZA ST
 EL CAJON, CA 92020-6602
 Phone: (619) 442-0544
 Fax: (619) 442-6177
 After Hours Phone: (619) 442-0544
 Accepting New Patients: No
 Hours: M-SA 9AM-5PM
 License number:
 NPI: 1023048295
 Website:
<http://villalaspalmascares.com>
 Credentials and/or certifications:
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Cultural Competency: No
 American Sign Language (ASL):
 No
 ♿ Accessibility: W

Public transportation (within 1/2
 mile from Site): Yes

ENCINITAS

AVIARA HEALTHCARE CENTER

Provider ID: 171995
 944 REGAL RD
 ENCINITAS, CA 92024-4634
 Phone: (760) 944-0331
 Fax: (760) 634-1337
 After Hours Phone: (760) 944-0331
 Accepting New Patients: No
 Hours: M-SA 9AM-5PM
 License number:
 NPI: 1518146620
 Website:
<http://aviarahealthcare.com>
 Credentials and/or certifications:
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Tagalog, Spanish
 Cultural Competency: No
 American Sign Language (ASL):
 No
 ♿ Accessibility: P, R, W
 Public transportation (within 1/2
 mile from Site): Yes

ENCINITAS NURSING AND REHAB CTR

Provider ID: 171977
 900 SANTA FE DR
 ENCINITAS, CA 92024-3919
 Phone: (760) 753-6423
 Fax: (760) 753-4979
 After Hours Phone: (760) 753-6423
 Accepting New Patients: No
 Hours: M-SU 12AM-11:59PM
 License number:
 NPI: 1265415749

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F. Centros de enfermería especializada

Website:
<https://www.covenantcare.com/stores/encinitas-nursing-and-rehabilitation-center/>

Credentials and/or certifications:
Site English Spoken: Yes
Site Language(s) Spoken:
 Russian, Spanish, Tagalog
Cultural Competency: No
American Sign Language (ASL):
 No

♻️ *Accessibility:* P, EB, IB, W
Public transportation (within 1/2 mile from Site): Yes

ESCONDIDO

ESCONDIDO CARE CENTER

Provider ID: 172027
 421 E MISSION AVE
 ESCONDIDO, CA 92025-1909
Phone: (760) 747-0430
Fax: (760) 747-0569
After Hours Phone: (760) 747-0430

Accepting New Patients: No
Hours: M-SA 9AM-5PM
License number:
 NPI: 1588660765

Website:
<http://escondidopostacute.com>
Credentials and/or certifications:
Site English Spoken: Yes
Site Language(s) Spoken:
 Tagalog, Spanish
Cultural Competency: No
American Sign Language (ASL):
 No

♻️ *Accessibility:* P, EB, R
Public transportation (within 1/2 mile from Site): Yes

LIFE CARE CENTER OF ESCONDIDO

Provider ID: 172010

1980 FELICITA RD
 ESCONDIDO, CA 92025-5922
Phone: (760) 741-6109
Fax: (760) 741-5237

After Hours Phone: (760) 741-6109
Accepting New Patients: No
Hours: M-SA 9AM-5PM
License number:

NPI: 1386681286
Website:
<http://lifecarecenterofescondido.com>

Credentials and/or certifications:
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
American Sign Language (ASL):
 No

♻️ *Accessibility:* W
Public transportation (within 1/2 mile from Site): No

PALOMAR HEIGHTS CARE CTR

Provider ID: 170055
 1260 E OHIO AVE
 ESCONDIDO, CA 92027-3054
Phone: (760) 746-1100
Fax: (760) 746-1201

After Hours Phone: (760) 746-1100
Accepting New Patients: No
Hours: M-SU 12AM-11:59PM
License number:

NPI: 1255337440
Website:
<http://palomarheightsrehab.com>

Credentials and/or certifications:
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Tagalog
Cultural Competency: No
American Sign Language (ASL):
 No

♻️ *Accessibility:* P, EB, IB, R, W
Public transportation (within 1/2 mile from Site): Yes

PALOMAR VISTA HEALTHCARE CTR

Provider ID: 171988
 201 N FIG ST
 ESCONDIDO, CA 92025-3416
Phone: (760) 746-0303
Fax: (760) 738-1749

After Hours Phone: (760) 746-0303
Accepting New Patients: No
Hours: M-F,SU 12AM-11:59PM,
 SA 9AM-5PM
License number:

NPI: 1861491490
Website: <http://palomarvista.com>

Credentials and/or certifications:
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
American Sign Language (ASL):
 No

♻️ *Accessibility:*
Public transportation (within 1/2 mile from Site): Yes

VALLE VISTA POST ACUTE

Provider ID: 171968
 1025 W 2ND AVE
 ESCONDIDO, CA 92025-3839
Phone: (760) 745-1842
Fax: (760) 745-4346

After Hours Phone: (760) 745-1842
Accepting New Patients: No
Hours: M-SU 12AM-11:59PM
License number:

NPI: 1659369262
Website:
<https://www.covenantcare.com/stores/valle-vista-convalescent-hospital/>

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F. Centros de enfermería especializada

Credentials and/or certifications: Provider ID: 172007
Site English Spoken: Yes 7800 PARKWAY DR
Site Language(s) Spoken: LA MESA, CA 91942-2001
 Tagalog, Spanish *Phone:* (619) 460-2330
Cultural Competency: No *Fax:* (619) 460-5821
American Sign Language (ASL): After Hours Phone: (619)
 No 460-2330
 ♿ *Accessibility:* P, EB, IB, R, T, Accepting New Patients: No
 W Hours: M-SU 12AM-11:59PM
Public transportation (within 1/2 License number: 080000066
 mile from Site): Yes *NPI:* 1356345706
Website:

LA JOLLA

LA JOLLA NURSING AND REHAB CTR

Provider ID: 171975
 2552 TORREY PINES RD
 LA JOLLA, CA 92037-3432
Phone: (858) 453-5810
Fax: (858) 452-4301
After Hours Phone: (858)
 453-5810
Accepting New Patients: No
 Hours: M-SA 9AM-5PM
License number:
NPI: 1457486078
Website:

<https://www.covenantcare.com/stores/la-jolla-nursing-and-rehabilitation-center/>

Credentials and/or certifications:
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
American Sign Language (ASL):
 No
 ♿ *Accessibility:* W
Public transportation (within 1/2 mile from Site): Yes

LA MESA

ARBOR HILLS NURSING CENTER

Provider ID: 172007
 7800 PARKWAY DR
 LA MESA, CA 91942-2001
Phone: (619) 460-2330
Fax: (619) 460-5821
After Hours Phone: (619)
 460-2330
Accepting New Patients: No
 Hours: M-SU 12AM-11:59PM
License number: 080000066
NPI: 1356345706
Website:

www.lifegen.net/arborhills/
Credentials and/or certifications:
Site English Spoken: Yes
Site Language(s) Spoken:
 Tagalog, Spanish, Russian
Cultural Competency: No
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Public transportation (within 1/2 mile from Site): Yes

CARE MERIDIAN LA MESA

Provider ID: 173379
 5640 AZTEC DR
 LA MESA, CA 91942-1948
Phone: (619) 403-5267
Fax: (619) 465-0019
After Hours Phone: (619)
 403-5267
Accepting New Patients: No
 Hours: M-SA 9AM-5PM
License number:
NPI: 1235404674
Website:

<https://www.neurorestorative.com/state-location/la-mesa/>
Credentials and/or certifications:
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
American Sign Language (ASL):
 No

♿ *Accessibility:*
Public transportation (within 1/2 mile from Site): Yes

COMMUNITY CARE CENTER

Provider ID: 171984
 8665 LA MESA BLVD
 LA MESA, CA 91942-9503
Phone: (619) 465-0702
Fax: (619) 828-1782
After Hours Phone: (619)
 465-0702
Accepting New Patients: No
 Hours: M-SA 9AM-5PM
License number: 090000033
NPI: 1225028327
Website:
www.communitycarectr.com
Credentials and/or certifications:
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Tagalog
Cultural Competency: No
American Sign Language (ASL):
 No
 ♿ *Accessibility:* W
Public transportation (within 1/2 mile from Site): Yes

COUNTRY MANOR LA MESA HEALTHCARE CENTER

Provider ID: 172023
 5696 LAKE MURRAY BLVD
 LA MESA, CA 91942-1929
Phone: (619) 460-7871
Fax: (619) 460-4810
After Hours Phone: (619)
 460-7871
Accepting New Patients: No
 Hours: M-SA 9AM-5PM
License number: 080000020
NPI: 1457345001
Website:
Credentials and/or certifications:
Site English Spoken: Yes

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F. Centros de enfermería especializada

Site Language(s) Spoken:
Cultural Competency: No
American Sign Language (ASL):
No
♿ *Accessibility:* W
Public transportation (within 1/2 mile from Site): Yes

GROSSMONT HOSPITAL DP SNF

Provider ID: 172643
5555 GROSSMONT CENTER DR
LA MESA, CA 91942-3019
Phone: (619) 740-4110
Fax:
After Hours Phone: (619) 740-4110
Accepting New Patients: No
Hours: M-SA 9AM-5PM
License number:
NPI: 1417930249
Website:
www.sharp.com/hospitals/grossmont/departments/skilled-nursing.cfm
Credentials and/or certifications:
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
American Sign Language (ASL):
No
♿ *Accessibility:* W
Public transportation (within 1/2 mile from Site): Yes

GROSSMONT POST ACUTE CARE

Provider ID: 310488
8787 CENTER DR
LA MESA, CA 91942-3034
Phone: (619) 460-4444
Fax: (619) 713-5116
After Hours Phone: (619) 460-4444

Accepting New Patients: No
Hours: M-SA 9AM-5PM
License number: 080000024
NPI: 1689077588
Website:
<http://grossmontpostacute.com>
Credentials and/or certifications:
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
American Sign Language (ASL):
No
♿ *Accessibility:* W
Public transportation (within 1/2 mile from Site): Yes

LA MESA HEALTHCARE CTR

Provider ID: 172022
3780 MASSACHUSETTS AVE
LA MESA, CA 91941-7638
Phone: (619) 465-1313
Fax: (619) 465-8429
After Hours Phone: (619) 465-1313
Accepting New Patients: No
Hours: M-SA 9AM-5PM
License number:
NPI: 1003852666
Website:
<http://lamesahealthcare.com>
Credentials and/or certifications:
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
American Sign Language (ASL):
No
♿ *Accessibility:* W
Public transportation (within 1/2 mile from Site): Yes

PARKWAY HILLS NURSING & REHAB

Provider ID: 417047
7760 PARKWAY DR
LA MESA, CA 91942-2028

Phone: (619) 469-0124
Fax: (619) 828-7654
After Hours Phone: (619) 469-0124
Accepting New Patients: No
Hours: M-SU 12AM-11:59PM
License number: 080000053
NPI: 1174926448
Website:
Credentials and/or certifications:
Site English Spoken: Yes
Site Language(s) Spoken: Farsi, Spanish, Tagalog
Cultural Competency: No
American Sign Language (ASL):
No
♿ *Accessibility:* P, EB, IB, R
Public transportation (within 1/2 mile from Site): Yes

LEMON GROVE

BELLA VISTA HEALTH CENTER

Provider ID: 419062
7922 PALM ST
LEMON GROVE, CA 91945-2956
Phone: (619) 644-1000
Fax: (619) 797-2920
After Hours Phone: (619) 644-1000
Accepting New Patients: No
Hours: M-SA 9AM-5PM
License number: 090000142
NPI: 1760709687
Website:
www.bellavistahealth.com
Credentials and/or certifications:
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
American Sign Language (ASL):
No
♿ *Accessibility:*

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F. Centros de enfermería especializada

Public transportation (within 1/2 mile from Site): Yes

LEMON GROVE CARE AND REHAB CTR

Provider ID: 172013

8351 BROADWAY
LEMON GROVE, CA
91945-2009

Phone: (619) 463-0294

Fax: (619) 461-1064

After Hours Phone: (619)
463-0294

Accepting New Patients: No

Hours: M-SA 9AM-5PM

License number:

NPI: 1336134204

Website:

<http://lemongrovecare.com>

Credentials and/or certifications:

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

American Sign Language (ASL):

No

♿ Accessibility: W

Public transportation (within 1/2 mile from Site): Yes

NATIONAL CITY

CASTLE MANOR NURSING AND REHABILITATION CTR

Provider ID: 171978

541 S V AVE
NATIONAL CITY, CA
91950-2828

Phone: (619) 791-7900

Fax: (619) 791-7980

After Hours Phone: (619)
791-7900

Accepting New Patients: No

Hours: M-SA 9AM-5PM

License number: 090000294

NPI: 1497759856

Website:

www.lifegen.net/castlemanor/index.html

Credentials and/or certifications:

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

American Sign Language (ASL):
No

♿ Accessibility:

Public transportation (within 1/2 mile from Site): Yes

FRIENDSHIP MANOR NURSING AND REHABILITATION CTR

Provider ID: 171973

902 EUCLID AVE
NATIONAL CITY, CA
91950-3808

Phone: (619) 791-7700

Fax: (619) 791-7791

After Hours Phone: (619)

791-7700

Accepting New Patients: No

Hours: M-SA 9AM-5PM

License number: 090000049

NPI: 1235133687

Website:

www.lifegen.net/friendshipmanor/

Credentials and/or certifications:

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

American Sign Language (ASL):

No

♿ Accessibility:

Public transportation (within 1/2 mile from Site): Yes

PARADISE VALLEY HEALTH CARE CENTER

Provider ID: 171106

2575 E 8TH ST

NATIONAL CITY, CA

91950-2913

Phone: (619) 470-6700

Fax: (619) 470-0404

After Hours Phone: (619)

470-6700

Accepting New Patients: No

Hours: M-SA 9AM-5PM

License number: 090000141

NPI: 1275513293

Website: <http://pvhcc.com>

Credentials and/or certifications:

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

American Sign Language (ASL):
No

♿ Accessibility: W

Public transportation (within 1/2 mile from Site): Yes

WINDSOR GARDENS CONV CTR OF SAN DIEGO

Provider ID: 172011

220 E 24TH ST
NATIONAL CITY, CA
91950-6705

Phone: (619) 474-6741

Fax: (619) 474-1925

After Hours Phone: (619)

474-6741

Accepting New Patients: No

Hours: M-SU 12AM-11:59PM

License number: 090000035

NPI: 1730176538

Website: www.windsorcare.com

Credentials and/or certifications:

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

American Sign Language (ASL):
No

♿ Accessibility: P, R, W

Public transportation (within 1/2 mile from Site): Yes

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F. Centros de enfermería especializada

OCEANSIDE

LA PALOMA HEALTHCARE CTR

Provider ID: 172021
3232 THUNDER DR
OCEANSIDE, CA 92056-4447
Phone: (760) 724-2193
Fax: (714) 964-2137
After Hours Phone: (760)
724-2193

Accepting New Patients: No
Hours: M-SU 12AM-11:59PM
License number:

NPI: 1265462436

Website:

www.lapalomahealthcare.com

Credentials and/or certifications:

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Armenian, Korean,
Tagalog

Cultural Competency: No

American Sign Language (ASL):

No

♿ Accessibility: P, R, W

Public transportation (within 1/2
mile from Site): Yes

POWAY

BOULDER CREEK POST ACUTE

Provider ID: 276987
12696 MONTE VISTA RD
POWAY, CA 92064-2500
Phone: (858) 487-6242
Fax:

After Hours Phone: (858)
487-6242

Accepting New Patients: No

Hours: M-SA 9AM-5PM

License number: 080000251

NPI: 1073902672

Website:

<http://boulder creekpa.com>

Credentials and/or certifications:

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

American Sign Language (ASL):
No

♿ Accessibility:

Public transportation (within 1/2
mile from Site): Yes

POWAY HEALTHCARE CENTER

Provider ID: 171989
15632 POMERADO RD
POWAY, CA 92064-2406
Phone: (858) 485-5153

Fax: (858) 485-7694

After Hours Phone: (858)

485-5153

Accepting New Patients: No

Hours: M-SU 12AM-11:59PM

License number:

NPI: 1407035512

Website: <http://powaycare.com>

Credentials and/or certifications:

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

American Sign Language (ASL):
No

♿ Accessibility: P, R, W

Public transportation (within 1/2
mile from Site): Yes

VILLA POMERADO

Provider ID: 172642
15615 POMERADO RD
POWAY, CA 92064-2405
Phone: (858) 613-4545

Fax:

After Hours Phone: (858)

613-4545

Accepting New Patients: No

Hours: M-SA 9AM-5PM

License number:

NPI: 1619947090

Website:

www.palomarhealth.org/skilled-nursing/villa-pomerado

Credentials and/or certifications:

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

American Sign Language (ASL):
No

♿ Accessibility: W

Public transportation (within 1/2
mile from Site): Yes

SAN DIEGO

ACCESS TO INDEPENDENCE

Provider ID: 417267
8885 RIO SAN DIEGO DR STE
131

SAN DIEGO, CA 92108-1625

Phone: (619) 293-3500

Fax: (619) 704-2054

After Hours Phone: (619)

293-3500

Accepting New Patients: No

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

9AM-5PM

License number:

NPI: 1083039861

Website:

Credentials and/or certifications:

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

American Sign Language (ASL):
No

♿ Accessibility:

Public transportation (within 1/2
mile from Site): Yes

ARROYO VISTA NURSING CTR

Provider ID: 172028

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F. Centros de enfermería especializada

3022 45TH ST
 SAN DIEGO, CA 92105-4302
 Phone: (619) 283-5855
 Fax: (619) 284-6327
 After Hours Phone: (619)
 283-5855
 Accepting New Patients: No
 Hours: M-SU 9AM-5PM
 License number:
 NPI: 1487640066
 Website:
<http://arroyovistacare.com>
 Credentials and/or certifications:
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Mandarin, Spanish, Vietnamese,
 Arabic, Tagalog
 Cultural Competency: No
 American Sign Language (ASL):
 No
 ♿ Accessibility: P, R, W
 Public transportation (within 1/2
 mile from Site): Yes

BALBOA NURSING AND REHAB CTR

Provider ID: 416840
 3520 4TH AVE
 SAN DIEGO, CA 92103-4913
 Phone: (619) 291-5270
 Fax: (619) 291-1671
 After Hours Phone: (619)
 291-5270
 Accepting New Patients: No
 Hours: M-SU 12AM-11:59PM
 License number: 090000057
 NPI: 1578521274
 Website: <http://balboahc.com>
 Credentials and/or certifications:
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Mandarin, Spanish, Tagalog,
 Vietnamese
 Cultural Competency: No
 American Sign Language (ASL):

No
 ♿ Accessibility: P, EB, IB, R
 Public transportation (within 1/2
 mile from Site): Yes

CARMEL MOUNTAIN REHAB AND HEALTHCARE CTR

Provider ID: 171971
 11895 AVENUE OF INDUSTRY
 SAN DIEGO, CA 92128-3423
 Phone: (858) 673-0101
 Fax: (858) 673-8320
 After Hours Phone: (858)
 673-0101
 Accepting New Patients: No
 Hours: M-SA 9AM-5PM
 License number:
 NPI: 1083727093
 Website:
<http://carmelmountain.net>
 Credentials and/or certifications:
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Tagalog, Armenian, Mandarin,
 Spanish, Russian, Korean,
 Vietnamese
 Cultural Competency: No
 American Sign Language (ASL):
 No
 ♿ Accessibility: P, EB, IB, R, T,
 W
 Public transportation (within 1/2
 mile from Site): Yes

JACOB HEALTH CARE CENTER LLC

Provider ID: 172617
 4075 54TH ST
 SAN DIEGO, CA 92105-2301
 Phone: (619) 582-5168
 Fax: (619) 325-0194
 After Hours Phone: (619)
 582-5168
 Accepting New Patients: No
 Hours: M-SU 12AM-11:59PM

License number: 090000093
 NPI: 1881684900
 Website:
www.jacobhealthcare.com
 Credentials and/or certifications:
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Tagalog, Spanish
 Cultural Competency: No
 American Sign Language (ASL):
 No
 ♿ Accessibility: P, EB, IB, R, W
 Public transportation (within 1/2
 mile from Site): Yes

MISSION HILLS POST ACUTE CARE

Provider ID: 339053
 3680 REYNARD WAY
 SAN DIEGO, CA 92103-3847
 Phone: (619) 297-4484
 Fax: (855) 214-6992
 After Hours Phone: (619)
 297-4484
 Accepting New Patients: No
 Hours: M-SU 12AM-11:59PM
 License number: 090000032
 NPI: 1669875563
 Website:
<http://missionhillspostacute.com>
 Credentials and/or certifications:
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Tagalog, Spanish
 Cultural Competency: No
 American Sign Language (ASL):
 No
 ♿ Accessibility: P, E, R, T, W
 Public transportation (within 1/2
 mile from Site): Yes

RADY CHILDRENS CONVALESCENT HOSPITAL

Provider ID: 172200
 8022 BIRMINGHAM DR

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F. Centros de enfermería especializada

SAN DIEGO, CA 92123-2707

Phone: (858) 966-5833

Fax: (858) 966-8558

After Hours Phone: (858)

966-5833

Accepting New Patients: No

Hours: M-SA 9AM-5PM

License number:

NPI: 1992881478

Website: www.rchsd.org

Credentials and/or certifications:

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

American Sign Language (ASL):

No

♿ Accessibility: W

Public transportation (within 1/2 mile from Site): Yes

REO VISTA HEALTHCARE CTR

Provider ID: 171993

6061 BANBURY ST

SAN DIEGO, CA 92139-3624

Phone: (619) 475-2211

Fax: (619) 479-9126

After Hours Phone: (619)

475-2211

Accepting New Patients: No

Hours: M-SA 9AM-5PM

License number:

NPI: 1255499174

Website: <http://reovista.com>

Credentials and/or certifications:

Site English Spoken: Yes

Site Language(s) Spoken:

Tagalog, Spanish

Cultural Competency: No

American Sign Language (ASL):

No

♿ Accessibility: P, R, W

Public transportation (within 1/2 mile from Site): Yes

SAN DIEGO HEALTHCARE CENTER

Provider ID: 171991

2828 MEADOW LARK DR

SAN DIEGO, CA 92123-2710

Phone: (858) 277-6460

Fax: (858) 277-6004

After Hours Phone: (858)

277-6460

Accepting New Patients: No

Hours: M-SA 9AM-5PM

License number:

NPI: 1003098906

Website:

Credentials and/or certifications:

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

American Sign Language (ASL):

No

♿ Accessibility: W

Public transportation (within 1/2 mile from Site): Yes

UNIVERSITY CARE CENTER

Provider ID: 172024

5602 UNIVERSITY AVE

SAN DIEGO, CA 92105-2308

Phone: (619) 583-1993

Fax: (619) 583-1362

After Hours Phone: (619)

583-1993

Accepting New Patients: No

Hours: M-SU 12AM-11:59PM

License number:

NPI: 1871522672

Website:

<http://universitycarecenter.com>

Credentials and/or certifications:

Site English Spoken: Yes

Site Language(s) Spoken:

Tagalog, Mandarin, Russian,

Vietnamese, Farsi, Spanish

Cultural Competency: No

American Sign Language (ASL):

No

♿ Accessibility: P, R, W

Public transportation (within 1/2 mile from Site): Yes

VILLA RANCHO BERNARDO CARE CENTER

Provider ID: 172009

15720 BERNARDO CENTER DR

SAN DIEGO, CA 92127-5861

Phone: (858) 672-3900

Fax: (858) 672-9247

After Hours Phone: (858)

672-3900

Accepting New Patients: No

Hours: M-SA 9AM-5PM

License number:

NPI: 1518063437

Website:

www.villaranchobernardo.com

Credentials and/or certifications:

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

American Sign Language (ASL):

No

♿ Accessibility: P, R

Public transportation (within 1/2 mile from Site): Yes

WINDSOR GARDENS CONV AND REHAB OF GOLDEN HILL

Provider ID: 172012

1201 34TH ST

SAN DIEGO, CA 92102-2416

Phone: (619) 232-2946

Fax: (310) 595-3529

After Hours Phone: (619)

232-2946

Accepting New Patients: No

Hours: M-SU 12AM-11:59PM

License number: 090000052

NPI: 1811963028

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F. Centros de enfermería especializada

Website:
<https://windsorgoldenhill.com>
Credentials and/or certifications:
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Tagalog
Cultural Competency: No
American Sign Language (ASL):
 No
 ♿ *Accessibility:* P, EB, IB, R, W
Public transportation (within 1/2 mile from Site): Yes

SANTEE

STANFORD COURT SKILLED NURSING AND REHAB CENTER

Provider ID: 171994
 8778 CUYAMACA ST
 SANTEE, CA 92071-4255
Phone: (619) 449-5555
Fax: (619) 449-4948
After Hours Phone: (619) 449-5555
Accepting New Patients: No
Hours: M-SU 8AM-5PM
License number: 080000299
NPI: 1184628554
Website:
www.lifegen.net/stanfordcourt/
Credentials and/or certifications:
Site English Spoken: Yes
Site Language(s) Spoken:
 Tagalog, Spanish
Cultural Competency: No
American Sign Language (ASL):
 No
 ♿ *Accessibility:* P, EB, IB, E, R, T
Public transportation (within 1/2 mile from Site): Yes

SPRING VALLEY

MOUNT MIGUEL COVENANT

VILLAGE HEALTH FAC
Provider ID: 171969
 325 KEMPTON ST
 SPRING VALLEY, CA
 91977-5810
Phone: (619) 931-1151
Fax: (224) 233-1397
After Hours Phone: (619) 931-1151
Accepting New Patients: No
Hours: M-SU 12AM-11:59PM
License number:
NPI: 1649375403
Website:
covivingmountmiguel.org
Credentials and/or certifications:
Site English Spoken: Yes
Site Language(s) Spoken:
 Cultural Competency: No
American Sign Language (ASL):
 No
 ♿ *Accessibility:* W
Public transportation (within 1/2 mile from Site): Yes

MOUNT MIGUEL COVENANT VILLAGE HEALTH FAC

Provider ID: 171969
 325 KEMPTON ST
 SPRING VALLEY, CA
 91977-5810
Phone: (619) 931-1151
Fax: (224) 233-1397
After Hours Phone: (619) 931-1151
Accepting New Patients: No
Hours: M-SU 12AM-11:59PM
License number:
NPI: 1649375403
Website:
www.mountmiguelcovenantvillage.org
Credentials and/or certifications:
Site English Spoken: Yes
Site Language(s) Spoken:

Cultural Competency: No
American Sign Language (ASL):
 No
 ♿ *Accessibility:* W
Public transportation (within 1/2 mile from Site): Yes

VISTA

LIFE CARE CENTER OF VISTA

Provider ID: 171970
 304 N MELROSE DR
 VISTA, CA 92083-4814
Phone: (760) 724-8222
Fax: (480) 296-2601
After Hours Phone: (760) 724-8222
Accepting New Patients: No
Hours: M-SA 9AM-5PM
License number:
NPI: 1811942063
Website: www.lcca.com
Credentials and/or certifications:
Site English Spoken: Yes
Site Language(s) Spoken:
 Tagalog
Cultural Competency: No
American Sign Language (ASL):
 No
 ♿ *Accessibility:* W
Public transportation (within 1/2 mile from Site): Yes

VISTA HEALTHCARE CENTER

Provider ID: 171990
 247 E BOBIER DR
 VISTA, CA 92084-3026
Phone: (760) 945-3033
Fax: (760) 724-3169
After Hours Phone: (760) 945-3033
Accepting New Patients: No
Hours: M-F 8AM-5PM, SA 9AM-5PM
License number:

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F. Centros de enfermería especializada

NPI: 1912189812

Website: <http://astorhealth.com>

Credentials and/or certifications:

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):

No

♿ *Accessibility:* P, R

Public transportation (within 1/2 mile from Site): Yes

VISTA KNOLL SPECIALIZED CARE FACILITY

Provider ID: 172017

2000 WESTWOOD RD

VISTA, CA 92083-5123

Phone: (760) 630-2273

Fax: (760) 630-0913

After Hours Phone: (760) 630-2273

Accepting New Patients: No

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

License number:

NPI: 1275533929

Website: <http://vistaknoll.com>

Credentials and/or certifications:

Site English Spoken: Yes

Site Language(s) Spoken:

Korean, Tagalog, Vietnamese, Spanish

Cultural Competency: No

American Sign Language (ASL):

No

♿ *Accessibility:* W

Public transportation (within 1/2 mile from Site): Yes

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G. Servicios Comunitarios para Adultos (CBAS, por sus siglas en inglés)

CHULA VISTA	EL CAJON	LA MESA
OPEN ARMS ADHC <i>Provider ID: 417307</i> 301 E J ST CHULA VISTA, CA 91910-6223 <i>Phone: (619) 420-1404</i> <i>Fax: (619) 420-1408</i> <i>After Hours Phone: (619) 420-1404</i> <i>Accepting New Patients: No</i> <i>Site Language(s) Spoken: Hours: M-SA 9AM-5PM</i> <i>License number: NPI: 1598882169</i> <i>Accommodations for those with physical disabilities: Public transportation (within 1/2 mile from Site): No</i> <i>American Sign Language (ASL): No</i> <i>Language Line interpreter services: No</i> <i>If Facility has completed cultural competence training?: No</i> <i>Facility has access to skilled medical interpreters on site?: No</i> <i>Interpreter Non-English Languages: N</i> <i>Medi-Cal: Y</i> Special Expertise: - <i>Physical Disabilities?:</i> - <i>Chronic Illness?:</i> - <i>HIV/AIDS?:</i> - <i>Serious Mental Illness?:</i> - <i>Homelessness?:</i> - <i>Deaf or Hard-of-Hearing?:</i> - <i>Blindness or Visual Impairment?:</i> - <i>Co-occurring Disorders?:</i> <i>If any other, please indicate:</i> Website: http://openarmsadhc.com	WESTERN ADHC <i>Provider ID: 417305</i> 240 S MAGNOLIA AVE EL CAJON, CA 92020-4524 <i>Phone: (619) 631-7222</i> <i>Fax: (619) 631-9228</i> <i>After Hours Phone: (619) 631-7222</i> <i>Accepting New Patients: No</i> <i>Site Language(s) Spoken: Hours: M-SA 9AM-5PM</i> <i>License number: NPI: 1821125550</i> <i>Accommodations for those with physical disabilities: Public transportation (within 1/2 mile from Site): Yes</i> <i>American Sign Language (ASL): No</i> <i>Language Line interpreter services: No</i> <i>If Facility has completed cultural competence training?: No</i> <i>Facility has access to skilled medical interpreters on site?: No</i> <i>Interpreter Non-English Languages: N</i> <i>Medi-Cal: Y</i> Special Expertise: - <i>Physical Disabilities?:</i> - <i>Chronic Illness?:</i> - <i>HIV/AIDS?:</i> - <i>Serious Mental Illness?:</i> - <i>Homelessness?:</i> - <i>Deaf or Hard-of-Hearing?:</i> - <i>Blindness or Visual Impairment?:</i> - <i>Co-occurring Disorders?:</i> <i>If any other, please indicate:</i> Website: https://sites.google.com/site/westernadhc/contact-us	GOLDEN LIFE ADHC <i>Provider ID: 448456</i> 7373 UNIVERSITY AVE STE 101 LA MESA, CA 91942-0578 <i>Phone: (619) 433-3398</i> <i>Fax: (619) 337-1499</i> <i>After Hours Phone: (619) 433-3398</i> <i>Accepting New Patients: No</i> <i>Site Language(s) Spoken: Hours: M-SA 9AM-5PM</i> <i>License number: NPI: 1093921900</i> <i>Accommodations for those with physical disabilities: Public transportation (within 1/2 mile from Site): Yes</i> <i>American Sign Language (ASL): No</i> <i>Language Line interpreter services: No</i> <i>If Facility has completed cultural competence training?: No</i> <i>Facility has access to skilled medical interpreters on site?: No</i> <i>Interpreter Non-English Languages: N</i> <i>Medi-Cal: Y</i> Special Expertise: - <i>Physical Disabilities?:</i> - <i>Chronic Illness?:</i> - <i>HIV/AIDS?:</i> - <i>Serious Mental Illness?:</i> - <i>Homelessness?:</i> - <i>Deaf or Hard-of-Hearing?:</i> - <i>Blindness or Visual Impairment?:</i> - <i>Co-occurring Disorders?:</i> <i>If any other, please indicate:</i> Website:

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

G. Servicios Comunitarios para Adultos (CBAS, por sus siglas en inglés)

NATIONAL CITY	SAN DIEGO	2565 CAMINO DEL RIO S STE 201
<p>HORIZONS ADHC <i>Provider ID:</i> 417295 1035 HARBISON AVE NATIONAL CITY, CA 91950-3919 <i>Phone:</i> (619) 474-1822 <i>Fax:</i> (619) 474-1826 <i>After Hours Phone:</i> (619) 474-1822 <i>Accepting New Patients:</i> No <i>Site Language(s) Spoken: Hours:</i> M-SA 9AM-5PM <i>License number:</i> <i>NPI:</i> 1528107273 <i>Accommodations for those with physical disabilities:</i> <i>Public transportation (within 1/2 mile from Site):</i> Yes <i>American Sign Language (ASL):</i> No <i>Language Line interpreter services:</i> No <i>If Facility has completed cultural competence training?:</i> No <i>Facility has access to skilled medical interpreters on site?:</i> No <i>Interpreter Non-English Languages:</i> N <i>Medi-Cal:</i> Y <i>Special Expertise:</i> - <i>Physical Disabilities?:</i> - <i>Chronic Illness?:</i> - <i>HIV/AIDS?:</i> - <i>Serious Mental Illness?:</i> - <i>Homelessness?:</i> - <i>Deaf or Hard-of-Hearing?:</i> - <i>Blindness or Visual Impairment?:</i> - <i>Co-occurring Disorders?:</i> <i>If any other, please indicate:</i> <i>Website:</i> www.horizonsadhc.com</p>	<p>CASA PACIFICA ADHCC <i>Provider ID:</i> 417303 1424 30TH ST STE C SAN DIEGO, CA 92154-3417 <i>Phone:</i> (619) 424-8181 <i>Fax:</i> (619) 424-8151 <i>After Hours Phone:</i> (619) 424-8181 <i>Accepting New Patients:</i> No <i>Site Language(s) Spoken: Hours:</i> M-SA 9AM-5PM <i>License number:</i> <i>NPI:</i> 1609920305 <i>Accommodations for those with physical disabilities:</i> <i>Public transportation (within 1/2 mile from Site):</i> Yes <i>American Sign Language (ASL):</i> No <i>Language Line interpreter services:</i> No <i>If Facility has completed cultural competence training?:</i> No <i>Facility has access to skilled medical interpreters on site?:</i> No <i>Interpreter Non-English Languages:</i> N <i>Medi-Cal:</i> Y <i>Special Expertise:</i> - <i>Physical Disabilities?:</i> - <i>Chronic Illness?:</i> - <i>HIV/AIDS?:</i> - <i>Serious Mental Illness?:</i> - <i>Homelessness?:</i> - <i>Deaf or Hard-of-Hearing?:</i> - <i>Blindness or Visual Impairment?:</i> - <i>Co-occurring Disorders?:</i> <i>If any other, please indicate:</i> <i>Website:</i> www.casa-pacifica.com</p>	<p>NEIGHBORHOOD HOUSE ASSOC ADHC <i>Provider ID:</i> 417306 851 S 35TH ST</p>
<p>LOVING CARE ADHC <i>Provider ID:</i> 419961</p>		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

G. Servicios Comunitarios para Adultos (CBAS, por sus siglas en inglés)

SAN DIEGO, CA 92113-2701
Phone: (619) 233-6691
Fax: (619) 233-6693
After Hours Phone: (619) 233-6691
Accepting New Patients: No
Site Language(s) Spoken:
Spanish
Hours: M-F
8AM-4:30PM, SA 9AM-5PM
License number:
NPI: 1669690921
Accommodations for those with physical disabilities: W
Public transportation (within 1/2 mile from Site): Yes
American Sign Language (ASL): No
Language Line interpreter services: No
If Facility has completed cultural competence training?: No
Facility has access to skilled medical interpreters on site?: No
Interpreter Non-English Languages: N
Medi-Cal: Y
Special Expertise:
- Physical Disabilities?:
- Chronic Illness?:
- HIV/AIDS?:
- Serious Mental Illness?:
- Homelessness?:
- Deaf or Hard-of-Hearing?:
- Blindness or Visual Impairment?:
- Co-occurring Disorders?:
If any other, please indicate:
Website:
www.neighborhoodhouse.org/nha-programs/adult-day-health-care-center/

Provider ID: 420060
340 RANCHEROS DR STE 196
SAN MARCOS, CA 92069-2980
Phone: (760) 682-2424
Fax: (760) 471-5104
After Hours Phone: (760) 682-2424
Accepting New Patients: No
Site Language(s) Spoken: Hours:
M-SA 9AM-5PM
License number: 060000832
NPI: 1528271186
Accommodations for those with physical disabilities:
Public transportation (within 1/2 mile from Site): Yes
American Sign Language (ASL): No
Language Line interpreter services: No
If Facility has completed cultural competence training?: No
Facility has access to skilled medical interpreters on site?: No
Interpreter Non-English Languages: N
Medi-Cal: Y
Special Expertise:
- Physical Disabilities?:
- Chronic Illness?:
- HIV/AIDS?:
- Serious Mental Illness?:
- Homelessness?:
- Deaf or Hard-of-Hearing?:
- Blindness or Visual Impairment?:
- Co-occurring Disorders?:
If any other, please indicate:
Website:
www.americareadhc.com

SAN MARCOS

AMERICARE ADHC

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H. Servicios de Apoyo en el Hogar (IHSS, por sus siglas en inglés) en el condado

AGING & INDEPENDENCE SERVICES

Specialty: Case Management

Provider ID: 94605

AGING & INDEPENDENCE SERVICES

5560 OVERLAND AVE

SAN DIEGO, CA 92123

Phone: (858) 495-5885

Fax: (858) 495-5080

After Hours Phone:

License number: 1710308986

NPI: 1710308986

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency:

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

Website: https://www.sandiegocounty.gov/content/sdc/hhsa/programs/ais/inhome_supportive_services.html

Medical Group(s):

IPA:

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I. Autoridad pública

**COUNTY OF SAN DIEGO
IHSS PUBLIC AUTHORITY**

401 MILE OF CARS WAY, STE 200
NATIONAL CITY, CA 91950

Phone: (866) 351-7722

After Hours Phone:

Site English Spoken:

Site Language(s) Spoken:

Cultural Competency:

American Sign Language (ASL):

Hours: M-F 8AM-5PM

Website: <https://www.sdihsspa.com/>

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J. Directorio de proveedores de salud mental

ALPINE

BARMAK, SHANT, PSY

Provider Gender: Male
License number: 24998
NPI: 1235408972
Provider English Spoken: Yes
Provider Language(s) Spoken: Armenian

Cultural Competency:

MOUNTAIN HEALTH AND COMMUNITY SERVICES INC

1620 ALPINE BLVD

ALPINE, CA 91901-1102

Phone: (619) 445-6200

Fax: (619) 320-3347

After Hours Phone: (619)

445-6200

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Armenian

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

FRITZ, JENNIFER K , PSY

Provider Gender: Female

License number: PSY24350

NPI: 1013071497

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MOUNTAIN HEALTH AND

COMMUNITY SERVICES INC

1620 ALPINE BLVD

ALPINE, CA 91901-1102

Phone: (619) 445-6200

Fax: (619) 320-3347

After Hours Phone: (619)

445-6200

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Armenian

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

MANESS, PAULA J , PSY

Provider Gender: Female

License number: 23787

NPI: 1437312097

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MOUNTAIN HEALTH AND

COMMUNITY SERVICES INC

1620 ALPINE BLVD

ALPINE, CA 91901-1102

Phone: (619) 445-6200

Fax: (619) 320-3347

After Hours Phone: (619)

445-6200

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Armenian

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

MUIR, KATHLEEN G , MFT

Provider Gender: Female

License number: 52081

NPI: 1093009334

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MUIR, KATHLEEN

2165 ARNOLD WAY

ALPINE, CA 91901-2157

Phone: (619) 873-7738

Fax: (619) 324-4154

After Hours Phone: (619)

873-7738

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M 6PM-9PM, TU,TH

10AM-9PM, F 10AM-1:30PM, SA

10AM-3PM

WINTER, JEFFERY C , PSY

Provider Gender: Male

License number: 6795

NPI: 1396904850

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

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J. Directorio de proveedores de salud mental

MOUNTAIN HEALTH AND
COMMUNITY SERVICES INC
1620 ALPINE BLVD
ALPINE, CA 91901-1102
Phone: (619) 445-6200
Fax: (619) 320-3347
After Hours Phone: (619)
445-6200
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

Armenian
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

WOLFE, TINA L , PSY

Provider Gender: Female
License number: PSY28694
NPI: 1346398922
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

MOUNTAIN HEALTH AND
COMMUNITY SERVICES INC
1620 ALPINE BLVD
ALPINE, CA 91901-1102
Phone: (619) 445-6200
Fax: (619) 320-3347
After Hours Phone: (619)
445-6200
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Armenian

TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

BORREGO SPRINGS

MCEVOY, PAMELA T , PSY

Provider Gender: Female
License number: PSY10150
NPI: 1043231715
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

INTEGRATED HEALTH
PARTNERS- BORREGO
COMMUNITY HEALTH
FOUNDAT
4343 YAQUI PASS ROAD
BORREGO SPRINGS, CA
92004

Phone: (760) 767-5051
Fax: (760) 767-4552
After Hours Phone: (760)
767-5051
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No

Min/Max Age: 13/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

BONITA

GALLEGOS SKOMAL, MARIA, MFT

Provider Gender: Female
License number: 43149
NPI: 1235294992
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish

Cultural Competency:
GALLEGOS SKOMAL, MARIA
4045 BONITA RD STE 107
BONITA, CA 91902-1300
Phone: (619) 843-0242
Fax: (619) 470-4711

After Hours Phone: (619)
843-0242
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
TDD: No

Min/Max Age: 0/64
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours:

CARLSBAD

GUZMAN, MARIANA, MFT

Provider Gender: Female
License number: 80015
NPI: 1093025546
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:

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J. Directorio de proveedores de salud mental

GUZMAN, MARIANA
 CLOSED
 CARLSBAD, CA 920082110
 Phone: (760) 978-8300
 Fax: (888) 292-0251
 After Hours Phone: (760)
 978-8300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish
 TDD: No
 Min/Max Age: 13/64
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: SA 8AM-1PM

CAMPO

BARMAK, SHANT, PSY
 Provider Gender: Male
 License number: 24998
 NPI: 1235408972
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Armenian
 Cultural Competency:
 MOUNTAIN HEALTH AND
 COMMUNITY SERVICES INC
 31115 HIGHWAY 94
 CAMPO, CA 91906-3133
 Phone: (619) 445-6200
 Fax: (619) 478-2267
 After Hours Phone: (619)
 445-6200
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes

Site Language(s) Spoken:
 Armenian
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

BARMAK, SHANT, PSY
 Provider Gender: Male
 License number: 24998
 NPI: 1235408972
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Armenian
 Cultural Competency:
 MOUNTAIN HEALTH AND
 COMMUNITY SERVICES INC
 1388 BUCKMAN SPRINGS RD
 CAMPO, CA 91906-2028
 Phone: (619) 445-6200
 Fax: (619) 478-2267
 After Hours Phone: (619)
 445-6200
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Armenian
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

BRIDGEFORD, MARIE L , PSY

Provider Gender: Female
 License number: 29716
 NPI: 1144623869
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 MOUNTAIN HEALTH AND
 COMMUNITY SERVICES INC
 1388 BUCKMAN SPRINGS RD
 CAMPO, CA 91906-2028
 Phone: (619) 445-6200
 Fax: (619) 478-2267
 After Hours Phone: (619)
 445-6200
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Armenian
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

CHAMBERS, NICOLE, PSY
 Provider Gender: Female
 License number: PSY30966
 NPI: 1821297029
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 MOUNTAIN HEALTH AND
 COMMUNITY SERVICES INC
 1388 BUCKMAN SPRINGS RD
 CAMPO, CA 91906-2028
 Phone: (619) 445-6200
 Fax: (619) 478-2267
 After Hours Phone: (619)
 445-6200

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J. Directorio de proveedores de salud mental

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Armenian
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

FRITZ, JENNIFER K , PSY
Provider Gender: Female
License number: PSY24350
NPI: 1013071497
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MOUNTAIN HEALTH AND
COMMUNITY SERVICES INC
1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906-2028
Phone: (619) 445-6200
Fax: (619) 478-2267
After Hours Phone: (619)
445-6200
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Armenian
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM
FRITZ, JENNIFER K , PSY
Provider Gender: Female
License number: PSY24350
NPI: 1013071497
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MOUNTAIN HEALTH AND
COMMUNITY SERVICES INC
31115 HIGHWAY 94
CAMPO, CA 91906-3133
Phone: (619) 445-6200
Fax: (619) 478-2267
After Hours Phone: (619)
445-6200
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Armenian
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

MANESS, PAULA J , PSY
Provider Gender: Female
License number: 23787
NPI: 1437312097
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MOUNTAIN HEALTH AND
COMMUNITY SERVICES INC
31115 HIGHWAY 94
CAMPO, CA 91906-3133

Phone: (619) 445-6200
Fax: (619) 478-2267
After Hours Phone: (619)
445-6200
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Armenian
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

MANESS, PAULA J , PSY
Provider Gender: Female
License number: 23787
NPI: 1437312097
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MOUNTAIN HEALTH AND
COMMUNITY SERVICES INC
1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906-2028
Phone: (619) 445-6200
Fax: (619) 478-2267
After Hours Phone: (619)
445-6200
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Armenian
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language (ASL): COMMUNITY SERVICES INC
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

WINTER, JEFFERY C , PSY

Provider Gender: Male
License number: 6795
NPI: 1396904850
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MOUNTAIN HEALTH AND
COMMUNITY SERVICES INC
1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906-2028
Phone: (619) 445-6200
Fax: (619) 478-2267
After Hours Phone: (619)
445-6200
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Armenian
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

WINTER, JEFFERY C , PSY

Provider Gender: Male
License number: 6795
NPI: 1396904850
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MOUNTAIN HEALTH AND

COMMUNITY SERVICES INC
31115 HIGHWAY 94
CAMPO, CA 91906-3133
Phone: (619) 445-6200
Fax: (619) 478-2267
After Hours Phone: (619)
445-6200
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Armenian
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

WOLFE, TINA L , PSY

Provider Gender: Female
License number: PSY28694
NPI: 1346398922
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MOUNTAIN HEALTH AND
COMMUNITY SERVICES INC
1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906-2028
Phone: (619) 445-6200
Fax: (619) 478-2267
After Hours Phone: (619)
445-6200
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Armenian
TDD: No

Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

CARLSBAD

ALLEN, MARK H , PSY

Provider Gender: Male
License number: 11665
NPI: 1922042886
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
ALLEN, MARK
1207 CARLSBAD VILLAGE DR
STE R
CARLSBAD, CA 92008-1958
Phone: (760) 846-1945
Fax: (760) 434-3557
After Hours Phone: (760)
846-1945
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: TU,TH 9AM-7PM, F
12PM-5PM

ALTAMIRANO, LEON, PSY

Provider Gender: Male
License number: 23734

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

NPI: 1619271517
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: NORTH COUNTY HEALTH SERVICES
 1295 CARLSBAD VILLAGE DR STE 100
 CARLSBAD, CA 92008-1950
 Phone: (760) 736-6767
 Fax: (760) 720-7204
 After Hours Phone: (760) 736-6767
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish, Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

ANDERSON, ERIC, PSY
 Provider Gender: Male
 License number: 28391
 NPI: 1063851939
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: MEMORY CHECK
 PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
 Phone: (718) 942-6595
 Fax: (760) 444-2211
 After Hours Phone: (718) 942-6595

Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Amharic, Arabic, Mandarin, German, Farsi, Hindi, Korean, Panjabi, Punjabi, Portuguese
 TDD: No
 Min/Max Age: 13/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: SA,SU 7AM-7PM, M-F 8AM-5PM

ANDRADE, GENEVIEVE, PSY
 Provider Gender: Female
 License number: 29019
 NPI: 1124158027
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: MEMORY CHECK
 PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
 Phone: (718) 942-6595
 Fax: (760) 444-2211
 After Hours Phone: (718) 942-6595
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Amharic, Arabic, Mandarin, German, Farsi, Hindi, Korean, Panjabi, Punjabi, Portuguese
 TDD: No
 Min/Max Age: 13/99
 Gender Restriction: No Gender

Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: SA,SU 7AM-7PM, M-F 8AM-5PM

AVILA, FERNANDO M , PSY
 Provider Gender: Male
 License number: 31410
 NPI: 1962783464
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: MEMORY CHECK
 PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
 Phone: (718) 942-6595
 Fax: (760) 444-2211
 After Hours Phone: (718) 942-6595
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Amharic, Arabic, Mandarin, German, Farsi, Hindi, Korean, Panjabi, Punjabi, Portuguese
 TDD: No
 Min/Max Age: 13/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: SA,SU 7AM-7PM, M-F 8AM-5PM

BAHADOR, ALBORZ, PSY
 Provider Gender: Male

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J. Directorio de proveedores de salud mental

License number: 27236
NPI: 1659678068
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (718) 942-6595
Fax: (760) 444-2211
After Hours Phone: (718)
942-6595
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, Hindi, Korean,
Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

BARNETT, CHALON, CSW

Provider Gender: Female
License number: 87431
NPI: 1144657537
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520

Phone: (718) 942-6595
Fax: (760) 444-2211
After Hours Phone: (718)
942-6595
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, Hindi, Korean,
Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

BARRETT, ANN, PSY

Provider Gender: Female
License number: 28146
NPI: 1205380706
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (718) 942-6595
Fax: (760) 444-2211
After Hours Phone: (718)
942-6595
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, Hindi, Korean,

Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

BARTLETT, SARA P , CSW

Provider Gender: Female
License number: 25746
NPI: 1780060574
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (718) 942-6595
Fax: (760) 444-2211
After Hours Phone: (718)
942-6595
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, Hindi, Korean,
Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

BENNET, MELANIE, PSY

Provider Gender: Female
License number: 30334
NPI: 1639516602
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (718) 942-6595
Fax: (760) 444-2211
After Hours Phone: (718)
942-6595
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, Hindi, Korean,
Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

BIRDSALL, JENNIFER A , PSY

Provider Gender: Female
License number: 26694
NPI: 1871844084
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100

CARLSBAD, CA 92008-5520
Phone: (718) 942-6595
Fax: (760) 444-2211
After Hours Phone: (718)
942-6595
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, Hindi, Korean,
Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

BONDELL, JAMES A , PSY

Provider Gender: Male
License number: PSY4842
NPI: 1558456046
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
BONDELL, JAMES
2564 STATE ST STE B
CARLSBAD, CA 92008-1662
Phone: (760) 729-4931
Fax: (760) 729-3846
After Hours Phone: (760)
729-4931
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-W 8AM-8PM, TH
8AM-6PM

BOULWARE, DESSIRAE L , PSY

Provider Gender: Female
License number: 28641
NPI: 1376827519
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (718) 942-6595
Fax: (760) 444-2211
After Hours Phone: (718)
942-6595
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, Hindi, Korean,
Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

BRUZAS, JESSICA J , PSY

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J. Directorio de proveedores de salud mental

Provider Gender: Female
License number: 28129
NPI: 1689910010
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (718) 942-6595
Fax: (760) 444-2211
After Hours Phone: (718)
942-6595
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, Hindi, Korean,
Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

BUGAS, JOHN S , PSY

Provider Gender: Male
License number: 10562
NPI: 1811285356
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520

Phone: (718) 942-6595
Fax: (760) 444-2211
After Hours Phone: (718)
942-6595
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, Hindi, Korean,
Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

BURCIAGA, HENRY, MFT

Provider Gender: Male
License number: MFT19940
NPI: 1487785705
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
1295 CARLSBAD VILLAGE DR
STE 100
CARLSBAD, CA 92008-1950
Phone: (760) 736-6767
Fax: (760) 720-7204
After Hours Phone: (760)
736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

BURRELL, TRACEY, PSY

Provider Gender: Female
License number: 16091
NPI: 1811079809
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (718) 942-6595
Fax: (760) 444-2211
After Hours Phone: (718)
942-6595

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, Hindi, Korean,
Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

CAI, SHEILA X , MD

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J. Directorio de proveedores de salud mental

Provider Gender: Female
License number: C149845
NPI: 1780625012
Provider English Spoken: Yes
Provider Language(s) Spoken: Chinese
Cultural Competency:
NORTH COUNTY HEALTH SERVICES
1295 CARLSBAD VILLAGE DR
STE 100
CARLSBAD, CA 92008-1950
Phone: (760) 736-6767
Fax: (760) 720-7204
After Hours Phone: (760) 736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CHALMERS, VIRGINIA, CSW

Provider Gender: Female
License number: 28053
NPI: 1265613715
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
NORTH COUNTY HEALTH SERVICES
1295 CARLSBAD VILLAGE DR
STE 100
CARLSBAD, CA 92008-1950

Phone: (760) 736-6767
Fax: (760) 720-7204
After Hours Phone: (760) 736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CHANG, GRACE, PSY

Provider Gender: Female
License number: 31147
NPI: 1871074997
Provider English Spoken: Yes
Provider Language(s) Spoken: Korean
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (718) 942-6595
Fax: (760) 444-2211
After Hours Phone: (718) 942-6595
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Amharic, Arabic, Mandarin, German, Farsi, Hindi, Korean, Panjabi, Punjabi, Portuguese
TDD: No

Min/Max Age: 13/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: SA,SU 7AM-7PM, M-F 8AM-5PM

CHENG, JIM, NPA

Provider Gender: Male
License number: 22852
NPI: 1790122638
Provider English Spoken: Yes
Provider Language(s) Spoken: Chinese
Cultural Competency:
NORTH COUNTY HEALTH SERVICES
1295 CARLSBAD VILLAGE DR
STE 100
CARLSBAD, CA 92008-1950
Phone: (760) 736-6767
Fax: (760) 720-7204
After Hours Phone: (760) 736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CHEN, SHARON, PSY

Provider Gender: Female
License number: 21946

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

NPI: 1376674036
Provider English Spoken: Yes
Provider Language(s) Spoken: Mandarin
Cultural Competency: MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (718) 942-6595
Fax: (760) 444-2211
After Hours Phone: (718) 942-6595
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Amharic, Arabic, Mandarin, German, Farsi, Hindi, Korean, Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: SA,SU 7AM-7PM, M-F 8AM-5PM

CIAMPA, EVELYN L , NPA
Provider Gender: Female
License number: 95008432
NPI: 1194224345
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
NORTH COUNTY HEALTH SERVICES
1295 CARLSBAD VILLAGE DR STE 100
CARLSBAD, CA 92008-1950

Phone: (760) 736-6767
Fax: (760) 720-7204
After Hours Phone: (760) 736-6767
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

COOK, JEAN C , MFT
Provider Gender: Female
License number: 18795
NPI: 1760737290
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
COOK, JEAN
3150 EL CAMINO REAL STE E
CARLSBAD, CA 92008-2110
Phone: (619) 917-9144
Fax: (760) 994-0121
After Hours Phone: (619) 917-9144
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No

Please contact provider for Accessibility information
Hours: M 8AM-9PM, TU,TH 8AM-12PM, W 2PM-9PM, F 8AM-5PM

CORNER, EMILY, MFT
Provider Gender: Female
License number: 102353
NPI: 1093225823
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
NORTH COUNTY HEALTH SERVICES
1295 CARLSBAD VILLAGE DR STE 100
CARLSBAD, CA 92008-1950
Phone: (760) 736-6767
Fax: (760) 720-7204
After Hours Phone: (760) 736-6767

Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CORTIZO, ROSA, PSY
Provider Gender: Female
License number: 22278
NPI: 1952316648
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish

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J. Directorio de proveedores de salud mental

Cultural Competency:
NORTH COUNTY HEALTH SERVICES
1295 CARLSBAD VILLAGE DR STE 100
CARLSBAD, CA 92008-1950
Phone: (760) 736-6767
Fax: (760) 720-7204
After Hours Phone: (760) 736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

COSTELLO, MARIELA M , PSY
Provider Gender: Female
License number: 23277
NPI: 1801145727
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (718) 942-6595
Fax: (760) 444-2211
After Hours Phone: (718) 942-6595
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken: Amharic, Arabic, Mandarin, German, Farsi, Hindi, Korean, Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: SA,SU 7AM-7PM, M-F 8AM-5PM

DAIMS, RICHARD, PSY
Provider Gender: Male
License number: 11929
NPI: 1992814701
Provider English Spoken: Yes
Provider Language(s) Spoken: MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (718) 942-6595
Fax: (760) 444-2211
After Hours Phone: (718) 942-6595
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Amharic, Arabic, Mandarin, German, Farsi, Hindi, Korean, Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No

Please contact provider for Accessibility information
Hours: SA,SU 7AM-7PM, M-F 8AM-5PM

DALE, MARIAN, PSY
Provider Gender: Female
License number: 18257
NPI: 1821370941
Provider English Spoken: Yes
Provider Language(s) Spoken: MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (718) 942-6595
Fax: (760) 444-2211
After Hours Phone: (718) 942-6595
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Amharic, Arabic, Mandarin, German, Farsi, Hindi, Korean, Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: SA,SU 7AM-7PM, M-F 8AM-5PM

DORSEY, STEPHANIE B , MFT
Provider Gender: Female
License number: 93618
NPI: 1639548290
Provider English Spoken: Yes
Provider Language(s) Spoken:

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J. Directorio de proveedores de salud mental

Cultural Competency:
DORSEY, STEPHANIE
 2558 ROOSEVELT ST STE 304
 CARLSBAD, CA 92008-1672
Phone: (760) 683-8396

Fax:

After Hours Phone: (760)
 683-8396

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

TDD: No

Min/Max Age: 13/18

Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 No

Please contact provider for
 Accessibility information

Hours: M,W 8AM-2PM, TU
 8AM-8PM

DOWNEY, MEGHAN M , PSY

Provider Gender: Female

License number: 30788

NPI: 1467910901

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MEMORY CHECK

PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100

CARLSBAD, CA 92008-5520

Phone: (718) 942-6595

Fax: (760) 444-2211

After Hours Phone: (718)

942-6595

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Amharic, Arabic, Mandarin,

German, Farsi, Hindi, Korean,
 Panjabi, Punjabi, Portuguese

TDD: No

Min/Max Age: 13/99

Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 No

Please contact provider for
 Accessibility information

Hours: SA,SU 7AM-7PM, M-F
 8AM-5PM

DOYLE, TERI L , PSY

Provider Gender: Female

License number: 19065

NPI: 1568003820

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MEMORY CHECK

PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100

CARLSBAD, CA 92008-5520

Phone: (718) 942-6595

Fax: (760) 444-2211

After Hours Phone: (718)

942-6595

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Amharic, Arabic, Mandarin,

German, Farsi, Hindi, Korean,

Panjabi, Punjabi, Portuguese

TDD: No

Min/Max Age: 13/99

Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 No

Please contact provider for
 Accessibility information

Hours: SA,SU 7AM-7PM, M-F

8AM-5PM

DUALE, FAIZA M , PSY

Provider Gender: Female

License number: 30188

NPI: 1497154751

Provider English Spoken: Yes

Provider Language(s) Spoken:
 Somali

Cultural Competency:

MEMORY CHECK

PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100

CARLSBAD, CA 92008-5520

Phone: (718) 942-6595

Fax: (760) 444-2211

After Hours Phone: (718)

942-6595

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Amharic, Arabic, Mandarin,

German, Farsi, Hindi, Korean,

Panjabi, Punjabi, Portuguese

TDD: No

Min/Max Age: 13/99

Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 No

Please contact provider for
 Accessibility information

Hours: SA,SU 7AM-7PM, M-F
 8AM-5PM

DUVVURI, VIKAS, MD

Provider Gender: Male

License number: A99706

NPI: 1255470480

Provider English Spoken: Yes

Provider Language(s) Spoken:

Hindi, Telugu

Cultural Competency:

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J. Directorio de proveedores de salud mental

MEMORY CHECK
 PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
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 942-6595
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Amharic, Arabic, Mandarin,
 German, Farsi, Hindi, Korean,
 Panjabi, Punjabi, Portuguese
 TDD: No
 Min/Max Age: 13/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: SA,SU 7AM-7PM, M-F
 8AM-5PM

ETTELSON, RICHARD, PSY

Provider Gender: Male
 License number: 18953
 NPI: 1174569453
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 MEMORY CHECK
 PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
 Phone: (718) 942-6595
 Fax: (760) 444-2211
 After Hours Phone: (718)
 942-6595
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes

Site English Spoken: Yes
 Site Language(s) Spoken:
 Amharic, Arabic, Mandarin,
 German, Farsi, Hindi, Korean,
 Panjabi, Punjabi, Portuguese
 TDD: No
 Min/Max Age: 13/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: SA,SU 7AM-7PM, M-F
 8AM-5PM

FLEISHMAN, SCOTT A , PSY

Provider Gender: Male
 License number: 18011
 NPI: 1942411343
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 MEMORY CHECK
 PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
 Phone: (718) 942-6595
 Fax: (760) 444-2211
 After Hours Phone: (718)
 942-6595
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Amharic, Arabic, Mandarin,
 German, Farsi, Hindi, Korean,
 Panjabi, Punjabi, Portuguese
 TDD: No
 Min/Max Age: 13/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No

Please contact provider for
 Accessibility information
 Hours: SA,SU 7AM-7PM, M-F
 8AM-5PM

FLYNN (NEWMAN), DANIELLE I , PSY

Provider Gender: U
 License number: 26184
 NPI: 1477785137
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 NORTH COUNTY HEALTH
 SERVICES
 1295 CARLSBAD VILLAGE DR
 STE 100
 CARLSBAD, CA 92008-1950
 Phone: (760) 736-6767
 Fax: (760) 720-7204
 After Hours Phone: (760)
 736-6767
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish, Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

FOSTER, RHYAN N , PSY

Provider Gender: Female
 License number: PSY30106
 NPI: 1447617519
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:

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J. Directorio de proveedores de salud mental

**MEMORY CHECK
PSYCHOLOGICAL SERVICES**
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (718) 942-6595
Fax: (760) 444-2211
After Hours Phone: (718)
942-6595

Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, Hindi, Korean,
Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

FREEMAN, WANDA, NPA

Provider Gender: Female
License number: 95003903
NPI: 1659504264
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
1295 CARLSBAD VILLAGE DR
STE 100
CARLSBAD, CA 92008-1950
Phone: (760) 736-6767
Fax: (760) 720-7204
After Hours Phone: (760)
736-6767
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

GARCIA, JANET A , CSW

Provider Gender: Female
License number: 91462
NPI: 1790144756
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
1295 CARLSBAD VILLAGE DR
STE 100
CARLSBAD, CA 92008-1950
Phone: (760) 736-6767
Fax: (760) 720-7204
After Hours Phone: (760)
736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

GENGENBACHER, MARIA A , PSY

Provider Gender: Female
License number: 21014
NPI: 1508098021
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (718) 942-6595
Fax: (760) 444-2211
After Hours Phone: (718)
942-6595
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, Hindi, Korean,
Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

GEORGIEV, MARY JO C , PSY

Provider Gender: Female
License number: 17954
NPI: 1518996875
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH

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J. Directorio de proveedores de salud mental

SERVICES

1295 CARLSBAD VILLAGE DR
STE 100

CARLSBAD, CA 92008-1950

Phone: (760) 736-6767

Fax: (760) 720-7204

After Hours Phone: (760)

736-6767

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

GERAGHTY, MICHAEL E , PSY

Provider Gender: Male

License number: 30600

NPI: 1114491545

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MEMORY CHECK

PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100

CARLSBAD, CA 92008-5520

Phone: (718) 942-6595

Fax: (760) 444-2211

After Hours Phone: (718)

942-6595

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Amharic, Arabic, Mandarin,

German, Farsi, Hindi, Korean,
Panjabi, Punjabi, Portuguese

TDD: No

Min/Max Age: 13/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

GERAUGHTY (OLEARY), PAMELA J , CSW

Provider Gender: Female

License number: 25138

NPI: 1063800217

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NORTH COUNTY HEALTH
SERVICES

1295 CARLSBAD VILLAGE DR
STE 100

CARLSBAD, CA 92008-1950

Phone: (760) 736-6767

Fax: (760) 720-7204

After Hours Phone: (760)

736-6767

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

GHEYTANCHI, ANAHITA, PSY

Provider Gender: Female

License number: 25467

NPI: 1538466800

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi

Cultural Competency:

MEMORY CHECK

PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100

CARLSBAD, CA 92008-5520

Phone: (718) 942-6595

Fax: (760) 444-2211

After Hours Phone: (718)

942-6595

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Amharic, Arabic, Mandarin,

German, Farsi, Hindi, Korean,
Panjabi, Punjabi, Portuguese

TDD: No

Min/Max Age: 13/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

GIRALDO, FIORELLA P , CSW

Provider Gender: Female

License number: 13315

NPI: 1932235611

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

FIORELLA GIRALDO

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

8019 PASEO ALISO
CARLSBAD, CA 92009-9026
Phone: (760) 519-5409
Fax: (760) 635-0852
After Hours Phone: (760) 519-5409
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: TU,TH 9AM-5PM, W
9AM-12PM

GIVEN, JEANNETTE E , PSY
Provider Gender: Female
License number: 12040
NPI: 1952529422
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (718) 942-6595
Fax: (760) 444-2211
After Hours Phone: (718) 942-6595
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, Hindi, Korean,

Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

GONZALEZ, JOSE, CSW
Provider Gender: Male
License number: 80920
NPI: 1689844847
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
1295 CARLSBAD VILLAGE DR
STE 100
CARLSBAD, CA 92008-1950
Phone: (760) 736-6767
Fax: (760) 720-7204
After Hours Phone: (760) 736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

GOREWITZ, JANET F , PSY

Provider Gender: Female
License number: 12213
NPI: 1952742306
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (718) 942-6595
Fax: (760) 444-2211
After Hours Phone: (718) 942-6595
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, Hindi, Korean,
Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

GUEVARA LEHMAN, NATALIE, CSW
Provider Gender: Female
License number: 63746
NPI: 1578835757
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES

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J. Directorio de proveedores de salud mental

<p>1295 CARLSBAD VILLAGE DR STE 100 CARLSBAD, CA 92008-1950 Phone: (760) 736-6767 Fax: (760) 720-7204 After Hours Phone: (760) 736-6767 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Spanish, Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M-F 8AM-5PM</p>	<p>Panjabi, Punjabi, Portuguese TDD: No Min/Max Age: 13/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: SA,SU 7AM-7PM, M-F 8AM-5PM</p>	<p>8AM-5PM HARRIS, CATHERINE G , PSY Provider Gender: Female License number: 22197 NPI: 1871743880 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: MEMORY CHECK PSYCHOLOGICAL SERVICES</p>
<p>HALL, KIMBERLY A , PSY Provider Gender: Female License number: PSY19448 NPI: 1730232356 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: MEMORY CHECK PSYCHOLOGICAL SERVICES 5838 EDISON PL STE 100 CARLSBAD, CA 92008-5520 Phone: (718) 942-6595 Fax: (760) 444-2211 After Hours Phone: (718) 942-6595 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Amharic, Arabic, Mandarin, German, Farsi, Hindi, Korean,</p>	<p>HANSEN, JULIE H , CSW Provider Gender: Female License number: 23641 NPI: 1366576886 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: MEMORY CHECK PSYCHOLOGICAL SERVICES 5838 EDISON PL STE 100 CARLSBAD, CA 92008-5520 Phone: (718) 942-6595 Fax: (760) 444-2211 After Hours Phone: (718) 942-6595 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Amharic, Arabic, Mandarin, German, Farsi, Hindi, Korean, Panjabi, Punjabi, Portuguese TDD: No Min/Max Age: 13/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: SA,SU 7AM-7PM, M-F 8AM-5PM</p>	<p>5838 EDISON PL STE 100 CARLSBAD, CA 92008-5520 Phone: (718) 942-6595 Fax: (760) 444-2211 After Hours Phone: (718) 942-6595 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Amharic, Arabic, Mandarin, German, Farsi, Hindi, Korean, Panjabi, Punjabi, Portuguese TDD: No Min/Max Age: 13/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: SA,SU 7AM-7PM, M-F 8AM-5PM HEICKLEN, OKSANA, MFT Provider Gender: Female License number: 43656 NPI: 1093938664 Provider English Spoken: Yes Provider Language(s) Spoken: Russian Cultural Competency: HEICKLEN, OKSANA</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

2564 STATE ST STE B
CARLSBAD, CA 92008-1662
Phone: (760) 805-4740
Fax: (760) 407-6099
After Hours Phone: (760)
805-4740
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 10AM-8PM

HIRSCH, NORMA J , PSY

Provider Gender: Female
License number: 15140
NPI: 1073706982
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (718) 942-6595
Fax: (760) 444-2211
After Hours Phone: (718)
942-6595
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, Hindi, Korean,
Panjabi, Punjabi, Portuguese

TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

HOLDER, LINDA J , PSY

Provider Gender: Female
License number: 27722
NPI: 1053559914
Provider English Spoken: Yes
Provider Language(s) Spoken:
Portuguese, Spanish
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (718) 942-6595
Fax: (760) 444-2211
After Hours Phone: (718)
942-6595
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, Hindi, Korean,
Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

HOOKER, TERESA J , PSY

Provider Gender: Female
License number: 30780
NPI: 1750586731
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (718) 942-6595
Fax: (760) 444-2211
After Hours Phone: (718)
942-6595
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, Hindi, Korean,
Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

HURST, SUSAN I , PSY

Provider Gender: Female
License number: 14337
NPI: 1336157379
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100

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J. Directorio de proveedores de salud mental

CARLSBAD, CA 92008-5520
Phone: (718) 942-6595
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After Hours Phone: (718) 942-6595
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Amharic, Arabic, Mandarin, German, Farsi, Hindi, Korean, Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: SA,SU 7AM-7PM, M-F 8AM-5PM

IZBICKI, KRISTEN, PSY
Provider Gender: Female
License number: 28924
NPI: 1528327350
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 MEMORY CHECK
 PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
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Fax: (760) 444-2211
After Hours Phone: (718) 942-6595
Website:
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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Amharic, Arabic, Mandarin,

German, Farsi, Hindi, Korean, Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: SA,SU 7AM-7PM, M-F 8AM-5PM

JARAMILLO, CARLA, PSY
Provider Gender: Female
License number: 27512
NPI: 1689823627
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 MEMORY CHECK
 PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
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Site English Spoken: Yes
Site Language(s) Spoken:
 Amharic, Arabic, Mandarin, German, Farsi, Hindi, Korean, Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: SA,SU 7AM-7PM, M-F

8AM-5PM
JENSEN, BRIAN M , PSY
Provider Gender: Male
License number: 26041
NPI: 1518138049
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 1295 CARLSBAD VILLAGE DR STE 100
 CARLSBAD, CA 92008-1950
Phone: (760) 736-6767
Fax: (760) 720-7204
After Hours Phone: (760) 736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

JOUDY, RAEDA S , PSY
Provider Gender: Female
License number: 28972
NPI: 1295925501
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Arabic
Cultural Competency:
 MEMORY CHECK
 PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100

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J. Directorio de proveedores de salud mental

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Site Language(s) Spoken:
 Amharic, Arabic, Mandarin, German, Farsi, Hindi, Korean, Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: SA,SU 7AM-7PM, M-F 8AM-5PM

KANG, DIANA C , PSY
Provider Gender: Female
License number: 27101
NPI: 1215016985
Provider English Spoken: Yes
Provider Language(s) Spoken: Korean
Cultural Competency:
 MEMORY CHECK
 PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
Phone: (718) 942-6595
Fax: (760) 444-2211
After Hours Phone: (718) 942-6595
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

Amharic, Arabic, Mandarin, German, Farsi, Hindi, Korean, Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: SA,SU 7AM-7PM, M-F 8AM-5PM

KEATS, LAUREN B , PSY
Provider Gender: Female
License number: 29411
NPI: 1356699342
Provider English Spoken: Yes
Provider Language(s) Spoken:
 MEMORY CHECK
 PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
Phone: (718) 942-6595
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After Hours Phone: (718) 942-6595
Website:
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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Amharic, Arabic, Mandarin, German, Farsi, Hindi, Korean, Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information

Hours: SA,SU 7AM-7PM, M-F 8AM-5PM

KLIGER, JARED C , PSY
Provider Gender: Male
License number: 22666
NPI: 1477787802
Provider English Spoken: Yes
Provider Language(s) Spoken:
 MEMORY CHECK
 PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
Phone: (718) 942-6595
Fax: (760) 444-2211
After Hours Phone: (718) 942-6595
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Amharic, Arabic, Mandarin, German, Farsi, Hindi, Korean, Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: SA,SU 7AM-7PM, M-F 8AM-5PM

KRAETZ, FRANK A , PSY
Provider Gender: Male
License number: 30944
NPI: 1366787764
Provider English Spoken: Yes
Provider Language(s) Spoken:
 MEMORY CHECK

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J. Directorio de proveedores de salud mental

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Website:
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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, Hindi, Korean,
Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

KRAPES, MICHAEL B , PSY
Provider Gender: Male
License number: 25077
NPI: 1215233028
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
1295 CARLSBAD VILLAGE DR
STE 100
CARLSBAD, CA 92008-1950
Phone: (760) 736-6767
Fax: (760) 720-7204
After Hours Phone: (760)
736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

KRUEGER, BONNIE, PSY
Provider Gender: Female
License number: 16400
NPI: 1144425935
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (718) 942-6595
Fax: (760) 444-2211
After Hours Phone: (718)
942-6595
Website:
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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, Hindi, Korean,
Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
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8AM-5PM

www.beaconhealthoptions.com
Accepting New Patients: Yes
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Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, Hindi, Korean,
Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

8AM-5PM

KU, WENDY, PSY
Provider Gender: Female
License number: 24640
NPI: 1932242716
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (718) 942-6595
Fax: (760) 444-2211
After Hours Phone: (718)
942-6595
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, Hindi, Korean,
Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, Hindi, Korean,
Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

LEAKE, MADELEINE, PSY
Provider Gender: Female
License number: 29896
NPI: 1336640226
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES

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J. Directorio de proveedores de salud mental

5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (718) 942-6595
Fax: (760) 444-2211
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Website:
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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, Hindi, Korean,
Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

LI, TORNA, PSY

Provider Gender: Female
License number: 25938
NPI: 1154579431
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

Amharic, Arabic, Mandarin,
German, Farsi, Hindi, Korean,
Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

LYNN, BRIAN W , PSY

Provider Gender: Male
License number: 19295
NPI: 1972046423
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
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Website:
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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, Hindi, Korean,
Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information

Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

MACKIE, MICHAEL W , PSY

Provider Gender: Male
License number: 30000
NPI: 1851881379
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
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Website:

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Accepting New Patients: Yes
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Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, Hindi, Korean,
Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

MANN, PAVANINDER S , PSY

Provider Gender: Male
License number: 18296
NPI: 1306931167
Provider English Spoken: Yes
Provider Language(s) Spoken:
Panjabi, Punjabi
Cultural Competency:

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J. Directorio de proveedores de salud mental

MEMORY CHECK
 PSYCHOLOGICAL SERVICES
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 Amharic, Arabic, Mandarin,
 German, Farsi, Hindi, Korean,
 Panjabi, Punjabi, Portuguese
 TDD: No
 Min/Max Age: 13/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: SA,SU 7AM-7PM, M-F
 8AM-5PM

MARTINEZ, OLGA G , PSY

Provider Gender: Female
 License number: 21924
 NPI: 1801939731
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 MEMORY CHECK
 PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
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 Amharic, Arabic, Mandarin,
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 Panjabi, Punjabi, Portuguese
 TDD: No
 Min/Max Age: 13/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: SA,SU 7AM-7PM, M-F
 8AM-5PM

MASSIMINO, ASHLEY A , PSY

Provider Gender: Female
 License number: 23992
 NPI: 1619161569
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 MEMORY CHECK
 PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
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 942-6595
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 German, Farsi, Hindi, Korean,
 Panjabi, Punjabi, Portuguese
 TDD: No
 Min/Max Age: 13/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No

Please contact provider for
 Accessibility information
 Hours: SA,SU 7AM-7PM, M-F
 8AM-5PM

MCKOWN, JULIE, NPA

Provider Gender: Female
 License number: 95010619
 NPI: 1205393964
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 MEMORY CHECK
 PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
 Phone: (718) 942-6595
 Fax: (760) 444-2211
 After Hours Phone: (718)
 942-6595
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Amharic, Arabic, Mandarin,
 German, Farsi, Hindi, Korean,
 Panjabi, Punjabi, Portuguese
 TDD: No
 Min/Max Age: 13/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: SA,SU 7AM-7PM, M-F
 8AM-5PM

MELE, ANTHONY J , PSY

Provider Gender: Male
 License number: 30995
 NPI: 1619021599
 Provider English Spoken: Yes
 Provider Language(s) Spoken:

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J. Directorio de proveedores de salud mental

Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
Phone: (718) 942-6595
Fax: (760) 444-2211
After Hours Phone: (718)
 942-6595
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Amharic, Arabic, Mandarin,
 German, Farsi, Hindi, Korean,
 Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: SA,SU 7AM-7PM, M-F
 8AM-5PM

MELVILLE, TAYLOR, PSY

Provider Gender: Female
License number: PSY30319
NPI: 1518480730
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
Phone: (718) 942-6595
Fax: (760) 444-2211
After Hours Phone: (718)
 942-6595
Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Amharic, Arabic, Mandarin,
 German, Farsi, Hindi, Korean,
 Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: SA,SU 7AM-7PM, M-F
 8AM-5PM

MENDONSA, ANDREW D , PSY

Provider Gender: Male
License number: 23208
NPI: 1760530117
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
Phone: (718) 942-6595
Fax: (760) 444-2211
After Hours Phone: (718)
 942-6595
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Amharic, Arabic, Mandarin,
 German, Farsi, Hindi, Korean,
 Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):

No
 Please contact provider for
 Accessibility information
Hours: SA,SU 7AM-7PM, M-F
 8AM-5PM

MESGARHA, EIMA, PSY

Provider Gender: Female
License number: 29797
NPI: 1518335017
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Farsi
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
Phone: (718) 942-6595
Fax: (760) 444-2211
After Hours Phone: (718)
 942-6595
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Amharic, Arabic, Mandarin,
 German, Farsi, Hindi, Korean,
 Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: SA,SU 7AM-7PM, M-F
 8AM-5PM

METELLUS, JENNA, PSY

Provider Gender: Female
License number: 30486
NPI: 1891043865

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J. Directorio de proveedores de salud mental

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
Phone: (718) 942-6595
Fax: (760) 444-2211
After Hours Phone: (718)
 942-6595
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Amharic, Arabic, Mandarin,
 German, Farsi, Hindi, Korean,
 Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: SA,SU 7AM-7PM, M-F
 8AM-5PM

MISCHKA, MELISSA F , PSY

Provider Gender: Female
License number: 28982
NPI: 1730496183
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
Phone: (718) 942-6595
Fax: (760) 444-2211
After Hours Phone: (718)
 942-6595

Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Amharic, Arabic, Mandarin,
 German, Farsi, Hindi, Korean,
 Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: SA,SU 7AM-7PM, M-F
 8AM-5PM

MOENCH, PAUL, PSY

Provider Gender: Male
License number: 18012
NPI: 1033430889
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
Phone: (718) 942-6595
Fax: (760) 444-2211
After Hours Phone: (718)
 942-6595
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Amharic, Arabic, Mandarin,
 German, Farsi, Hindi, Korean,
 Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender

Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: SA,SU 7AM-7PM, M-F
 8AM-5PM

MONTEZ, REBECCA, CSW

Provider Gender: Female
License number: 26869
NPI: 1396047809
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
 1295 CARLSBAD VILLAGE DR
 STE 100
 CARLSBAD, CA 92008-1950
Phone: (760) 736-6767
Fax: (760) 720-7204
After Hours Phone: (760)
 736-6767
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

MOON, MALLORY L , PSY

Provider Gender: Female
License number: 31108
NPI: 1205496932

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
Phone: (718) 942-6595
Fax: (760) 444-2211
After Hours Phone: (718)
 942-6595
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Amharic, Arabic, Mandarin,
 German, Farsi, Hindi, Korean,
 Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: SA,SU 7AM-7PM, M-F
 8AM-5PM

NEVITT, JENNIFER A , PSY
Provider Gender: Female
License number: 15338
NPI: 1790267292
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
Phone: (718) 942-6595
Fax: (760) 444-2211
After Hours Phone: (718)
 942-6595

Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Amharic, Arabic, Mandarin,
 German, Farsi, Hindi, Korean,
 Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: SA,SU 7AM-7PM, M-F
 8AM-5PM

NGUYEN, LILI K , PSY
Provider Gender: Female
License number: 28728
NPI: 1881967123
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Vietnamese
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
Phone: (718) 942-6595
Fax: (760) 444-2211
After Hours Phone: (718)
 942-6595
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Amharic, Arabic, Mandarin,
 German, Farsi, Hindi, Korean,
 Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99

Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: SA,SU 7AM-7PM, M-F
 8AM-5PM

OBI, RACHAEL I , NRS
Provider Gender: Female
License number: 95011263
NPI: 1760940001
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
Phone: (718) 942-6595
Fax: (760) 444-2211
After Hours Phone: (718)
 942-6595
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Amharic, Arabic, Mandarin,
 German, Farsi, Hindi, Korean,
 Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: SA,SU 7AM-7PM, M-F
 8AM-5PM

**OKORONKWO, NNENNAYA,
 NPA**

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J. Directorio de proveedores de salud mental

Provider Gender: Female
License number: 95010504
NPI: 1710458096
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (718) 942-6595
Fax: (760) 444-2211
After Hours Phone: (718)
942-6595
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, Hindi, Korean,
Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

OVERIN, FORREST M , MFT

Provider Gender: Male
License number: 20617
NPI: 1952459398
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FORREST M OVERIN, LMFT
2945 HARDING ST STE 105
CARLSBAD, CA 92008-1818

Phone: (760) 434-1941
Fax: (760) 433-1941
After Hours Phone: (760)
434-1941
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: W,F 10AM-6PM, SA
8AM-2PM

PARK, RUSSELL D , PSY

Provider Gender: Male
License number: 14275
NPI: 1326020710
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (718) 942-6595
Fax: (760) 444-2211
After Hours Phone: (718)
942-6595
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, Hindi, Korean,
Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99

Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

PEER, LORNA K , PSY

Provider Gender: Female
License number: 23958
NPI: 1922260561
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (718) 942-6595
Fax: (760) 444-2211
After Hours Phone: (718)
942-6595
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, Hindi, Korean,
Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

PHAM, LOAN V , NPA

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 16368
 NPI: 1053440065
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 MEMORY CHECK
 PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
 Phone: (718) 942-6595
 Fax: (760) 444-2211
 After Hours Phone: (718)
 942-6595
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Amharic, Arabic, Mandarin,
 German, Farsi, Hindi, Korean,
 Panjabi, Punjabi, Portuguese
 TDD: No
 Min/Max Age: 13/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: SA,SU 7AM-7PM, M-F
 8AM-5PM

RAMIREZ, RANDALL A , CSW

Provider Gender: Male
 License number: 9206
 NPI: 1023120318
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 MEMORY CHECK
 PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520

Phone: (718) 942-6595
 Fax: (760) 444-2211
 After Hours Phone: (718)
 942-6595
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Amharic, Arabic, Mandarin,
 German, Farsi, Hindi, Korean,
 Panjabi, Punjabi, Portuguese
 TDD: No
 Min/Max Age: 13/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: SA,SU 7AM-7PM, M-F
 8AM-5PM

REED, JASMINE, PSY

Provider Gender: Female
 License number: 30592
 NPI: 1871814830
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 MEMORY CHECK
 PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
 Phone: (718) 942-6595
 Fax: (760) 444-2211
 After Hours Phone: (718)
 942-6595
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Amharic, Arabic, Mandarin,
 German, Farsi, Hindi, Korean,
 Panjabi, Punjabi, Portuguese

Panjabi, Punjabi, Portuguese
 TDD: No
 Min/Max Age: 13/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: SA,SU 7AM-7PM, M-F
 8AM-5PM

REININGA, ERIC J , PSY

Provider Gender: Male
 License number: 18803
 NPI: 1710146816
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 MEMORY CHECK
 PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
 Phone: (718) 942-6595
 Fax: (760) 444-2211
 After Hours Phone: (718)
 942-6595
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Amharic, Arabic, Mandarin,
 German, Farsi, Hindi, Korean,
 Panjabi, Punjabi, Portuguese
 TDD: No
 Min/Max Age: 13/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: SA,SU 7AM-7PM, M-F
 8AM-5PM

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

RIZZUTO, CORY, PSY

Provider Gender: Male
License number: 28117
NPI: 1083995930
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (718) 942-6595
Fax: (760) 444-2211
After Hours Phone: (718)
942-6595
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, Hindi, Korean,
Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

ROBINSON, PICOLYA K , PSY

Provider Gender: Female
License number: 30796
NPI: 1699977934
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100

CARLSBAD, CA 92008-5520
Phone: (718) 942-6595
Fax: (760) 444-2211
After Hours Phone: (718)
942-6595
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, Hindi, Korean,
Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

ROSENBLUM-FISHMAN, SARA, PSY

Provider Gender: Female
License number: 29104
NPI: 1982860706
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (718) 942-6595
Fax: (760) 444-2211
After Hours Phone: (718)
942-6595
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

Amharic, Arabic, Mandarin,
German, Farsi, Hindi, Korean,
Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

SAID, SARA, PSY

Provider Gender: Female
License number: 22653
NPI: 1174654149
Provider English Spoken: Yes
Provider Language(s) Spoken:
Amharic, Tigrinya
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (718) 942-6595
Fax: (760) 444-2211
After Hours Phone: (718)
942-6595
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, Hindi, Korean,
Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for

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J. Directorio de proveedores de salud mental

Accessibility information

Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

SANCHEZ, JULIE, PSY

Provider Gender: Female

License number: 31013

NPI: 1013165836

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MEMORY CHECK

PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100

CARLSBAD, CA 92008-5520

Phone: (718) 942-6595

Fax: (760) 444-2211

After Hours Phone: (718)

942-6595

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Amharic, Arabic, Mandarin,

German, Farsi, Hindi, Korean,

Panjabi, Punjabi, Portuguese

TDD: No

Min/Max Age: 13/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: SA,SU 7AM-7PM, M-F

8AM-5PM

SCAGLIONE, CRIS, PSY

Provider Gender: Female

License number: 30718

NPI: 1770732927

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MEMORY CHECK

PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100

CARLSBAD, CA 92008-5520

Phone: (718) 942-6595

Fax: (760) 444-2211

After Hours Phone: (718)

942-6595

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Amharic, Arabic, Mandarin,

German, Farsi, Hindi, Korean,

Panjabi, Punjabi, Portuguese

TDD: No

Min/Max Age: 13/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: SA,SU 7AM-7PM, M-F

8AM-5PM

SELDEN, CATHERINE, PSY

Provider Gender: Female

License number: 15943

NPI: 1134636764

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MEMORY CHECK

PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100

CARLSBAD, CA 92008-5520

Phone: (718) 942-6595

Fax: (760) 444-2211

After Hours Phone: (718)

942-6595

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Amharic, Arabic, Mandarin,

German, Farsi, Hindi, Korean,

Panjabi, Punjabi, Portuguese

TDD: No

Min/Max Age: 13/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: SA,SU 7AM-7PM, M-F

8AM-5PM

SHIRINIAN, MOSES S , PSY

Provider Gender: Male

License number: 23194

NPI: 1477902864

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MEMORY CHECK

PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100

CARLSBAD, CA 92008-5520

Phone: (718) 942-6595

Fax: (760) 444-2211

After Hours Phone: (718)

942-6595

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Amharic, Arabic, Mandarin,

German, Farsi, Hindi, Korean,

Panjabi, Punjabi, Portuguese

TDD: No

Min/Max Age: 13/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

SIMMONS, LILIANA C , NPA

Provider Gender: Female
License number: 177800
NPI: 1396113254
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
1295 CARLSBAD VILLAGE DR
STE 100
CARLSBAD, CA 92008-1950
Phone: (760) 736-6767
Fax: (760) 720-7204
After Hours Phone: (760)
736-6767
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No

Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No

Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

SIMMONS, SUZANNE, NPA

Provider Gender: Female
License number: 95016129
NPI: 1245733450
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

NORTH COUNTY HEALTH
SERVICES
1295 CARLSBAD VILLAGE DR
STE 100
CARLSBAD, CA 92008-1950
Phone: (760) 736-6767
Fax: (760) 720-7204
After Hours Phone: (760)
736-6767
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

SIMPSON, ERIC, PSY

Provider Gender: Male
License number: 28885
NPI: 1710110416
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
1295 CARLSBAD VILLAGE DR
STE 100
CARLSBAD, CA 92008-1950
Phone: (760) 736-6767
Fax: (760) 720-7204
After Hours Phone: (760)
736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

SONG, NATALIE, NPA

Provider Gender: Female
License number: 95011618
NPI: 1790207215
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (718) 942-6595
Fax: (760) 444-2211
After Hours Phone: (718)
942-6595
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, Hindi, Korean,
Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

SONI, JAGDISH, PSY

Provider Gender: Female

License number: 2629

NPI: 1669921391

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MEMORY CHECK

PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100

CARLSBAD, CA 92008-5520

Phone: (718) 942-6595

Fax: (760) 444-2211

After Hours Phone: (718)

942-6595

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Amharic, Arabic, Mandarin,

German, Farsi, Hindi, Korean,

Panjabi, Punjabi, Portuguese

TDD: No

Min/Max Age: 13/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: SA,SU 7AM-7PM, M-F

8AM-5PM

SPEARS, KENNETH B , PSY

Provider Gender: Male

License number: 29427

NPI: 1700390366

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MEMORY CHECK

PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100

CARLSBAD, CA 92008-5520

Phone: (718) 942-6595

Fax: (760) 444-2211

After Hours Phone: (718)

942-6595

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Amharic, Arabic, Mandarin,

German, Farsi, Hindi, Korean,

Panjabi, Punjabi, Portuguese

TDD: No

Min/Max Age: 13/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: SA,SU 7AM-7PM, M-F

8AM-5PM

STARK, ROHN, PSY

Provider Gender: Male

License number: 26386

NPI: 1902219850

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MEMORY CHECK

PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100

CARLSBAD, CA 92008-5520

Phone: (718) 942-6595

Fax: (760) 444-2211

After Hours Phone: (718)

942-6595

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Amharic, Arabic, Mandarin,

German, Farsi, Hindi, Korean,

Panjabi, Punjabi, Portuguese

TDD: No

Min/Max Age: 13/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: SA,SU 7AM-7PM, M-F

8AM-5PM

SURRIDGE, ARILDA S , MFT

Provider Gender: Female

License number: 84629

NPI: 1326357328

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

SURRIDGE, ARILDA

6994 EL CAMINO REAL STE

205B

CARLSBAD, CA 92009-4153

Phone: (619) 997-3260

Fax:

After Hours Phone: (619)

997-3260

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

SWISTUN, DOMINIKA, PSY

Provider Gender: Female
License number: 30984
NPI: 1669875373
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 MEMORY CHECK
 PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
Phone: (718) 942-6595
Fax: (760) 444-2211
After Hours Phone: (718)
 942-6595
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Amharic, Arabic, Mandarin,
 German, Farsi, Hindi, Korean,
 Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: SA,SU 7AM-7PM, M-F
 8AM-5PM

TABISH, RAINIE, PSY

Provider Gender: Female
License number: 28333
NPI: 1134367832
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 MEMORY CHECK
 PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100

CARLSBAD, CA 92008-5520
Phone: (718) 942-6595
Fax: (760) 444-2211
After Hours Phone: (718)
 942-6595
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Amharic, Arabic, Mandarin,
 German, Farsi, Hindi, Korean,
 Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: SA,SU 7AM-7PM, M-F
 8AM-5PM

TAYLOR, CORRDERO A , CSW

Provider Gender: Male
License number: 71284
NPI: 1346501533
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NORTH COUNTY HEALTH
 SERVICES
 1295 CARLSBAD VILLAGE DR
 STE 100
 CARLSBAD, CA 92008-1950
Phone: (760) 736-6767
Fax: (760) 720-7204
After Hours Phone: (760)
 736-6767
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

TORRES, HECTOR M , PSY

Provider Gender: Male
License number: 13309
NPI: 1720265614
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 NORTH COUNTY HEALTH
 SERVICES
 1295 CARLSBAD VILLAGE DR
 STE 100
 CARLSBAD, CA 92008-1950
Phone: (760) 736-6767
Fax: (760) 720-7204
After Hours Phone: (760)
 736-6767
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

TRUONG, DONNA, PSY

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Gender: Female
License number: 30689
NPI: 1972798098
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (718) 942-6595
Fax: (760) 444-2211
After Hours Phone: (718)
942-6595
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, Hindi, Korean,
Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

TYLER, CAROL P , PSY

Provider Gender: Female
License number: 23922
NPI: 1902842370
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520

Phone: (718) 942-6595
Fax: (760) 444-2211
After Hours Phone: (718)
942-6595
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, Hindi, Korean,
Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

VETTER, JEAN L , CSW

Provider Gender: Female
License number: 93945
NPI: 1659898641
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
1295 CARLSBAD VILLAGE DR
STE 100
CARLSBAD, CA 92008-1950
Phone: (760) 736-6767
Fax: (760) 720-7204
After Hours Phone: (760)
736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

WALKER, SHAYNA T , MD

Provider Gender: Female
License number: A107393
NPI: 1760688295
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
1295 CARLSBAD VILLAGE DR
STE 100
CARLSBAD, CA 92008-1950
Phone: (760) 736-6767
Fax: (760) 720-7204
After Hours Phone: (760)
736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

WARD MCKINLAY, THOMAS, PSY

Provider Gender: Male

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J. Directorio de proveedores de salud mental

License number: 7065
 NPI: 1346778081
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 MEMORY CHECK
 PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
 Phone: (718) 942-6595
 Fax: (760) 444-2211
 After Hours Phone: (718)
 942-6595
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Amharic, Arabic, Mandarin,
 German, Farsi, Hindi, Korean,
 Panjabi, Punjabi, Portuguese
 TDD: No
 Min/Max Age: 13/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: SA,SU 7AM-7PM, M-F
 8AM-5PM

WELCH, MEGAN, MFT

Provider Gender: Female
 License number: 113763
 NPI: 1689117400
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 NORTH COUNTY HEALTH
 SERVICES
 1295 CARLSBAD VILLAGE DR
 STE 100
 CARLSBAD, CA 92008-1950

Phone: (760) 736-6767
 Fax: (760) 720-7204
 After Hours Phone: (760)
 736-6767
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish, Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

YANEZ-CRUZ, EVETTE, PSY

Provider Gender: Female
 License number: 23985
 NPI: 1104969427
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 MEMORY CHECK
 PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
 Phone: (718) 942-6595
 Fax: (760) 444-2211
 After Hours Phone: (718)
 942-6595
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Amharic, Arabic, Mandarin,
 German, Farsi, Hindi, Korean,
 Panjabi, Punjabi, Portuguese
 TDD: No
 Min/Max Age: 13/99

Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: SA,SU 7AM-7PM, M-F
 8AM-5PM

ZALEWSKI ZARAGOZA, ROBERT A , MD

Provider Gender: Male
 License number: A85005
 NPI: 1720054133
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 MEMORY CHECK
 PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
 Phone: (718) 942-6595
 Fax: (760) 444-2211
 After Hours Phone: (718)
 942-6595
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Amharic, Arabic, Mandarin,
 German, Farsi, Hindi, Korean,
 Panjabi, Punjabi, Portuguese
 TDD: No
 Min/Max Age: 13/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: SA,SU 7AM-7PM, M-F
 8AM-5PM

ZANOLINI, SHANNA, PSY

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Gender: Female
License number: 22836
NPI: 1194038265
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 MEMORY CHECK
 PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
Phone: (718) 942-6595
Fax: (760) 444-2211
After Hours Phone: (718)
 942-6595
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Amharic, Arabic, Mandarin,
 German, Farsi, Hindi, Korean,
 Panjabi, Punjabi, Portuguese
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: SA,SU 7AM-7PM, M-F
 8AM-5PM

ZELJAK, KATRINA M , MFT

Provider Gender: Female
License number: LMFT99775
NPI: 1881123800
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 ZELJAK, KATRINA
 6994 EL CAMINO REAL STE
 205H
 CARLSBAD, CA 92009-4153

Phone: (760) 815-2525
Fax:
After Hours Phone: (760)
 815-2525
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age: 0/64
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M 8AM-8PM, TU
 8AM-7PM, W 2PM-5PM, TH,F
 8AM-5PM

CHULA VISTA

ABDULLAH, KERI, PSY

Provider Gender: Female
License number: 29990
NPI: 1699840587
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,

Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

ABDULLAH, KERI, PSY

Provider Gender: Female
License number: 29990
NPI: 1699840587
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

ABDULLAH, KERI, PSY

Provider Gender: Female

License number: 29990

NPI: 1699840587

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

248 LANDIS AVE

CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Vietnamese, Yue

Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

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

AGUAYO, SILVIA R , MFT

Provider Gender: Female

License number: 45814

NPI: 1982927059

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

AGUAYO, SILVIA

229 F ST STE A

CHULA VISTA, CA 91910-2822

Phone: (619) 454-0055

Fax: (619) 432-0045

After Hours Phone: (619)

454-0055

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

TDD: Yes

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 10AM-8:30PM, SA

7AM-12PM

AGUIRRE, LEAH B , CSW

Provider Gender: Female

License number: 74440

NPI: 1306151998

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Portuguese, Russian, Spanish,

Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

Hours:

AGUIRRE, LEAH B , CSW

Provider Gender: Female

License number: 74440

NPI: 1306151998

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

352 L ST

CHULA VISTA, CA 91911-1208

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

Hours: M 8:30AM-5PM, TU

9AM-4:15PM, F

8:30AM-12:30PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

AGUIRRE, LEAH B , CSW

Provider Gender: Female
License number: 74440
NPI: 1306151998
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

AGUIRRE, WENDY, CSW

Provider Gender: Female
License number: 74219
NPI: 1205946282
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

AGUIRRE, WENDY, CSW

Provider Gender: Female
License number: 74219
NPI: 1205946282
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

AGUIRRE, WENDY, CSW

Provider Gender: Female
License number: 74219
NPI: 1205946282
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accessibility information

Hours: M 8:30AM-5PM, TU
9AM-4:15PM, F
8:30AM-12:30PM

AIDAR-CURRIER, RENATA, CSW

Provider Gender: Female

License number: LCSW26063

NPI: 1932277597

Provider English Spoken: Yes

Provider Language(s) Spoken:

Portuguese, Spanish

Cultural Competency:

AIDAR-CURRIER, RENATA

625 THIRD AVE

CHULA VISTA, CA 91910-5703

Phone: (619) 804-6918

Fax: (619) 476-7566

After Hours Phone: (619)

804-6918

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Portuguese, Spanish

TDD: No

Min/Max Age: 13/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M 1PM-7PM, TU

3PM-8PM, W 10AM-8PM, SA

9AM-1PM

ALAVI, ALI S , MD

Provider Gender: Male

License number: A163793

NPI: 1356856694

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

248 LANDIS AVE

CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Vietnamese, Yue

Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

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

ALAVI, ALI S , MD

Provider Gender: Male

License number: A163793

NPI: 1356856694

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Portuguese, Russian, Spanish,

Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

Hours:

ALFARO, AMY, CSW

Provider Gender: Female

License number: 72874

NPI: 1609326859

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

248 LANDIS AVE

CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Vietnamese, Yue

Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

ALFARO, AMY, CSW

Provider Gender: Female
License number: 72874
NPI: 1609326859
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours:

ALTERS, DENNIS, MD

Provider Gender: Male
License number: G36206
NPI: 1457371635
Provider English Spoken: Yes

Provider Language(s) Spoken: FAMILY HEALTH CENTERS OF SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM

ALTERS, DENNIS, MD

Provider Gender: Male
License number: G36206
NPI: 1457371635
Provider English Spoken: Yes
Provider Language(s) Spoken: FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338

Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours:

ALTERS, DENNIS, MD

Provider Gender: Male
License number: G36206
NPI: 1457371635
Provider English Spoken: Yes
Provider Language(s) Spoken: FAMILY HEALTH CENTERS OF SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p> <p>ARAGON, DARINKA M , MD <i>Provider Gender:</i> Female <i>License number:</i> A139241 <i>NPI:</i> 1114347291 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i></p> <p>ARAGON, DARINKA M , MD <i>Provider Gender:</i> Female <i>License number:</i> A139241 <i>NPI:</i> 1114347291 <i>Provider English Spoken:</i> Yes</p>	<p><i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p> <p>ARAGON, DARINKA M , MD <i>Provider Gender:</i> Female <i>License number:</i> A139241 <i>NPI:</i> 1114347291 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST CHULA VISTA, CA 91911-1208 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338</p>	<p><i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM</p> <p>ARIELLA, LYNDA R , PSY <i>Provider Gender:</i> Female <i>License number:</i> 19450 <i>NPI:</i> 1073518965 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST CHULA VISTA, CA 91911-1208 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i></p>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM

ARIELLA, LYNDA R , PSY

Provider Gender: Female

License number: 19450

NPI: 1073518965

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

248 LANDIS AVE

CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue

Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

ARIELLA, LYNDA R , PSY

Provider Gender: Female

License number: 19450

NPI: 1073518965

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours:

ASH, VIVIAN, CSW

Provider Gender: Female

License number: 14619

NPI: 1033623293

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

248 LANDIS AVE

CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619) 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue

Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

ASH, VIVIAN, CSW

Provider Gender: Female

License number: 14619

NPI: 1033623293

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

352 L ST

CHULA VISTA, CA 91911-1208

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian,

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J. Directorio de proveedores de salud mental

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM

ASH, VIVIAN, CSW

Provider Gender: Female

License number: 14619

NPI: 1033623293

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours:

ASUNCION, JENNIFER, CSW

Provider Gender: Male

License number: LCSW75956

NPI: 1083056279

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

248 LANDIS AVE

CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

ASUNCION, JENNIFER, CSW

Provider Gender: Male

License number: LCSW75956

NPI: 1083056279

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

352 L ST

CHULA VISTA, CA 91911-1208

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619) 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM

ASUNCION, JENNIFER, CSW

Provider Gender: Male

License number: LCSW75956

NPI: 1083056279

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours:

AUCOIN, DOUGLAS, CSW

Provider Gender: Male

License number: 24707

NPI: 1699007609

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours:

AUCOIN, DOUGLAS, CSW

Provider Gender: Male

License number: 24707

NPI: 1699007609

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

248 LANDIS AVE

CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue

Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

AUCOIN, DOUGLAS, CSW

Provider Gender: Male

License number: 24707

NPI: 1699007609

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

352 L ST

352 L ST

352 L ST

352 L ST

352 L ST

352 L ST

352 L ST

352 L ST

352 L ST

CHULA VISTA, CA 91911-1208

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M 8:30AM-5PM, TU

9AM-4:15PM, F

8:30AM-12:30PM

8:30AM-12:30PM

AVILA, RADOMIR M , CSW

Provider Gender: Male

License number: 75520

NPI: 1487937330

Provider English Spoken: Yes

Provider Language(s) Spoken:

Portuguese, Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

352 L ST

CHULA VISTA, CA 91911-1208

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM</p>	<p>Yes Please contact provider for Accessibility information <i>Hours:</i> AVILA, RADOMIR M , CSW <i>Provider Gender:</i> Male <i>License number:</i> 75520 <i>NPI:</i> 1487937330 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Portuguese, Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i></p>	<p><i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i></p>
<p>AVILA, RADOMIR M , CSW <i>Provider Gender:</i> Male <i>License number:</i> 75520 <i>NPI:</i> 1487937330 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Portuguese, Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i></p>	<p><i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Portuguese, Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>BANZON, CHARLES, MFT <i>Provider Gender:</i> Male <i>License number:</i> 49126 <i>NPI:</i> 1457422966 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com</p>

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J. Directorio de proveedores de salud mental

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

BARCELOS ANTONIO, TIAGO, CSW

Provider Gender: Male
License number: 90529
NPI: 1194159871
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

BARCELOS ANTONIO, TIAGO, CSW

Provider Gender: Male
License number: 90529
NPI: 1194159871
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:

Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

BARCELOS ANTONIO, TIAGO, CSW

Provider Gender: Male

License number: 90529
NPI: 1194159871
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

BARTHOLOMEW, SARAH C , CSW

Provider Gender: Female
License number: 86542
NPI: 1720339708
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609

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J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

**BARTHOLOMEW, SARAH C ,
 CSW**
 Provider Gender: Female
 License number: 86542
 NPI: 1720339708
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,

Portuguese, Russian, Spanish,
 Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours:

BENNETT, RACHEL Q , CSW
 Provider Gender: Female
 License number: 76466
 NPI: 1558659797
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
 TDD: No

Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours:

BENNETT, RACHEL Q , CSW
 Provider Gender: Female
 License number: 76466
 NPI: 1558659797
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

BENNETT, RACHEL Q , CSW
 Provider Gender: Female
 License number: 76466
 NPI: 1558659797
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

248 LANDIS AVE
CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

BENZL, JERRY F , MD

Provider Gender: Male
License number: A154471
NPI: 1487032082
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

BENZL, JERRY F , MD

Provider Gender: Male
License number: A154471
NPI: 1487032082
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
248 LANDIS AVE
CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information

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

BERKSON, BARRIE, CSW

Provider Gender: Female
License number: 63313
NPI: 1922305465
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

BERKSON, BARRIE, CSW

Provider Gender: Female
License number: 63313
NPI: 1922305465
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
352 L ST

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

CHULA VISTA, CA 91911-1208
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 Yes

Please contact provider for
 Accessibility information

Hours: M 8:30AM-5PM, TU

9AM-4:15PM, F

8:30AM-12:30PM

BERKSON, BARRIE, CSW

Provider Gender: Female

License number: 63313

NPI: 1922305465

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
 SAN DIEGO

248 LANDIS AVE

CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 Yes

Please contact provider for
 Accessibility information

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

BIRNBAUM, DEBORAH, MD

Provider Gender: Female

License number: 20A11387

NPI: 1639308265

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
 SAN DIEGO

352 L ST

CHULA VISTA, CA 91911-1208

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 Yes

Please contact provider for
 Accessibility information

Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

BIRNBAUM, DEBORAH, MD

Provider Gender: Female

License number: 20A11387

NPI: 1639308265

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
 SAN DIEGO

248 LANDIS AVE

CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 Yes

Please contact provider for

Accessibility information

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

BIRNBAUM, DEBORAH, MD

Provider Gender: Female

License number: 20A11387

NPI: 1639308265

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours:

BOND, ALAN, PSY

Provider Gender: Male
License number: PSY25805
NPI: 1881927184
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
352 L ST
CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken:
American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM

BORREGO, DIANA E , NPA

Provider Gender: Female
License number: 95005019
NPI: 1184012866
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes

Please contact provider for Accessibility information
Hours:

BORREGO, DIANA E , NPA

Provider Gender: Female
License number: 95005019
NPI: 1184012866
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
248 LANDIS AVE
CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

BORREGO, DIANA E , NPA

Provider Gender: Female
License number: 95005019
NPI: 1184012866
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

FAMILY HEALTH CENTERS OF SAN DIEGO

352 L ST
CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338

Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information
Hours: M 8:30AM-5PM, TU
9AM-4:15PM, F
8:30AM-12:30PM

BROWN, CRAIG A , MD

Provider Gender: Male
License number: G28188
NPI: 1730239989
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
BROWN, CRAIG
480 FOURTH AVE STE 511
CHULA VISTA, CA 91910-4414
Phone: (619) 426-0370
Fax: (619) 426-0676
After Hours Phone: (619)
426-0370

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 10AM-7PM

BUBY, MYRA, CSW

Provider Gender: Female
License number: 23172
NPI: 1093747511
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish

Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese
TDD: No

Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

BUBY, MYRA, CSW

Provider Gender: Female
License number: 23172
NPI: 1093747511
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish

Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
352 L ST
CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No

Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M 8:30AM-5PM, TU
9AM-4:15PM, F
8:30AM-12:30PM

BUBY, MYRA, CSW

Provider Gender: Female
License number: 23172
NPI: 1093747511
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:

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J. Directorio de proveedores de salud mental

FAMILY HEALTH CENTERS OF SAN DIEGO

248 LANDIS AVE
CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

BUI, ANTHONY, MD

Provider Gender: Male

License number: A146965

NPI: 1346628880

Provider English Spoken: Yes

Provider Language(s) Spoken:

Vietnamese

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

248 LANDIS AVE

CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

BURGOS, EDNA, CSW

Provider Gender: Female

License number: 85597

NPI: 1134591167

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours:

BURGOS, EDNA, CSW

Provider Gender: Female

License number: 85597

NPI: 1134591167

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

248 LANDIS AVE

CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

BURNS, PETER B, MD

Provider Gender: Male

License number: G145142

NPI: 1891727533

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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J. Directorio de proveedores de salud mental

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
248 LANDIS AVE
CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

BURNS, PETER B , MD

Provider Gender: Male
License number: G145142
NPI: 1891727533
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

BUTERBAUGH, KRISTY L , CSW

Provider Gender: Female
License number: 65477
NPI: 1346615838
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender

Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

BUTERBAUGH, KRISTY L , CSW

Provider Gender: Female
License number: 65477
NPI: 1346615838
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
248 LANDIS AVE
CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

BUTERBAUGH, KRISTY L , CSW

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 65477
NPI: 1346615838
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

CABREJOS, CLAUDIO, MD
Provider Gender: Male
License number: A71653
NPI: 1033133483
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Portuguese, Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

CABREJOS, CLAUDIO, MD
Provider Gender: Male
License number: A71653
NPI: 1033133483
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Portuguese, Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for

Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

CABREJOS, CLAUDIO, MD
Provider Gender: Male
License number: A71653
NPI: 1033133483
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Portuguese, Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

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

CARDENAS, ALONSO, MD

Provider Gender: Male
License number: A137940
NPI: 1811212145
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

CARDENAS, ALONSO, MD

Provider Gender: Male
License number: A137940
NPI: 1811212145
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO

352 L ST
CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M 8:30AM-5PM, TU
9AM-4:15PM, F
8:30AM-12:30PM

CARDENAS, ALONSO, MD

Provider Gender: Male
License number: A137940
NPI: 1811212145
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
248 LANDIS AVE
CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

CARINO DIOKNO, RHODA, PSY

Provider Gender: Female
License number: 28073
NPI: 1629109483
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Please contact provider for
Accessibility information
Hours:

CARINO DIOKNO, RHODA, PSY

Provider Gender: Female
License number: 28073
NPI: 1629109483
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
352 L ST
CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:

Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information
Hours: M 8:30AM-5PM, TU
9AM-4:15PM, F
8:30AM-12:30PM

CARINO DIOKNO, RHODA, PSY

Provider Gender: Female
License number: 28073
NPI: 1629109483

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
248 LANDIS AVE
CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese
TDD: No

Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

CASTELLANOS, TERESITA D , CSW

Provider Gender: Female
License number: 82782
NPI: 1598165441
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910-2628

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

CASTELLANOS, TERESITA D , CSW

Provider Gender: Female
License number: 82782
NPI: 1598165441
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
352 L ST
CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM	Accessibility information Hours: M-F 8:30AM-5PM CHEN, ANGELA, MFT Provider Gender: Female License number: LMFT40923 NPI: 1811027956 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST CHULA VISTA, CA 91911-1208 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM	FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM
CASTELLANOS, TERESITA D , CSW Provider Gender: Female License number: 82782 NPI: 1598165441 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for	CHEN, ANGELA, MFT Provider Gender: Female License number: LMFT40923 NPI: 1811027956 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i></p>	<p>Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p><i>NPI:</i> 1922313394 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i></p>
<p>CHRISTENSEN, MELISSA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 69616 <i>NPI:</i> 1922313394 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i></p>	<p>CHRISTENSEN, MELISSA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 69616 <i>NPI:</i> 1922313394 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST CHULA VISTA, CA 91911-1208 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM</p>	<p>CLONTS, PAUL A , CSW <i>Provider Gender:</i> Male <i>License number:</i> 87259 <i>NPI:</i> 1467808568 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i></p>	<p><i>Restrictions</i> <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p><i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST CHULA VISTA, CA 91911-1208 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM</p>
<p>CLONTS, PAUL A , CSW <i>Provider Gender:</i> Male <i>License number:</i> 87259 <i>NPI:</i> 1467808568 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions</p>	<p>CROCKFORD, DANE, PSY <i>Provider Gender:</i> Male <i>License number:</i> 28313 <i>NPI:</i> 1780031831 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions</p>	<p>CROCKFORD, DANE, PSY <i>Provider Gender:</i> Male <i>License number:</i> 28313 <i>NPI:</i> 1780031831 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628</p>

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J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours:

CRUZ ARAUJO, ANDREA L , MD
 Provider Gender: Female
 License number: A160789
 NPI: 1124401435
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,

Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours:

CRUZ ARAUJO, ANDREA L , MD
 Provider Gender: Female
 License number: A160789
 NPI: 1124401435
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

DALONSO, SANDRA L , CSW
 Provider Gender: Female
 License number: 82240
 NPI: 1841797644
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours:

DALONSO, SANDRA L , CSW
 Provider Gender: Female
 License number: 82240
 NPI: 1841797644
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609

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J. Directorio de proveedores de salud mental

<p>Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM</p>	<p>Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM</p>
<p>DALONSO, SANDRA L , CSW Provider Gender: Female License number: 82240 NPI: 1841797644 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST CHULA VISTA, CA 91911-1208 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours:</p>	<p>DAN, WENDY L , CSW Provider Gender: Female License number: 26015 NPI: 1700224037 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST CHULA VISTA, CA 91911-1208 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information</p>	<p>DAN, WENDY L , CSW Provider Gender: Female License number: 26015 NPI: 1700224037 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours:</p>
<p>DAN, WENDY L , CSW Provider Gender: Female License number: 26015 NPI: 1700224037 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish</p>	<p>DAN, WENDY L , CSW Provider Gender: Female License number: 26015 NPI: 1700224037 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish</p>	<p>DAN, WENDY L , CSW Provider Gender: Female License number: 26015 NPI: 1700224037 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish</p>

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J. Directorio de proveedores de salud mental

Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

DE LLANO, CARMEN, PSY

Provider Gender: Female
License number: PSY11154
NPI: 1992752406
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 DR. CARMEN DE LLANO, PH.D.
 815 THIRD AVE STE 107
 CHULA VISTA, CA 91911-1308
 Phone: (619) 584-6299
 Fax: (619) 426-1906
 After Hours Phone: (619)
 584-6299
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours:

DEBBOLD, ERIC M , MD

Provider Gender: Male
License number: 164068
NPI: 1144726415
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for

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

DEBBOLD, ERIC M , MD

Provider Gender: Male
License number: 164068
NPI: 1144726415
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours:

DIAZ, LIZETH, CSW

Provider Gender: Female
License number: 97277
NPI: 1124457023
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

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J. Directorio de proveedores de salud mental

248 LANDIS AVE
CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
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After Hours Phone: (619)
515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

DIAZ, LIZETH, CSW

Provider Gender: Female
License number: 97277
NPI: 1124457023
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
352 L ST
CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M 8:30AM-5PM, TU
9AM-4:15PM, F
8:30AM-12:30PM

DIAZ, LIZETH, CSW

Provider Gender: Female
License number: 97277
NPI: 1124457023
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for

Accessibility information
Hours:

DOBOS, DAVID, MD

Provider Gender: Male
License number: G57276
NPI: 1548318348
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
352 L ST
CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M 8:30AM-5PM, TU
9AM-4:15PM, F
8:30AM-12:30PM

DOBOS, DAVID, MD

Provider Gender: Male
License number: G57276
NPI: 1548318348
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

FAMILY HEALTH CENTERS OF
SAN DIEGO

251 LANDIS AVE
CHULA VISTA, CA 91910-2628

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours:

DOBOS, DAVID, MD

Provider Gender: Male

License number: G57276

NPI: 1548318348

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

248 LANDIS AVE

CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue

Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

DRISCOLL, MICHAEL S , CSW

Provider Gender: Male

License number: 93951

NPI: 1659761880

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

352 L ST

CHULA VISTA, CA 91911-1208

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for

Accessibility information

Hours: M 8:30AM-5PM, TU
9AM-4:15PM, F
8:30AM-12:30PM

DUNFORD, KATELYN C , MFT

Provider Gender: Female

License number: 126626

NPI: 1437517497

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours:

DUNFORD, KATELYN C , MFT

Provider Gender: Female

License number: 126626

NPI: 1437517497

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST CHULA VISTA, CA 91911-1208 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM</p>	<p>Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>Yes Please contact provider for Accessibility information Hours: DWYER, GEORGE, CSW Provider Gender: Male License number: 70988 NPI: 1437606126 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST CHULA VISTA, CA 91911-1208 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM</p>
<p>DUNFORD, KATELYN C , MFT Provider Gender: Female License number: 126626 NPI: 1437517497 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com</p>	<p>DWYER, GEORGE, CSW Provider Gender: Male License number: 70988 NPI: 1437606126 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL):</p>	<p>DWYER, GEORGE, CSW Provider Gender: Male License number: 70988 NPI: 1437606126 Provider English Spoken: Yes</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Language(s) Spoken: *Cultural Competency:*
FAMILY HEALTH CENTERS OF SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

ERBE, EDWARD J , MD

Provider Gender: Male
License number: G76886
NPI: 1952318289
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338

Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM

ERBE, EDWARD J , MD

Provider Gender: Male
License number: G76886
NPI: 1952318289
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours:

ERBE, EDWARD J , MD

Provider Gender: Male
License number: G76886
NPI: 1952318289
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

FAJARDO, JACQUELINE M , CSW

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 87322
 NPI: 1215342118
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM

FEDEROFF, MONICA, MD
 Provider Gender: Female
 License number: A164677
 NPI: 1912404492
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

FEDEROFF, MONICA, MD
 Provider Gender: Female
 License number: A164677
 NPI: 1912404492
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Portuguese, Russian, Spanish,

Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours:

FEDEROFF, MONICA, MD
 Provider Gender: Female
 License number: A164677
 NPI: 1912404492
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM

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J. Directorio de proveedores de salud mental

FERRER, ADAREZZA I , MD

Provider Gender: Female
License number: A123390
NPI: 1316175524
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 COMMUNITY RESEARCH
 FOUNDATION INC
 835 THIRD AVE
 CHULA VISTA, CA 91911-1352
Phone: (619) 427-4661
Fax: (619) 426-7849
After Hours Phone: (619)
 427-4661
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Farsi,
 Spanish
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M 9AM-8PM, TU,W,F
 9AM-5PM, TH 12PM-8PM

FLORES, MARY LUPE, CSW

Provider Gender: Female
License number: 19815
NPI: 1134147457
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

FLORES, MARY LUPE, CSW

Provider Gender: Female
License number: 19815
NPI: 1134147457
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

FLORES, MARY LUPE, CSW

Provider Gender: Female
License number: 19815
NPI: 1134147457
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>FLYNN CRUZ, MARY E , CSW <i>Provider Gender:</i> Female <i>License number:</i> 92918 <i>NPI:</i> 1942814181 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>CHULA VISTA, CA 91910-2628 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i></p>	<p>Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM</p>
<p>FLYNN CRUZ, MARY E , CSW <i>Provider Gender:</i> Female <i>License number:</i> 92918 <i>NPI:</i> 1942814181 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE</p>	<p>FRANCO, RODRIGO, CSW <i>Provider Gender:</i> Male <i>License number:</i> 71548 <i>NPI:</i> 1952736043 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST CHULA VISTA, CA 91911-1208 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian,</p>	<p>FRANCO, RODRIGO, CSW <i>Provider Gender:</i> Male <i>License number:</i> 71548 <i>NPI:</i> 1952736043 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

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

FRANCO, RODRIGO, CSW

Provider Gender: Male

License number: 71548

NPI: 1952736043

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Portuguese, Russian, Spanish,

Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

Hours:

FREEMAN, KAY M , MFT

Provider Gender: Female

License number: 16284

NPI: 1588795298

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

248 LANDIS AVE

CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Vietnamese, Yue

Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

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

FREEMAN, KAY M , MFT

Provider Gender: Female

License number: 16284

NPI: 1588795298

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Portuguese, Russian, Spanish,
Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours:

FUENTES WEST, MARYSOL, MFT

Provider Gender: Female

License number: 39962

NPI: 1285770941

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

FUENTES WEST, MARYSOL

815 THIRD AVE STE 107

CHULA VISTA, CA 91911-1308

Phone: (619) 422-7216

Fax: (619) 426-1906

After Hours Phone: (619)

422-7216

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

TDD: Yes

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-F 9AM-6PM

FUKUI, TOMONORI, MD

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Gender: Male
License number: 75713
NPI: 1366519670
Provider English Spoken: Yes
Provider Language(s) Spoken: Japanese, Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

GALAPON, DIXIE L , PSY
Provider Gender: Female
License number: 16711
NPI: 1174646301
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

GALAPON, DIXIE L , PSY
Provider Gender: Female
License number: 16711
NPI: 1174646301
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian,

Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM

GALAPON, DIXIE L , PSY
Provider Gender: Female
License number: 16711
NPI: 1174646301
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>GAUD, KRISTINA G , MD <i>Provider Gender:</i> Female <i>License number:</i> 170667 <i>NPI:</i> 1508151598 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST CHULA VISTA, CA 91911-1208 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM</p>	<p>251 LANDIS AVE CHULA VISTA, CA 91910-2628 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i></p>	<p>Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>
<p>GAUD, KRISTINA G , MD <i>Provider Gender:</i> Female <i>License number:</i> 170667 <i>NPI:</i> 1508151598 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO</p>	<p>GAUD, KRISTINA G , MD <i>Provider Gender:</i> Female <i>License number:</i> 170667 <i>NPI:</i> 1508151598 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi,</p>	<p>GILLIS, RUTH, MFT <i>Provider Gender:</i> Female <i>License number:</i> 50313 <i>NPI:</i> 1568588325 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i></p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

GILLIS, RUTH, MFT

Provider Gender: Female

License number: 50313

NPI: 1568588325

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

248 LANDIS AVE

CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Vietnamese, Yue

Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

GLASSMAN, JAGA NATH, MD

Provider Gender: Male

License number: G55004

NPI: 1558409771

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

352 L ST

CHULA VISTA, CA 91911-1208

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M 8:30AM-5PM, TU

9AM-4:15PM, F

8:30AM-12:30PM

GLASSMAN, JAGA NATH, MD

Provider Gender: Male

License number: G55004

NPI: 1558409771

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

248 LANDIS AVE

CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

GLASSMAN, JAGA NATH, MD

Provider Gender: Male

License number: G55004

NPI: 1558409771

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Portuguese, Russian, Spanish,

Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>Hours:</i></p> <p>GLEASON, SHEILA, PSY <i>Provider Gender:</i> Female <i>License number:</i> 13685 <i>NPI:</i> 1366641813 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p> <p>GLEASON, SHEILA, PSY <i>Provider Gender:</i> Female <i>License number:</i> 13685 <i>NPI:</i> 1366641813 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO</p>	<p>251 LANDIS AVE CHULA VISTA, CA 91910-2628 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i></p> <p>GLEASON, SHEILA, PSY <i>Provider Gender:</i> Female <i>License number:</i> 13685 <i>NPI:</i> 1366641813 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST CHULA VISTA, CA 91911-1208 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for</p>	<p>Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM</p> <p>GONZALES, JULIANA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 83254 <i>NPI:</i> 1821487406 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST CHULA VISTA, CA 91911-1208 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for</p>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accessibility information
Hours: M 8:30AM-5PM, TU
9AM-4:15PM, F
8:30AM-12:30PM

GONZALEZ, ANDREA, CSW

Provider Gender: Female
License number: 97593
NPI: 1326346198
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
352 L ST
CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M 8:30AM-5PM, TU
9AM-4:15PM, F
8:30AM-12:30PM

GONZALEZ, ANDREA, CSW

Provider Gender: Female
License number: 97593
NPI: 1326346198

Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

GONZALEZ, ANDREA, CSW

Provider Gender: Female
License number: 97593
NPI: 1326346198
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
248 LANDIS AVE
CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

GOTTUNG, CHRISTINA, CSW

Provider Gender: Female
License number: 87716
NPI: 1134597123
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
248 LANDIS AVE
CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Spanish, Vietnamese, Yue

Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

GOTTUNG, CHRISTINA, CSW

Provider Gender: Female

License number: 87716

NPI: 1134597123

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours:

GUTIERREZ, APRIL P , CSW

Provider Gender: Female

License number: 86166

NPI: 1356749949

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours:

GUTIERREZ, APRIL P , CSW

Provider Gender: Female

License number: 86166

NPI: 1356749949

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

248 LANDIS AVE

CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619) 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue

Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

GUTIERREZ, APRIL P , CSW

Provider Gender: Female

License number: 86166

NPI: 1356749949

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

352 L ST

CHULA VISTA, CA 91911-1208

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian,

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM	Hours: M-F 8:30AM-5PM HARRIMAN, CORAL, PSY Provider Gender: Female License number: 26098 NPI: 1417373069 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM	CHULA VISTA, CA 91911-1208 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM
HARRIMAN, CORAL, PSY Provider Gender: Female License number: 26098 NPI: 1417373069 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information	HARRIMAN, CORAL, PSY Provider Gender: Female License number: 26098 NPI: 1417373069 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST	HAYDEN WADE, HELEN, PSY Provider Gender: Female License number: PSY19313 NPI: 1366951105 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST CHULA VISTA, CA 91911-1208 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM

HAYDEN WADE, HELEN, PSY

Provider Gender: Female

License number: PSY19313

NPI: 1366951105

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

248 LANDIS AVE

CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619) 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

HAYDEN WADE, HELEN, PSY

Provider Gender: Female

License number: PSY19313

NPI: 1366951105

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619) 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours:

HEDMAN, TERI LEE, CSW

Provider Gender: U

License number: 74947

NPI: 1154811636

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours:

HEDMAN, TERI LEE, CSW

Provider Gender: U

License number: 74947

NPI: 1154811636

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

248 LANDIS AVE

CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

HEDMAN, TERI LEE, CSW

Provider Gender: U
License number: 74947
NPI: 1154811636
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information

Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM

HORNBROOK, JESSICA, CSW

Provider Gender: Female
License number: 26598
NPI: 1134401805
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM

HUBER, REBECCA, MD

Provider Gender: Female
License number: A133711
NPI: 1174960686
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

HUBER, REBECCA, MD

Provider Gender: Female
License number: A133711
NPI: 1174960686
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com

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J. Directorio de proveedores de salud mental

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

HUBER, REBECCA, MD

Provider Gender: Female
License number: A133711
NPI: 1174960686
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

HUDSON, KATE, CSW

Provider Gender: Female
License number: 83712
NPI: 1194159384
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

ISHIDA, YO, CSW

Provider Gender: Female
License number: 29526
NPI: 1225154081

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

ISHIDA, YO, CSW

Provider Gender: Female
License number: 29526
NPI: 1225154081
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours:

ISHIDA, YO, CSW

Provider Gender: Female
 License number: 29526
 NPI: 1225154081
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue

Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

JACKSON, TIENNA S , CSW

Provider Gender: Female
 License number: 89122
 NPI: 1194976225
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
 Phone: (619) 515-2338

Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours:

JACKSON, TIENNA S , CSW

Provider Gender: Female
 License number: 89122
 NPI: 1194976225
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
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 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

JALAN, DEVESH, MD

Provider Gender: Male
 License number: A167754
 NPI: 1083092134
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours:

JALAN, DEVESH, MD

Provider Gender: Male
 License number: A167754
 NPI: 1083092134
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue

Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

JALAN, DEVESH, MD

Provider Gender: Male
 License number: A167754
 NPI: 1083092134
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

JAMES, CHRISTINE E , MD

Provider Gender: Female
 License number: 20A13931
 NPI: 1679834022
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

JAMES, CHRISTINE E , MD

Provider Gender: Female
 License number: 20A13931
 NPI: 1679834022
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

JAMES, CHRISTINE E , MD

Provider Gender: Female
License number: 20A13931
NPI: 1679834022
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
248 LANDIS AVE
CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,

Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

JASSO-RAMIREZ, MARTHA, CSW

Provider Gender: Female
License number: 26493
NPI: 1871772020
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
352 L ST
CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for

Accessibility information
Hours: M 8:30AM-5PM, TU
9AM-4:15PM, F
8:30AM-12:30PM

JAUREGUI, CYNTHIA J , MFT

Provider Gender: Female
License number: 46152
NPI: 1003953886
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
248 LANDIS AVE
CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

JAUREGUI, CYNTHIA J , MFT

Provider Gender: Female
License number: 46152
NPI: 1003953886
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Language(s) Spoken: Spanish
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours:

JONES, ADELE, PSY
Provider Gender: Female
License number: 25311
NPI: 1558602490
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338

Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours:

JONES, ADELE, PSY
Provider Gender: Female
License number: 25311
NPI: 1558602490
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM

JONES, ADELE, PSY
Provider Gender: Female
License number: 25311
NPI: 1558602490
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

JONES, ATAVIA L , CSW
Provider Gender: Female
License number: LCSW76796

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J. Directorio de proveedores de salud mental

NPI: 1952734899
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours:

JONES, ATAVIA L , CSW
 Provider Gender: Female
 License number: LCSW76796
 NPI: 1952734899
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338

Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

JONES, MICHAEL A , CSW
 Provider Gender: Male
 License number: LCS 22452
 NPI: 1548205719
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender

Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

JONES, MICHAEL A , CSW
 Provider Gender: Male
 License number: LCS 22452
 NPI: 1548205719
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

JONES, MICHAEL A , CSW
 Provider Gender: Male

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J. Directorio de proveedores de salud mental

License number: LCS 22452
NPI: 1548205719
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

KEI, JUSTIN, MD

Provider Gender: Male
License number: A138266
NPI: 1396150041
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

KEI, JUSTIN, MD

Provider Gender: Male
License number: A138266
NPI: 1396150041
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
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 515-2338
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 www.beaconhealthoptions.com
Accepting New Patients: Yes
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Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,

Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

KEI, JUSTIN, MD

Provider Gender: Male
License number: A138266
NPI: 1396150041
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
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After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

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J. Directorio de proveedores de salud mental

<p>KELLEY, KIMBERLY L , CSW <i>Provider Gender:</i> Female <i>License number:</i> 97888 <i>NPI:</i> 1326447897 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i></p>	<p><i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>Spanish, Vietnamese, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>
<p>KELLEY, KIMBERLY L , CSW <i>Provider Gender:</i> Female <i>License number:</i> 97888 <i>NPI:</i> 1326447897 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609</p>	<p>KHAN, MAYSUN, CSW <i>Provider Gender:</i> Female <i>License number:</i> 71910 <i>NPI:</i> 1033519632 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i></p>	<p>KHAN, MAYSUN, CSW <i>Provider Gender:</i> Female <i>License number:</i> 71910 <i>NPI:</i> 1033519632 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i></p>

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J. Directorio de proveedores de salud mental

<p>KLOBERDANZ, KELSEY L , NPA <i>Provider Gender:</i> Female <i>License number:</i> 95005293 <i>NPI:</i> 1235672502 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i></p>	<p>352 L ST CHULA VISTA, CA 91911-1208 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM</p>	<p><i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>
<p>KLOBERDANZ, KELSEY L , NPA <i>Provider Gender:</i> Female <i>License number:</i> 95005293 <i>NPI:</i> 1235672502 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO</p>	<p>KLOBERDANZ, KELSEY L , NPA <i>Provider Gender:</i> Female <i>License number:</i> 95005293 <i>NPI:</i> 1235672502 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes</p>	<p>KNIGHT, MARK ANTHONY, MD <i>Provider Gender:</i> Male <i>License number:</i> A94460 <i>NPI:</i> 1851573554 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST CHULA VISTA, CA 91911-1208 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes</p>

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J. Directorio de proveedores de salud mental

Please contact provider for
Accessibility information
Hours: M 8:30AM-5PM, TU
9AM-4:15PM, F
8:30AM-12:30PM

KNIGHT, MARK ANTHONY, MD

Provider Gender: Male
License number: A94460
NPI: 1851573554
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

KNIGHT, MARK ANTHONY, MD

Provider Gender: Male
License number: A94460
NPI: 1851573554
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
248 LANDIS AVE
CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

KOH, STEVE H , MD

Provider Gender: Male
License number: A103468
NPI: 1467650473
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
248 LANDIS AVE
CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

KRITTMAN, STUART W , PSY

Provider Gender: Male
License number: PSY20233
NPI: 1174964399
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
248 LANDIS AVE
CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions

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J. Directorio de proveedores de salud mental

American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

KRITTMAN, STUART W , PSY

Provider Gender: Male
License number: PSY20233
NPI: 1174964399
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours:

KYLE, MARCIE, CSW

Provider Gender: Female
License number: LCSW78555
NPI: 1174981500
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours:

KYLE, MARCIE, CSW

Provider Gender: Female
License number: LCSW78555
NPI: 1174981500
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 248 LANDIS AVE
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Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

KYLE, MARCIE, CSW

Provider Gender: Female
License number: LCSW78555
NPI: 1174981500
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Please contact provider for
Accessibility information
Hours: M 8:30AM-5PM, TU
9AM-4:15PM, F
8:30AM-12:30PM

LEBLANC, ASHLEY B , CSW

Provider Gender: Female
License number: 83136
NPI: 1275905622
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
352 L ST
CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:

Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information
Hours: M 8:30AM-5PM, TU
9AM-4:15PM, F
8:30AM-12:30PM

LIDSTONE, PAVEN, MD

Provider Gender: Female
License number: 161149
NPI: 1942662093

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO

352 L ST
CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No

Min/Max Age:
Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M 8:30AM-5PM, TU
9AM-4:15PM, F
8:30AM-12:30PM

LIDSTONE, PAVEN, MD

Provider Gender: Female
License number: 161149
NPI: 1942662093
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910-2628

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

LIDSTONE, PAVEN, MD

Provider Gender: Female
License number: 161149
NPI: 1942662093
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
248 LANDIS AVE
CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	<i>Provider Gender:</i> Female <i>License number:</i> 20A13075 <i>NPI:</i> 1083963094 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM	<i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM
LIM, SANDRA S , MD <i>Provider Gender:</i> Female <i>License number:</i> 20A13075 <i>NPI:</i> 1083963094 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i>	LIPPERT, HEATHER M , CSW <i>Provider Gender:</i> Female <i>License number:</i> 22526 <i>NPI:</i> 1093991663 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST CHULA VISTA, CA 91911-1208	LIPPERT, HEATHER M , CSW <i>Provider Gender:</i> Female <i>License number:</i> 22526 <i>NPI:</i> 1093991663 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi,
LIM, SANDRA S , MD		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Portuguese, Russian, Spanish,
Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

LIPPERT, HEATHER M , CSW
Provider Gender: Female
License number: 22526
NPI: 1093991663
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
248 LANDIS AVE
CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

LLAMAS, SASHA G , CSW
Provider Gender: Female
License number: 94249
NPI: 1356713739
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
248 LANDIS AVE
CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

LLAMAS, SASHA G , CSW
Provider Gender: Female
License number: 94249
NPI: 1356713739
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
251 LANDIS AVE

CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

LOEB, CINDY, CSW
Provider Gender: Female
License number: 75333
NPI: 1619108511
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
248 LANDIS AVE
CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,

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J. Directorio de proveedores de salud mental

Spanish, Vietnamese, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	LOEB, CINDY, CSW Provider Gender: Female License number: 75333 NPI: 1619108511 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST CHULA VISTA, CA 91911-1208 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM	352 L ST CHULA VISTA, CA 91911-1208 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM
LOEB, CINDY, CSW Provider Gender: Female License number: 75333 NPI: 1619108511 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours:	LYDIARD, JESSICA, MD Provider Gender: Female License number: A171775 NPI: 1841731296 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes	LYDIARD, JESSICA, MD Provider Gender: Female License number: A171775 NPI: 1841731296 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes

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J. Directorio de proveedores de salud mental

<p><i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i></p> <p>LYDIARD, JESSICA, MD <i>Provider Gender:</i> Female <i>License number:</i> A171775 <i>NPI:</i> 1841731296 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p><i>Accessibility information</i> <i>Hours:</i> M-F 8:30AM-5PM</p> <p>LYONS, KEITH E , CSW <i>Provider Gender:</i> Male <i>License number:</i> 92724 <i>NPI:</i> 1538704002 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i></p> <p>LYONS, KEITH E , CSW <i>Provider Gender:</i> Male <i>License number:</i> 92724 <i>NPI:</i> 1538704002 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO</p>	<p>248 LANDIS AVE CHULA VISTA, CA 91910-2609 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p> <p>LYONS, KEITH E , CSW <i>Provider Gender:</i> Male <i>License number:</i> 92724 <i>NPI:</i> 1538704002 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST CHULA VISTA, CA 91911-1208 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i></p>
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J. Directorio de proveedores de salud mental

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM

MACMASTER, LINDSAY, PSY

Provider Gender: Female

License number: 25570

NPI: 1659520179

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619) 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for

Accessibility information

Hours:

MACMASTER, LINDSAY, PSY

Provider Gender: Female

License number: 25570

NPI: 1659520179

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

352 L ST

CHULA VISTA, CA 91911-1208

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619) 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM

MACMASTER, LINDSAY, PSY

Provider Gender: Female

License number: 25570

NPI: 1659520179

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

248 LANDIS AVE

CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619) 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

MAHONEY, PATRICIA A , CSW

Provider Gender: Female

License number: 22296

NPI: 1700200888

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

352 L ST

CHULA VISTA, CA 91911-1208

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619) 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM</p> <p>MAIETTA, KATHLEEN H , CSW <i>Provider Gender:</i> Female <i>License number:</i> 88399 <i>NPI:</i> 1487128617 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST CHULA VISTA, CA 91911-1208 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i></p>	<p>Yes Please contact provider for Accessibility information <i>Hours:</i> M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM</p> <p>MALAK, LAWRENCE, MD <i>Provider Gender:</i> Male <i>License number:</i> A115345 <i>NPI:</i> 1467773028 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i></p> <p>MALAK, LAWRENCE, MD <i>Provider Gender:</i> Male <i>License number:</i> A115345 <i>NPI:</i> 1467773028 <i>Provider English Spoken:</i> Yes</p>	<p><i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p> <p>MARTINEZ, IVONNE B , CSW <i>Provider Gender:</i> Female <i>License number:</i> 85604 <i>NPI:</i> 1225355498 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338</p>
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J. Directorio de proveedores de salud mental

<p><i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p><i>Restrictions</i> <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i></p> <p>MARTINEZ, STEPHANIE, MD <i>Provider Gender:</i> Female <i>License number:</i> 152787 <i>NPI:</i> 1699126367 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p><i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>
<p>MARTINEZ, IVONNE B , CSW <i>Provider Gender:</i> Female <i>License number:</i> 85604 <i>NPI:</i> 1225355498 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>MARTINEZ, STEPHANIE, MD <i>Provider Gender:</i> Female <i>License number:</i> 152787 <i>NPI:</i> 1699126367 <i>Provider English Spoken:</i> Yes</p>	<p>MARTIR, MICHEL, CSW <i>Provider Gender:</i> Female <i>License number:</i> 73174 <i>NPI:</i> 1356528434 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST CHULA VISTA, CA 91911-1208 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338</p>

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J. Directorio de proveedores de salud mental

<p><i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM</p>	<p><i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i></p>	<p><i>Provider Gender:</i> Female <i>License number:</i> 14201 <i>NPI:</i> 1396838082 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i></p>
<p>MARTIR, MICHEL, CSW <i>Provider Gender:</i> Female <i>License number:</i> 73174 <i>NPI:</i> 1356528434 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>MARTIR, MICHEL, CSW <i>Provider Gender:</i> Female <i>License number:</i> 73174 <i>NPI:</i> 1356528434 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>MCADAMS, HILDA, NPA <i>Provider Gender:</i> Female <i>License number:</i> 14201 <i>NPI:</i> 1396838082 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609</p>

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J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

MCADAMS, HILDA, NPA

Provider Gender: Female
 License number: 14201
 NPI: 1396838082
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,

Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

MCGINLEY, NANCY R , MD

Provider Gender: Female
 License number: A167231
 NPI: 1649765124
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for

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

MCGINLEY, NANCY R , MD

Provider Gender: Female
 License number: A167231
 NPI: 1649765124
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours:
MCHENRY, KELLY, CSW
 Provider Gender: Female
 License number: 29689
 NPI: 1851544340
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 American Sign Language
 Cultural Competency:
 FAMILY HEALTH CENTERS OF

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J. Directorio de proveedores de salud mental

SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours:

MCHENRY, KELLY, CSW
Provider Gender: Female
License number: 29689
NPI: 1851544340
Provider English Spoken: Yes
Provider Language(s) Spoken:
 American Sign Language
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM

MCHENRY, KELLY, CSW
Provider Gender: Female
License number: 29689
NPI: 1851544340
Provider English Spoken: Yes
Provider Language(s) Spoken:
 American Sign Language
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 248 LANDIS AVE
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After Hours Phone: (619) 515-2338
Website:
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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions

American Sign Language (ASL):
 Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

MEJIA, RITA I, MFT
Provider Gender: Female
License number: 99697
NPI: 1952741506
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
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Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions

American Sign Language (ASL):
 Yes
 Please contact provider for Accessibility information
Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM

MEJIA, RITA I, MFT
Provider Gender: Female
License number: 99697
NPI: 1952741506

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J. Directorio de proveedores de salud mental

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
248 LANDIS AVE
CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
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515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

MEJIA, RITA I , MFT

Provider Gender: Female
License number: 99697
NPI: 1952741506
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
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Fax: (619) 702-8536
After Hours Phone: (619)
515-2338

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

MENDEZ PEREZ, MARIA C , CSW

Provider Gender: Female
License number: 89151
NPI: 1356902795
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
248 LANDIS AVE
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515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese
TDD: No
Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

MENDEZ PEREZ, MARIA C , CSW

Provider Gender: Female
License number: 89151
NPI: 1356902795
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
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Site Language(s) Spoken:
American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

MENDEZ, ANDRES G , PSY

Provider Gender: Male
License number: 28907

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J. Directorio de proveedores de salud mental

NPI: 1841482692
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

MERRILL, SARAH M , CSW
 Provider Gender: Female
 License number: 79014
 NPI: 1639403884
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609

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 515-2338
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 Site Language(s) Spoken:
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 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

MERRILL, SARAH M , CSW
 Provider Gender: Female
 License number: 79014
 NPI: 1639403884
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,

Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours:

MERRILL, SARAH M , CSW
 Provider Gender: Female
 License number: 79014
 NPI: 1639403884
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

MILLER, DON E , PSY

Provider Gender: Male
License number: 3155
NPI: 1124068010
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
DON MILLER
 815 THIRD AVE STE 307
 CHULA VISTA, CA 91911-1310
Phone: (619) 422-2358

Fax:
After Hours Phone: (619)
 422-2358
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M 2PM-9PM, TU,W,F
 12PM-9PM, TH 6PM-9PM, SA
 12AM-5PM

MILLICAN, RUTH, PSY

Provider Gender: Female
License number: 25354
NPI: 1346472305
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
**FAMILY HEALTH CENTERS OF
 SAN DIEGO**
 352 L ST
 CHULA VISTA, CA 91911-1208

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

MILLICAN, RUTH, PSY

Provider Gender: Female
License number: 25354
NPI: 1346472305
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
**FAMILY HEALTH CENTERS OF
 SAN DIEGO**
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

Portuguese, Russian, Spanish,
 Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

MILLICAN, RUTH, PSY

Provider Gender: Female
License number: 25354
NPI: 1346472305
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
**FAMILY HEALTH CENTERS OF
 SAN DIEGO**
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

MODAD, ALBERT, PSY

Provider Gender: Female

License number: 29697

NPI: 1629453691

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Portuguese, Russian, Spanish,

Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

Hours:

MODAD, ALBERT, PSY

Provider Gender: Female

License number: 29697

NPI: 1629453691

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

248 LANDIS AVE

CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Vietnamese, Yue

Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

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

MODAD, ALBERT, PSY

Provider Gender: Female

License number: 29697

NPI: 1629453691

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

352 L ST

CHULA VISTA, CA 91911-1208

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

Hours: M 8:30AM-5PM, TU

9AM-4:15PM, F

8:30AM-12:30PM

MORALES MORENO,

MINERVA, CSW

Provider Gender: Female

License number: 63550

NPI: 1841337565

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Portuguese, Russian, Spanish,

Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>Hours:</i></p> <p>MORALES MORENO, MINERVA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 63550 <i>NPI:</i> 1841337565 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p> <p>MORALES MORENO, MINERVA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 63550 <i>NPI:</i> 1841337565 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i></p>	<p>FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST CHULA VISTA, CA 91911-1208 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM</p> <p>MORRISON, TYLER E , MD <i>Provider Gender:</i> Male <i>License number:</i> A144917 <i>NPI:</i> 1912391814 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Japanese <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST CHULA VISTA, CA 91911-1208 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338</p>	<p><i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM</p> <p>NADEAU MANNING, JULIE, CSW <i>Provider Gender:</i> Female <i>License number:</i> 25094 <i>NPI:</i> 1275609760 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST CHULA VISTA, CA 91911-1208 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No</p>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM

NADEAU MANNING, JULIE, CSW

Provider Gender: Female

License number: 25094

NPI: 1275609760

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

248 LANDIS AVE

CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Vietnamese, Yue

Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for

Accessibility information

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

NADEAU MANNING, JULIE, CSW

Provider Gender: Female

License number: 25094

NPI: 1275609760

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Portuguese, Russian, Spanish,

Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for

Accessibility information

Hours:

NAFICY, MAJID, MD

Provider Gender: Male

License number: G70878

NPI: 1265564553

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi, Spanish

Cultural Competency:

COMMUNITY RESEARCH

FOUNDATION INC

835 THIRD AVE

CHULA VISTA, CA 91911-1352

Phone: (619) 427-4661

Fax: (619) 426-7849

After Hours Phone: (619)

427-4661

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Farsi,

Spanish

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for

Accessibility information

Hours: M 9AM-8PM, TU,W,F

9AM-5PM, TH 12PM-8PM

NAZARIO, JACOBETH, PSY

Provider Gender: Female

License number: PSY32092

NPI: 1326648684

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

352 L ST

CHULA VISTA, CA 91911-1208

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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J. Directorio de proveedores de salud mental

Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM	Accessibility information Hours: M-F 8:30AM-5PM NOUHI, NUSHA, PSY Provider Gender: Female License number: 27670 NPI: 1942433917 Provider English Spoken: Yes Provider Language(s) Spoken: Farsi Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM	FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST CHULA VISTA, CA 91911-1208 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM
NOUHI, NUSHA, PSY Provider Gender: Female License number: 27670 NPI: 1942433917 Provider English Spoken: Yes Provider Language(s) Spoken: Farsi Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for	NOUHI, NUSHA, PSY Provider Gender: Female License number: 27670 NPI: 1942433917 Provider English Spoken: Yes Provider Language(s) Spoken: Farsi Cultural Competency:	NWANGANGA, OKECHUKU R , CSW Provider Gender: Male License number: 27072 NPI: 1285984450 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST CHULA VISTA, CA 91911-1208 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM</p>	<p><i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i></p>	<p><i>NPI:</i> 1093882698 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST CHULA VISTA, CA 91911-1208 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM</p>
<p>OBRYAN, KELLY, PSY <i>Provider Gender:</i> Female <i>License number:</i> 24966 <i>NPI:</i> 1093882698 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>OBRYAN, KELLY, PSY <i>Provider Gender:</i> Female <i>License number:</i> 24966 <i>NPI:</i> 1093882698 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>OJHA, PRITI, MD <i>Provider Gender:</i> Female <i>License number:</i> A139807 <i>NPI:</i> 1760897284 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours:

OJHA, PRITI, MD

Provider Gender: Female
 License number: A139807
 NPI: 1760897284
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue

Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

OLIVER, ELIZABETH, CSW

Provider Gender: Female
 License number: 66862
 NPI: 1326296351
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

OMORODIN, AISHA, MD

Provider Gender: Female
 License number: A169651
 NPI: 1629500301
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours:

OMORODIN, AISHA, MD

Provider Gender: Female
 License number: A169651
 NPI: 1629500301
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

OMORODIN, AISHA, MD

Provider Gender: Female
 License number: A169651
 NPI: 1629500301
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,

Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

ORBE, KERIN, MD

Provider Gender: Female
 License number: 20A17225
 NPI: 1114256690
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information

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

ORBE, KERIN, MD

Provider Gender: Female
 License number: 20A17225
 NPI: 1114256690
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours:

PALITZ, JEFF, MFT

Provider Gender: Male
 License number: 41250
 NPI: 1801039094
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 PALITZ, JEFF
 2400 FENTON ST STE 205
 CHULA VISTA, CA 91914-4556

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 271-8886
 Fax: (619) 414-1277
 After Hours Phone: (619) 271-8886
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M,W,F 8AM-5PM, TU,TH 10:30AM-6:30PM

PINEDO, YANELI, CSW

Provider Gender: Male
 License number: 91103
 NPI: 1710361712
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:

Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM

PRASEK, LAUREN, NPA

Provider Gender: Female
 License number: 95004145
 NPI: 1932566031
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours:

PRASEK, LAUREN, NPA

Provider Gender: Female

License number: 95004145
 NPI: 1932566031
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM

PRASEK, LAUREN, NPA

Provider Gender: Female
 License number: 95004145
 NPI: 1932566031
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

PROCTOR, MELISSA S , CSW

Provider Gender: Female
 License number: 62650
 NPI: 1336188655
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

PROOSASELTS, YULIYA, MD

Provider Gender: Female
 License number: A133675
 NPI: 1952747875
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Russian
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information

Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

PROOSASELTS, YULIYA, MD

Provider Gender: Female
 License number: A133675
 NPI: 1952747875
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Russian
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours:

PROOSASELTS, YULIYA, MD

Provider Gender: Female
 License number: A133675
 NPI: 1952747875
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Russian

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

QUIROZ, NORMA, MFT

Provider Gender: Female
License number: 50504
NPI: 1902945199
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

QUIROZ, NORMA, MFT

Provider Gender: Female
License number: 50504
NPI: 1902945199
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):

Yes
 Please contact provider for
 Accessibility information
 Hours:
RABBAN, DIANA, CSW
Provider Gender: Female
License number: 72987
NPI: 1033426374
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

RABBAN, DIANA, CSW

Provider Gender: Female
License number: 72987
NPI: 1033426374
Provider English Spoken: Yes
Provider Language(s) Spoken:

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J. Directorio de proveedores de salud mental

Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

RAMOS, ELIZABETH, CSW

Provider Gender: Female
License number: 73374
NPI: 1992046890
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

RAMOS, ELIZABETH, CSW

Provider Gender: Female
License number: 73374
NPI: 1992046890
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

RAMOS, ELIZABETH, CSW

Provider Gender: Female
License number: 73374
NPI: 1992046890
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

REGHABI, NASEEM, PSY

Provider Gender: Female
License number: 21940

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J. Directorio de proveedores de salud mental

NPI: 1225573421
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

RENTERIA, SABRINA, MD

Provider Gender: Female
License number: A145894
NPI: 1285029421
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
248 LANDIS AVE
CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

RENTERIA, SABRINA, MD

Provider Gender: Female
License number: A145894
NPI: 1285029421
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender

Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

RODRIGUEZ, CHRISTINE, PSY

Provider Gender: Female
License number: 30472
NPI: 1568656619
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
352 L ST
CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M 8:30AM-5PM, TU
9AM-4:15PM, F
8:30AM-12:30PM

RODRIGUEZ, CHRISTINE, PSY

Provider Gender: Female
License number: 30472

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J. Directorio de proveedores de salud mental

NPI: 1568656619
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours:

RODRIGUEZ, CHRISTINE, PSY
 Provider Gender: Female
 License number: 30472
 NPI: 1568656619
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338

Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

ROSENFARB, BARBARA, CSW
 Provider Gender: Female
 License number: 28590
 NPI: 1447477781
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
 TDD: No
 Min/Max Age: 0/99

Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

ROSENFARB, BARBARA, CSW
 Provider Gender: Female
 License number: 28590
 NPI: 1447477781
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours:

ROSENFARB, BARBARA, CSW
 Provider Gender: Female
 License number: 28590
 NPI: 1447477781

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J. Directorio de proveedores de salud mental

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

ROZELL, KATHY, CSW

Provider Gender: Female
License number: 25068
NPI: 1578603973
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

ROZELL, KATHY, CSW

Provider Gender: Female
License number: 25068
NPI: 1578603973
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,

Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

ROZELL, KATHY, CSW

Provider Gender: Female
License number: 25068
NPI: 1578603973
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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J. Directorio de proveedores de salud mental

SABEN, LAURENCE R , MD

Provider Gender: Male
License number: G27446
NPI: 1669454898
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
SABEN, LAURENCE
330 MOSS ST
CHULA VISTA, CA 91911-2005
Phone: (619) 440-7831
Fax: (619) 440-0540
After Hours Phone: (619)
440-7831

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: Yes
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 11AM-6PM

SACHS, MELISSA R , CSW

Provider Gender: Female
License number: 76968
NPI: 1649760356
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
352 L ST
CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M 8:30AM-5PM, TU
9AM-4:15PM, F
8:30AM-12:30PM

SANDERS, MARY, CSW

Provider Gender: Female
License number: 68062
NPI: 1740529189
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese
TDD: No
Min/Max Age:

Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

SEPULVEDA, JOE, MD

Provider Gender: Male
License number: A113283
NPI: 1306165402
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
248 LANDIS AVE
CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

SEPULVEDA, JOE, MD

Provider Gender: Male

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J. Directorio de proveedores de salud mental

License number: A113283
NPI: 1306165402
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours:

SEPULVEDA, JOE, MD

Provider Gender: Male
License number: A113283
NPI: 1306165402
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM

SHEARED, JORDAN S , CSW

Provider Gender: Female
License number: ASW74739
NPI: 1699121749
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi,

Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours:

SHEARED, JORDAN S , CSW

Provider Gender: Female
License number: ASW74739
NPI: 1699121749
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

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J. Directorio de proveedores de salud mental

SIMONENKO, IOURI I , MD

Provider Gender: Male
License number: A147937
NPI: 1891956157
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

SIMPSON, JENNIFER, CSW

Provider Gender: Female
License number: 82678
NPI: 1740765866
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE

CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

SIMPSON, JENNIFER, CSW

Provider Gender: Female
License number: 82678
NPI: 1740765866
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,

Portuguese, Russian, Spanish,
 Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

SIMPSON, JENNIFER, CSW

Provider Gender: Female
License number: 82678
NPI: 1740765866
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

8:30AM-12:30PM

SIPIN, ELVIRA P , CSW

Provider Gender: Female
License number: LCS15308
NPI: 1477759892
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

SIPIN, ELVIRA P , CSW

Provider Gender: Female
License number: LCS15308
NPI: 1477759892
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE

CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

SIPIN, ELVIRA P , CSW

Provider Gender: Female
License number: LCS15308
NPI: 1477759892
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,

Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

STEWART, ANDREA M , MFT

Provider Gender: U
License number: 45174
NPI: 1508993122
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>Hours:</i></p> <p>STEWART, ANDREA M , MFT <i>Provider Gender:</i> U <i>License number:</i> 45174 <i>NPI:</i> 1508993122 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p> <p>STEWART, ANDREA M , MFT <i>Provider Gender:</i> U <i>License number:</i> 45174 <i>NPI:</i> 1508993122 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO</p>	<p>352 L ST CHULA VISTA, CA 91911-1208 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM</p> <p>TAHBAZ, ASH, MFT <i>Provider Gender:</i> U <i>License number:</i> 87601 <i>NPI:</i> 1205294543 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes</p>	<p><i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i></p> <p>TAHBAZ, ASH, MFT <i>Provider Gender:</i> U <i>License number:</i> 87601 <i>NPI:</i> 1205294543 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST CHULA VISTA, CA 91911-1208 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information</p>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Hours: M 8:30AM-5PM, TU
9AM-4:15PM, F
8:30AM-12:30PM

TAHBAZ, ASH, MFT

Provider Gender: U
License number: 87601
NPI: 1205294543
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
248 LANDIS AVE
CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

THICKSTUN, MARY SUSAN, CSW

Provider Gender: Female
License number: 21573
NPI: 1437354875
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
352 L ST
CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M 8:30AM-5PM, TU
9AM-4:15PM, F
8:30AM-12:30PM

THICKSTUN, MARY SUSAN, CSW

Provider Gender: Female
License number: 21573
NPI: 1437354875
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

THICKSTUN, MARY SUSAN, CSW

Provider Gender: Female
License number: 21573
NPI: 1437354875
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
248 LANDIS AVE
CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese
TDD: No
Min/Max Age: 0/99

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J. Directorio de proveedores de salud mental

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

THIESSEN, BRUCE L , PSY

Provider Gender: U
License number: 14259
NPI: 1841541984
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM

TONG, GARRICK, MD

Provider Gender: Male

License number: A102192
NPI: 1831361278
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Yue Chinese
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours:

TONG, GARRICK, MD

Provider Gender: Male
License number: A102192
NPI: 1831361278
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Yue Chinese
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

TONG, GARRICK, MD

Provider Gender: Male
License number: A102192
NPI: 1831361278
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Yue Chinese
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM	Hours: TORRES, LAURA, CSW Provider Gender: Female License number: 65059 NPI: 1568612943 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST CHULA VISTA, CA 91911-1208 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM
TORRES, LAURA, CSW Provider Gender: Female License number: 65059 NPI: 1568612943 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information	TORRES, LAURA, CSW Provider Gender: Female License number: 65059 NPI: 1568612943 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM	TRIANA, JENNIFER, CSW Provider Gender: Female License number: 88589 NPI: 1073844460 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes

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J. Directorio de proveedores de salud mental

Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

TRIANA, JENNIFER, CSW

Provider Gender: Female
License number: 88589
NPI: 1073844460
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):

Yes
 Please contact provider for
 Accessibility information
Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM
TRIANA, JENNIFER, CSW
Provider Gender: Female
License number: 88589
NPI: 1073844460
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

TROYER, EMILY, PSY

Provider Gender: Female
License number: A149101
NPI: 1326484437

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

TROYER, EMILY, PSY

Provider Gender: Female
License number: A149101
NPI: 1326484437
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

TROYER, EMILY, PSY

Provider Gender: Female
 License number: A149101
 NPI: 1326484437
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,

Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours:

WAUGH, BRANDON, CSW

Provider Gender: Male
 License number: 83457
 NPI: 1619459187
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

WEAVER, JHOSMARA A , CSW

Provider Gender: Female
 License number: 77233
 NPI: 1982848594
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

WEBSTER, KRISTIN K , CSW

Provider Gender: Female
 License number: LCSW16118
 NPI: 1902336837
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

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J. Directorio de proveedores de salud mental

248 LANDIS AVE
CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

WEBSTER, KRISTIN K , CSW
Provider Gender: Female
License number: LCSW16118
NPI: 1902336837
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
352 L ST
CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M 8:30AM-5PM, TU
9AM-4:15PM, F
8:30AM-12:30PM

WEBSTER, KRISTIN K , CSW
Provider Gender: Female
License number: LCSW16118
NPI: 1902336837
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for

Accessibility information
Hours:

WEISER, PENNY H , PSY
Provider Gender: Female
License number: PSY16796
NPI: 1518180330
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
WEISER, PENNY
815 THIRD AVE STE 107
CHULA VISTA, CA 91911-1308
Phone: (619) 615-9982
Fax: (619) 426-1906
After Hours Phone: (619)
615-9982
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M,TH 10AM-7PM, W
12PM-8PM, F 9AM-3PM

WIGLE, CHARLES E , MFT
Provider Gender: Male
License number: MFC29757
NPI: 1407911878
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910-2628

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours:

WIGLE, CHARLES E , MFT
 Provider Gender: Male
 License number: MFC29757
 NPI: 1407911878
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue

Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

WITT, ANNETTE, CSW
 Provider Gender: Female
 License number: 15770
 NPI: 1912263468
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

WITT, ANNETTE, CSW
 Provider Gender: Female
 License number: 15770
 NPI: 1912263468
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours:

WITT, ANNETTE, CSW
 Provider Gender: Female
 License number: 15770
 NPI: 1912263468
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>Spanish, Vietnamese, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>8:30AM-12:30PM</p>
<p>WOLF, CELIA C , NPA Provider Gender: Female License number: 95001899 NPI: 1245635564 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours:</p>	<p>WOLF, CELIA C , NPA Provider Gender: Female License number: 95001899 NPI: 1245635564 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST CHULA VISTA, CA 91911-1208 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F</p>	<p>WOLF, CELIA C , NPA Provider Gender: Female License number: 95001899 NPI: 1245635564 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours:</p>
		<p>WOOD, KEEGAN, NPA Provider Gender: Male License number: NP95006887 NPI: 1417471459 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M 8:30AM-5PM, TU

9AM-4:15PM, F

8:30AM-12:30PM

YALYSHAVA, VOLHA, CSW

Provider Gender: Female

License number: LCSW69810

NPI: 1821392002

Provider English Spoken: Yes

Provider Language(s) Spoken:

Russian

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

248 LANDIS AVE

CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue

Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL):

Yes

Please contact provider for Accessibility information

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

YALYSHAVA, VOLHA, CSW

Provider Gender: Female

License number: LCSW69810

NPI: 1821392002

Provider English Spoken: Yes

Provider Language(s) Spoken:

Russian

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL):

Yes

Please contact provider for Accessibility information

Hours:

YALYSHAVA, VOLHA, CSW

Provider Gender: Female

License number: LCSW69810

NPI: 1821392002

Provider English Spoken: Yes

Provider Language(s) Spoken:

Russian

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

352 L ST

CHULA VISTA, CA 91911-1208

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M 8:30AM-5PM, TU

9AM-4:15PM, F

8:30AM-12:30PM

YSLA, FRANCIS M , MD

Provider Gender: Male

License number: A155712

NPI: 1578978854

Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours:

YSLA, FRANCIS M , MD

Provider Gender: Male
License number: A155712
NPI: 1578978854
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

ZARANKOW, BEATA, MD

Provider Gender: Female
License number: C53656
NPI: 1902995384
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
COMMUNITY RESEARCH FOUNDATION INC
 835 THIRD AVE
 CHULA VISTA, CA 91911-1352
Phone: (619) 427-4661
Fax: (619) 426-7849
After Hours Phone: (619) 427-4661
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Farsi, Spanish
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for

Accessibility information
Hours: M 9AM-8PM, TU,W,F 9AM-5PM, TH 12PM-8PM

ZAYAS, GILBERTO, MD

Provider Gender: Male
License number: A136760
NPI: 1508174970
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

ZAYAS, GILBERTO, MD

Provider Gender: Male
License number: A136760
NPI: 1508174970
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

ZAYAS, GILBERTO, MD
Provider Gender: Male
License number: A136760
NPI: 1508174970
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

DEL MAR

MOTAGHED, HENGAMEH, PSY
Provider Gender: Female
License number: 12707
NPI: 1366550592
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Farsi
Cultural Competency:
 MOTAGHED, HENGAMEH
 14034 BOQUITA DR
 DEL MAR, CA 92014-2945
Phone: (619) 969-6790
Fax:
After Hours Phone: (619)
 969-6790
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Farsi
TDD: No

Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours:

SHEZIFI, ODED R, PSY
Provider Gender: Male
License number: 21162
NPI: 1366647489
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Hebrew
Cultural Competency:
 SHEZIFI, ODED
 317 14TH ST STE E
 DEL MAR, CA 92014-2554
Phone: (858) 260-3583
Fax:

After Hours Phone: (858)
 260-3583
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Hebrew
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours:

EL CAJON

ABDULLAH, KERI, PSY
Provider Gender: Female
License number: 29990

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

NPI: 1699840587
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
 Phone: (619) 515-2499
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2499
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

ABDULLAH, KERI, PSY
 Provider Gender: Female
 License number: 29990
 NPI: 1699840587
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619)
 515-2300

Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

AGUIRRE, LEAH B , CSW
 Provider Gender: Female
 License number: 74440
 NPI: 1306151998
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
 Phone: (619) 515-2499
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2499
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

AGUIRRE, LEAH B , CSW
 Provider Gender: Female
 License number: 74440
 NPI: 1306151998
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2300
 Fax:

After Hours Phone: (619)
 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

AGUIRRE, WENDY, CSW
 Provider Gender: Female
 License number: 74219
 NPI: 1205946282
 Provider English Spoken: Yes
 Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

AGUIRRE, WENDY, CSW
Provider Gender: Female
License number: 74219
NPI: 1205946282
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2499

Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

ALAVI, ALI S , MD
Provider Gender: Male
License number: A163793
NPI: 1356856694
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2499
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

ALAVI, ALI S , MD
Provider Gender: Male
License number: A163793
NPI: 1356856694
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:

After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

ALFARO, AMY, CSW
Provider Gender: Female
License number: 72874
NPI: 1609326859
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2499
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

ALFARO, AMY, CSW
Provider Gender: Female
License number: 72874
NPI: 1609326859
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300

Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

ALLEN, JOHN W , MD
Provider Gender: Male
License number: C37706
NPI: 1659382588
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 ALLEN, JOHN
 225 W MADISON AVE STE 2
 EL CAJON, CA 92020-3454
Phone: (619) 631-4505
Fax: (619) 713-6290
After Hours Phone: (619)
 631-4505
Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information

Hours: M,W 9AM-6PM, TU,TH,F
 9AM-5PM

ALTERS, DENNIS, MD
Provider Gender: Male
License number: G36206
NPI: 1457371635
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

ALTERS, DENNIS, MD
Provider Gender: Male
License number: G36206
NPI: 1457371635
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

1111 W CHASE AVE
EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)

515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

ANDERSEN, CLAIRE, MD

Provider Gender: Female

License number: 125942

NPI: 1831418664

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

855 E MADISON AVE

EL CAJON, CA 92020-3819

Phone: (619) 440-2751

Fax:

After Hours Phone: (619)

440-2751

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Arabic, Hindi, Nepali (Individual

Language), Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M,W-F 8AM-5PM, TU
8AM-8PM

ARAGON, DARINKA M , MD

Provider Gender: Female

License number: A139241

NPI: 1114347291

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

ARAGON, DARINKA M , MD

Provider Gender: Female

License number: A139241

NPI: 1114347291

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)

515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

ARIELLA, LYNDIA R , PSY

Provider Gender: Female

License number: 19450

NPI: 1073518965

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2499
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2499
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

ARIELLA, LYNDA R , PSY

Provider Gender: Female
 License number: 19450
 NPI: 1073518965
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619)
 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

ARNOLD, REBECCA L , MFT

Provider Gender: Female
 License number: LMFT95778
 NPI: 1225580350
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 855 E MADISON AVE
 EL CAJON, CA 92020-3819
 Phone: (619) 440-2751
 Fax:

After Hours Phone: (619)
 440-2751
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Arabic, Hindi, Nepali (Individual
 Language), Spanish
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M,W-F 8AM-5PM, TU
 8AM-8PM

ASH, VIVIAN, CSW

Provider Gender: Female

License number: 14619
 NPI: 1033623293
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2300

Fax:
 After Hours Phone: (619)
 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

ASH, VIVIAN, CSW

Provider Gender: Female
 License number: 14619
 NPI: 1033623293
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710

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J. Directorio de proveedores de salud mental

Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

ASUNCION, JENNIFER, CSW
Provider Gender: Male
License number: LCSW75956
NPI: 1083056279
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

ASUNCION, JENNIFER, CSW
Provider Gender: Male
License number: LCSW75956
NPI: 1083056279
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619)
515-2499
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

AUCOIN, DOUGLAS, CSW
Provider Gender: Male

License number: 24707
NPI: 1699007609
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

AUCOIN, DOUGLAS, CSW
Provider Gender: Male
License number: 24707
NPI: 1699007609
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2499
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2499
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

AVILA, RADOMIR M , CSW
 Provider Gender: Male
 License number: 75520
 NPI: 1487937330
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Portuguese, Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
 Phone: (619) 515-2499
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2499
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,

Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

AVILA, RADOMIR M , CSW
 Provider Gender: Male
 License number: 75520
 NPI: 1487937330
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Portuguese, Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

BANZON, CHARLES, MFT
 Provider Gender: Male
 License number: 49126
 NPI: 1457422966
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

BANZON, CHARLES, MFT
 Provider Gender: Male
 License number: 49126
 NPI: 1457422966
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

BARCELOS ANTONIO, TIAGO, CSW

Provider Gender: Male
License number: 90529
NPI: 1194159871
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,

Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

BARCELOS ANTONIO, TIAGO, CSW

Provider Gender: Male
License number: 90529
NPI: 1194159871
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

BARTHOLOMEW, SARAH C , CSW

Provider Gender: Female
License number: 86542
NPI: 1720339708
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
680 FLETCHER PKWY STE 200
EL CAJON, CA 92020-2500
Phone: (619) 515-2338
Fax: (619) 269-0598
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5:30PM

BARTHOLOMEW, SARAH C , CSW

Provider Gender: Female
License number: 86542
NPI: 1720339708
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2499
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2499
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

BARTHOLOMEW, SARAH C , CSW

Provider Gender: Female
 License number: 86542
 NPI: 1720339708
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619)
 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,

Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

BELINSKY, MARIA T , CSW

Provider Gender: Female
 License number: LCSW69175
 NPI: 1760867824
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 855 E MADISON AVE
 EL CAJON, CA 92020-3819
 Phone: (619) 440-2751
 Fax:
 After Hours Phone: (619)
 440-2751
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Arabic, Hindi, Nepali (Individual
 Language), Spanish
 TDD: No

Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M,W-F 8AM-5PM, TU
 8AM-8PM

BENNETT, RACHEL Q , CSW

Provider Gender: Female
 License number: 76466
 NPI: 1558659797
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
 Phone: (619) 515-2499
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2499
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

BENNETT, RACHEL Q , CSW

Provider Gender: Female
 License number: 76466
 NPI: 1558659797
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)
515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

BENZL, JERRY F , MD

Provider Gender: Male

License number: A154471

NPI: 1487032082

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

BENZL, JERRY F , MD

Provider Gender: Male

License number: A154471

NPI: 1487032082

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)

515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

BERKSON, BARRIE, CSW

Provider Gender: Female

License number: 63313

NPI: 1922305465

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)

515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

BERKSON, BARRIE, CSW

Provider Gender: Female

License number: 63313

NPI: 1922305465

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

BHAJU, JESHMIN, PSY

Provider Gender: Female
 License number: 31625
 NPI: 1497081566
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Hindi, Nepali (Individual Language)
 Cultural Competency:
 NEIGHBORHOOD HEALTHCARE
 855 E MADISON AVE
 EL CAJON, CA 92020-3819
 Phone: (619) 440-2751
 Fax:
 After Hours Phone: (619) 440-2751
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Arabic, Hindi, Nepali (Individual

Language), Spanish
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M,W-F 8AM-5PM, TU 8AM-8PM

BHATIA, PRAKASH K , MD

Provider Gender: Male
 License number: A74848
 NPI: 1164464137
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 BHATIA HEALTH SERVICES A MEDICAL CORPORATION
 161 E MAIN ST STE 100
 EL CAJON, CA 92020-3993
 Phone: (619) 631-0128
 Fax: (619) 631-0153
 After Hours Phone: (619) 631-0128
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 TDD: No
 Min/Max Age: 0/64
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M,W 9AM-5PM, F 12:30PM-4PM

BIRNBAUM, DEBORAH, MD

Provider Gender: Female

License number: 20A11387
 NPI: 1639308265
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

BIRNBAUM, DEBORAH, MD

Provider Gender: Female
 License number: 20A11387
 NPI: 1639308265
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2499
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2499
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

BOND, ALAN, PSY

Provider Gender: Male
 License number: PSY25805
 NPI: 1881927184
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
 Phone: (619) 515-2499
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2499
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

BORREGO, DIANA E , NPA

Provider Gender: Female
 License number: 95005019
 NPI: 1184012866
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2300
 Fax:

After Hours Phone: (619)
 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

BORREGO, DIANA E , NPA

Provider Gender: Female

License number: 95005019
 NPI: 1184012866
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
 Phone: (619) 515-2499
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2499
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

BUBY, MYRA, CSW

Provider Gender: Female
 License number: 23172
 NPI: 1093747511
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)
515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

BUBY, MYRA, CSW

Provider Gender: Female

License number: 23172

NPI: 1093747511

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)

515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

BURGOS, EDNA, CSW

Provider Gender: Female

License number: 85597

NPI: 1134591167

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)
515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

BURGOS, EDNA, CSW

Provider Gender: Female

License number: 85597

NPI: 1134591167

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)

515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for

Accessibility information

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

BURNS, PETER B , MD

Provider Gender: Male

License number: G145142

NPI: 1891727533

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

EL CAJON, CA 92020-4007

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

BUTERBAUGH, KRISTY L , CSW

Provider Gender: Female

License number: 65477

NPI: 1346615838

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)

515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

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

BUTERBAUGH, KRISTY L , CSW

Provider Gender: Female

License number: 65477

NPI: 1346615838

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

BYRNE, ANDREW L , MFT

Provider Gender: Male

License number: 53477

NPI: 1912213331

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

BYRNE, ANDREW

127 E LEXINGTON AVE

EL CAJON, CA 92020-4511

Phone: (619) 573-0682

Fax: (619) 328-6591

After Hours Phone: (619)

573-0682

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M, TH 9AM-5PM, TU

9AM-8:30PM, W 9AM-9PM, F

1PM-5PM

CABREJOS, CLAUDIO, MD

Provider Gender: Male

License number: A71653

NPI: 1033133483

Provider English Spoken: Yes

Provider Language(s) Spoken:

Portuguese, Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2499
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2499
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

CABREJOS, CLAUDIO, MD
 Provider Gender: Male
 License number: A71653
 NPI: 1033133483
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Portuguese, Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619)
 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,

Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

CALOCA, LAURA, PSY
 Provider Gender: Female
 License number: 29757
 NPI: 1134364698
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 855 E MADISON AVE
 EL CAJON, CA 92020-3819
 Phone: (619) 440-2751
 Fax:
 After Hours Phone: (619)
 440-2751
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Arabic, Hindi, Nepali (Individual
 Language), Spanish
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M,W-F 8AM-5PM, TU
 8AM-8PM

CANN, RONALD, MD
 Provider Gender: Male
 License number: G83523
 NPI: 1285941401
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 COMMUNITY RESEARCH
 FOUNDATION INC
 460 N MAGNOLIA AVE STE 110
 EL CAJON, CA 92020-3610
 Phone: (619) 440-5133
 Fax: (619) 440-8522
 After Hours Phone: (619)
 440-5133
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M,TU,TH,F 9AM-5PM, W
 9AM-7PM

CARDENAS, ALONSO, MD
 Provider Gender: Male
 License number: A137940
 NPI: 1811212145
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2499
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2499
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

CARDENAS, ALONSO, MD
 Provider Gender: Male
 License number: A137940
 NPI: 1811212145
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619)
 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

**CARINO DIOKNO, RHODA,
 PSY**
 Provider Gender: Female
 License number: 28073
 NPI: 1629109483
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
 Phone: (619) 515-2499
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2499
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

CARINO DIOKNO, RHODA,

PSY
 Provider Gender: Female
 License number: 28073
 NPI: 1629109483
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619)
 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

**CARLTON PENN, CORNELIA,
 PSY**
 Provider Gender: Female
 License number: PSY14310
 NPI: 1891720611
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 855 E MADISON AVE
 EL CAJON, CA 92020-3819

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>Phone: (619) 440-2751 Fax: After Hours Phone: (619) 440-2751 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Arabic, Hindi, Nepali (Individual Language), Spanish TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M,W-F 8AM-5PM, TU 8AM-8PM</p>	<p>Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M,W,F 4PM-7PM</p>	<p>NPI: 1598165441 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 525 E MAIN ST EL CAJON, CA 92020-4007 Phone: (619) 515-2300 Fax: After Hours Phone: (619) 515-2300 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM</p>
<p>CASEY, SHANNON, PSY Provider Gender: Female License number: PSY31889 NPI: 1548873755 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE 215 W MADISON AVE EL CAJON, CA 92020-3405 Phone: (619) 401-6236 Fax: (619) 667-6036 After Hours Phone: (619) 401-6236 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: TDD: No Min/Max Age: Gender Restriction: No Gender</p>	<p>CASTELLANOS, TERESITA D , CSW Provider Gender: Female License number: 82782 NPI: 1598165441 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1111 W CHASE AVE EL CAJON, CA 92020-5710 Phone: (619) 515-2499 Fax: (619) 702-8536 After Hours Phone: (619) 515-2499 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>CELAYA, MARY, NPA Provider Gender: Female License number: 11425 NPI: 1710060231 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE 855 E MADISON AVE EL CAJON, CA 92020-3819 Phone: (619) 440-2751 Fax: After Hours Phone: (619) 440-2751</p>
<p>CASEY, SHANNON, PSY Provider Gender: Female License number: PSY31889 NPI: 1548873755 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE 215 W MADISON AVE EL CAJON, CA 92020-3405 Phone: (619) 401-6236 Fax: (619) 667-6036 After Hours Phone: (619) 401-6236 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: TDD: No Min/Max Age: Gender Restriction: No Gender</p>	<p>CASTELLANOS, TERESITA D , CSW Provider Gender: Female License number: 82782</p>	<p>CELAYA, MARY, NPA Provider Gender: Female License number: 11425 NPI: 1710060231 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE 855 E MADISON AVE EL CAJON, CA 92020-3819 Phone: (619) 440-2751 Fax: After Hours Phone: (619) 440-2751</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Arabic, Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M,W-F 8AM-5PM, TU 8AM-8PM

CHAO, BRIAN, PSY

Provider Gender: Male
License number: 28796
NPI: 1114196987
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NEIGHBORHOOD HEALTHCARE
855 E MADISON AVE
EL CAJON, CA 92020-3819
Phone: (619) 440-2751
Fax:
After Hours Phone: (619) 440-2751
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Arabic, Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):

No
Please contact provider for Accessibility information
Hours: M,W-F 8AM-5PM, TU 8AM-8PM

CHEN, ANGELA, MFT

Provider Gender: Female
License number: LMFT40923
NPI: 1811027956
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

CHEN, ANGELA, MFT

Provider Gender: Female
License number: LMFT40923
NPI: 1811027956
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CHEN, ANGELA, MFT

Provider Gender: Female
License number: LMFT40923
NPI: 1811027956
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
680 FLETCHER PKWY STE 200
EL CAJON, CA 92020-2500
Phone: (619) 515-2338
Fax: (619) 269-0598
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5:30PM</p>	<p><i>Hours:</i> M-F 8:30AM-5PM</p> <p>CHRISTENSEN, MELISSA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 69616 <i>NPI:</i> 1922313394 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 525 E MAIN ST EL CAJON, CA 92020-4007 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p>	<p>525 E MAIN ST EL CAJON, CA 92020-4007 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p>
<p>CHRISTENSEN, MELISSA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 69616 <i>NPI:</i> 1922313394 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1111 W CHASE AVE EL CAJON, CA 92020-5710 <i>Phone:</i> (619) 515-2499 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2499 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information</p>	<p>CHRISTENSEN, MELISSA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 69616 <i>NPI:</i> 1922313394 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 525 E MAIN ST EL CAJON, CA 92020-4007 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p>	<p>CORVINI, NICOLAS, NPA <i>Provider Gender:</i> Male <i>License number:</i> 55107 <i>NPI:</i> 1194242461 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> NEIGHBORHOOD HEALTHCARE 855 E MADISON AVE EL CAJON, CA 92020-3819 <i>Phone:</i> (619) 440-2751 <i>Fax:</i> <i>After Hours Phone:</i> (619) 440-2751 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Arabic, Hindi, Nepali (Individual</p>
<p>CHRISTENSEN, MELISSA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 69616 <i>NPI:</i> 1922313394 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1111 W CHASE AVE EL CAJON, CA 92020-5710 <i>Phone:</i> (619) 515-2499 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2499 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information</p>	<p>CLONTS, PAUL A , CSW <i>Provider Gender:</i> Male <i>License number:</i> 87259 <i>NPI:</i> 1467808568 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO</p>	<p>CORVINI, NICOLAS, NPA <i>Provider Gender:</i> Male <i>License number:</i> 55107 <i>NPI:</i> 1194242461 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> NEIGHBORHOOD HEALTHCARE 855 E MADISON AVE EL CAJON, CA 92020-3819 <i>Phone:</i> (619) 440-2751 <i>Fax:</i> <i>After Hours Phone:</i> (619) 440-2751 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Arabic, Hindi, Nepali (Individual</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Language), Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: M,W-F 8AM-5PM, TU 8AM-8PM

COSTELLO, JENNIFER R , CSW

Provider Gender: Female

License number: 84174

NPI: 1619506250

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

855 E MADISON AVE

EL CAJON, CA 92020-3819

Phone: (619) 440-2751

Fax:

After Hours Phone: (619)

440-2751

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Arabic, Hindi, Nepali (Individual Language), Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: M,W-F 8AM-5PM, TU 8AM-8PM

CROCKFORD, DANE, PSY

Provider Gender: Male

License number: 28313

NPI: 1780031831

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

CROCKFORD, DANE, PSY

Provider Gender: Male

License number: 28313

NPI: 1780031831

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619) 515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

CRUZ ARAUJO, ANDREA L , MD

Provider Gender: Female

License number: A160789

NPI: 1124401435

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian,

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

CRUZ ARAUJO, ANDREA L , MD

Provider Gender: Female

License number: A160789

NPI: 1124401435

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)

515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

DALONSO, SANDRA L , CSW

Provider Gender: Female

License number: 82240

NPI: 1841797644

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

DALONSO, SANDRA L , CSW

Provider Gender: Female

License number: 82240

NPI: 1841797644

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619) 515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

DAN, WENDY L , CSW

Provider Gender: Female

License number: 26015

NPI: 1700224037

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian,

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

DAN, WENDY L , CSW

Provider Gender: Female

License number: 26015

NPI: 1700224037

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)

515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

DEBBOLD, ERIC M , MD

Provider Gender: Male

License number: 164068

NPI: 1144726415

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)

515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

DEBBOLD, ERIC M , MD

Provider Gender: Male

License number: 164068

NPI: 1144726415

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2300

Fax:

After Hours Phone: (619) 515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

DIAZ, LIZETH, CSW

Provider Gender: Female

License number: 97277

NPI: 1124457023

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

DIAZ, LIZETH, CSW

Provider Gender: Female
 License number: 97277
 NPI: 1124457023
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
 Phone: (619) 515-2499
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2499
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

DIAZ, LIZETH, CSW

Provider Gender: Female

License number: 97277
 NPI: 1124457023
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 680 FLETCHER PKWY STE 200
 EL CAJON, CA 92020-2500
 Phone: (619) 515-2338
 Fax: (619) 269-0598
 After Hours Phone: (619) 515-2338
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5:30PM

DOBOS, DAVID, MD

Provider Gender: Male
 License number: G57276
 NPI: 1548318348
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
 Phone: (619) 515-2499
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2499

Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

DOBOS, DAVID, MD

Provider Gender: Male
 License number: G57276
 NPI: 1548318348
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

DUNFORD, KATELYN C , MFT

Provider Gender: Female
License number: 126626
NPI: 1437517497
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

DUNFORD, KATELYN C , MFT

Provider Gender: Female
License number: 126626
NPI: 1437517497
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
680 FLETCHER PKWY STE 200
EL CAJON, CA 92020-2500
Phone: (619) 515-2338
Fax: (619) 269-0598
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5:30PM

DUNFORD, KATELYN C , MFT

Provider Gender: Female
License number: 126626
NPI: 1437517497
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

DWYER, GEORGE, CSW

Provider Gender: Male
License number: 70988
NPI: 1437606126
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

DWYER, GEORGE, CSW

Provider Gender: Male
License number: 70988
NPI: 1437606126
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

DYLAK, JASMINE C , CSW

Provider Gender: Female
License number: 33-0743869
NPI: 1659782498
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710

Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2499
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

ECKL, CATHERINE, CSW

Provider Gender: U
License number: 11004
NPI: 1841853322
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 215 W MADISON AVE
 EL CAJON, CA 92020-3405
Phone: (619) 401-6236
Fax: (619) 667-6036
After Hours Phone: (619)
 401-6236
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age:
Gender Restriction: No Gender

Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M,W,F 4PM-7PM

EDE, KEKOA, MD

Provider Gender: Male
License number: A101211
NPI: 1134224843
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 855 E MADISON AVE
 EL CAJON, CA 92020-3819
Phone: (619) 440-2751
Fax:
After Hours Phone: (619)
 440-2751

Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Arabic, Hindi, Nepali (Individual
 Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M,W-F 8AM-5PM, TU
 8AM-8PM

ERBE, EDWARD J , MD

Provider Gender: Male
License number: G76886
NPI: 1952318289
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300

Fax:
After Hours Phone: (619)
 515-2300

Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No

Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes

Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

ERBE, EDWARD J , MD

Provider Gender: Male
License number: G76886
NPI: 1952318289
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536

After Hours Phone: (619)
 515-2499

Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No

Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes

Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

FEDEROFF, MONICA, MD

Provider Gender: Female
License number: A164677
NPI: 1912404492

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499

Fax: (619) 702-8536
After Hours Phone: (619)
 515-2499

Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 Yes

Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

FEDEROFF, MONICA, MD

Provider Gender: Female
License number: A164677
NPI: 1912404492

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300

Fax:
After Hours Phone: (619)
 515-2300

Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No

Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes

Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

FEDEROFF, MONICA, MD

Provider Gender: Female
License number: A164677
NPI: 1912404492

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

SAN DIEGO
680 FLETCHER PKWY STE 200
EL CAJON, CA 92020-2500
Phone: (619) 515-2338
Fax: (619) 269-0598
After Hours Phone: (619)
515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

Spanish
TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

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

FIGUERED, BRUCE, PSY

Provider Gender: Male

License number: PSY18899

NPI: 1326086307

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

INTEGRATED HEALTH
PARTNERS- BORREGO
COMMUNITY HEALTH
FOUNDAT

133 W MAIN ST

EL CAJON, CA 92020-3315

Phone: (619) 401-0404

Fax: (619) 401-0522

After Hours Phone: (619)

401-0404

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Arabic, Mandarin, Spanish,

Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

FLORES, MARY LUPE, CSW

Provider Gender: Female

License number: 19815

NPI: 1134147457

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

FLORES, MARY LUPE, CSW

Provider Gender: Female

License number: 19815

NPI: 1134147457

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)

515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

FLOWERS, LAURA L , CSW

Provider Gender: Female

License number: 74705

NPI: 1437648862

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>Phone: (619) 515-2499 Fax: (619) 702-8536 After Hours Phone: (619) 515-2499 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>License number: 47462 NPI: 1467763896 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: WAKING UP ON THE TOILET 237 AVOCADO AVE STE 105 EL CAJON, CA 92020-4638 Phone: (619) 447-0910 Fax: After Hours Phone: (619) 447-0910 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Spanish TDD: Yes Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M-F 8AM-5PM</p>
<p>FLYNN CRUZ, MARY E , CSW Provider Gender: Female License number: 92918 NPI: 1942814181 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1111 W CHASE AVE EL CAJON, CA 92020-5710 Phone: (619) 515-2499 Fax: (619) 702-8536 After Hours Phone: (619) 515-2499 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese</p>	<p>FLYNN CRUZ, MARY E , CSW Provider Gender: Female License number: 92918 NPI: 1942814181 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 525 E MAIN ST EL CAJON, CA 92020-4007 Phone: (619) 515-2300 Fax: After Hours Phone: (619) 515-2300 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM</p>	<p>FRAGOSO, DOMINIQUE, CSW Provider Gender: U License number: 12601 NPI: 1518521830 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE 215 W MADISON AVE EL CAJON, CA 92020-3405 Phone: (619) 401-6236 Fax: (619) 667-6036 After Hours Phone: (619) 401-6236</p>
<p>FONSECA, ALIYA, MFT Provider Gender: Female</p>	<p>FONSECA, ALIYA, MFT Provider Gender: Female</p>	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> TDD: No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M,W,F 4PM-7PM</p> <p>FRANCO, RODRIGO, CSW <i>Provider Gender:</i> Male <i>License number:</i> 71548 <i>NPI:</i> 1952736043 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 525 E MAIN ST EL CAJON, CA 92020-4007 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p> <p>FRANCO, RODRIGO, CSW <i>Provider Gender:</i> Male <i>License number:</i> 71548 <i>NPI:</i> 1952736043 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1111 W CHASE AVE EL CAJON, CA 92020-5710 <i>Phone:</i> (619) 515-2499 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2499 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for</p>	<p><i>Accessibility information</i> <i>Hours:</i> M-F 8:30AM-5PM</p> <p>FRANCO, RODRIGO, CSW <i>Provider Gender:</i> Male <i>License number:</i> 71548 <i>NPI:</i> 1952736043 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 525 E MAIN ST EL CAJON, CA 92020-4007 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p> <p>FREEMAN, KAY M , MFT <i>Provider Gender:</i> Female <i>License number:</i> 16284 <i>NPI:</i> 1588795298 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 525 E MAIN ST EL CAJON, CA 92020-4007 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi,</p>	<p>1111 W CHASE AVE EL CAJON, CA 92020-5710 <i>Phone:</i> (619) 515-2499 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2499 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p> <p>FREEMAN, KAY M , MFT <i>Provider Gender:</i> Female <i>License number:</i> 16284 <i>NPI:</i> 1588795298 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 525 E MAIN ST EL CAJON, CA 92020-4007 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi,</p>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

FUKUI, TOMONORI, MD

Provider Gender: Male
License number: 75713
NPI: 1366519670
Provider English Spoken: Yes
Provider Language(s) Spoken:
Japanese, Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

FUKUI, TOMONORI, MD

Provider Gender: Male
License number: 75713
NPI: 1366519670
Provider English Spoken: Yes
Provider Language(s) Spoken:
Japanese, Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619)
515-2499
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

GALAPON, DIXIE L , PSY

Provider Gender: Female
License number: 16711
NPI: 1174646301
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
525 E MAIN ST

EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

GALAPON, DIXIE L , PSY

Provider Gender: Female
License number: 16711
NPI: 1174646301
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619)
515-2499
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

GANDY, SHARAREH, PSY

Provider Gender: Female

License number: PSY28097

NPI: 1730310723

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

INTEGRATED HEALTH PARTNERS- BORREGO COMMUNITY HEALTH FOUNDAT

133 W MAIN ST

EL CAJON, CA 92020-3315

Phone: (619) 401-0404

Fax: (619) 401-0522

After Hours Phone: (619)

401-0404

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Arabic, Mandarin, Spanish, Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

GAUD, KRISTINA G , MD

Provider Gender: Female

License number: 170667

NPI: 1508151598

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

GAUD, KRISTINA G , MD

Provider Gender: Female

License number: 170667

NPI: 1508151598

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619) 515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

GAUD, KRISTINA G , MD

Provider Gender: Female

License number: 170667

NPI: 1508151598

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

680 FLETCHER PKWY STE 200

EL CAJON, CA 92020-2500

Phone: (619) 515-2338

Fax: (619) 269-0598

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

TDD: No

Min/Max Age:

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5:30PM

GILLIS, RUTH, MFT

Provider Gender: Female
License number: 50313
NPI: 1568588325
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

GILLIS, RUTH, MFT

Provider Gender: Female
License number: 50313
NPI: 1568588325

Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

GLASSMAN, JAGA NATH, MD

Provider Gender: Male
License number: G55004
NPI: 1558409771
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300

Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

GLASSMAN, JAGA NATH, MD

Provider Gender: Male
License number: G55004
NPI: 1558409771
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 680 FLETCHER PKWY STE 200
 EL CAJON, CA 92020-2500
Phone: (619) 515-2338
Fax: (619) 269-0598
After Hours Phone: (619) 515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No

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J. Directorio de proveedores de salud mental

Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5:30PM

GLASSMAN, JAGA NATH, MD

Provider Gender: Male
License number: G55004
NPI: 1558409771

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO

1111 W CHASE AVE
EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)

515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

GLEASON, SHEILA, PSY

Provider Gender: Female

License number: 13685

NPI: 1366641813

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)

515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

GLEASON, SHEILA, PSY

Provider Gender: Female

License number: 13685

NPI: 1366641813

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

GOEHRING, KATHERINE R , NPA

Provider Gender: Female

License number: 95002763

NPI: 1972929404

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

855 E MADISON AVE

EL CAJON, CA 92020-3819

Phone: (619) 440-2751

Fax:

After Hours Phone: (619)

440-2751

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Arabic, Hindi, Nepali (Individual
Language), Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M,W-F 8AM-5PM, TU

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

8AM-8PM

GOMEZ-NARANJO, PATRICIA A, MD

Provider Gender: Female

License number: A55544

NPI: 1053324541

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

INTEGRATED HEALTH PARTNERS- BORREGO COMMUNITY HEALTH FOUNDAT

133 W MAIN ST

EL CAJON, CA 92020-3315

Phone: (619) 401-0404

Fax: (619) 401-0522

After Hours Phone: (619)

401-0404

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Arabic, Mandarin, Spanish,

Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

GONZALEZ, ANDREA, CSW

Provider Gender: Female

License number: 97593

NPI: 1326346198

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

680 FLETCHER PKWY STE 200

EL CAJON, CA 92020-2500

Phone: (619) 515-2338

Fax: (619) 269-0598

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

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

GONZALEZ, ANDREA, CSW

Provider Gender: Female

License number: 97593

NPI: 1326346198

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)

515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL):
Yes

Please contact provider for

Accessibility information

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

GONZALEZ, ANDREA, CSW

Provider Gender: Female

License number: 97593

NPI: 1326346198

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL):
Yes

Please contact provider for

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accessibility information
Hours: M-F 8AM-5PM

GOTTUNG, CHRISTINA, CSW

Provider Gender: Female
License number: 87716
NPI: 1134597123
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619)
515-2499
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

GOTTUNG, CHRISTINA, CSW

Provider Gender: Female
License number: 87716
NPI: 1134597123
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

GRAHAM, DEBRA JEANNE, NPA

Provider Gender: Female
License number: NP15657
NPI: 1790757623
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
INTEGRATED HEALTH
PARTNERS- BORREGO
COMMUNITY HEALTH
FOUNDAT
133 W MAIN ST
EL CAJON, CA 92020-3315
Phone: (619) 401-0404
Fax: (619) 401-0522
After Hours Phone: (619)
401-0404
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
Arabic, Mandarin, Spanish,
Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

GUARDADO SOTO, RAQUEL E , PSY

Provider Gender: Female
License number: 26883
NPI: 1194999276
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
855 E MADISON AVE
EL CAJON, CA 92020-3819
Phone: (619) 440-2751
Fax:
After Hours Phone: (619)
440-2751
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Arabic, Hindi, Nepali (Individual
Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accessibility information

Hours: M,W-F 8AM-5PM, TU
8AM-8PM

GUTIERREZ, APRIL P , CSW

Provider Gender: Female

License number: 86166

NPI: 1356749949

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

GUTIERREZ, APRIL P , CSW

Provider Gender: Female

License number: 86166

NPI: 1356749949

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)

515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

HALGEDAHL, YI TING, NPA

Provider Gender: Female

License number: 95006826

NPI: 1619246907

Provider English Spoken: Yes

Provider Language(s) Spoken:

Mandarin, Chinese

Cultural Competency:

INTEGRATED HEALTH
PARTNERS- BORREGO
COMMUNITY HEALTH
FOUNDAT

133 W MAIN ST

EL CAJON, CA 92020-3315

Phone: (619) 401-0404

Fax: (619) 401-0522

After Hours Phone: (619)

401-0404

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Arabic, Mandarin, Spanish,
Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

HANNA-HADDAD, WEGDAN, PSY

Provider Gender: Female

License number: PSY26481

NPI: 1457769333

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic

Cultural Competency:

INTEGRATED HEALTH
PARTNERS- BORREGO
COMMUNITY HEALTH
FOUNDAT

133 W MAIN ST

EL CAJON, CA 92020-3315

Phone: (619) 401-0404

Fax: (619) 401-0522

After Hours Phone: (619)

401-0404

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Arabic, Mandarin, Spanish,
Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

HARRIMAN, CORAL, PSY

Provider Gender: Female
License number: 26098
NPI: 1417373069
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:

After Hours Phone: (619) 515-2300
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No

Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

HARRIMAN, CORAL, PSY

Provider Gender: Female
License number: 26098
NPI: 1417373069
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No

Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

HAYDAR, SUSAN, PSY

Provider Gender: Female
License number: PSY24934
NPI: 1730452400
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic

Cultural Competency: NEIGHBORHOOD HEALTHCARE
855 E MADISON AVE
EL CAJON, CA 92020-3819
Phone: (619) 440-2751
Fax:

After Hours Phone: (619) 440-2751
Website: www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Arabic, Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M,W-F 8AM-5PM, TU 8AM-8PM

HAYDEN WADE, HELEN, PSY

Provider Gender: Female
License number: PSY19313
NPI: 1366951105
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes

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J. Directorio de proveedores de salud mental

Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

HAYDEN WADE, HELEN, PSY

Provider Gender: Female
License number: PSY19313
NPI: 1366951105
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300

Fax:
After Hours Phone: (619)
515-2300

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

HECKMAN, KELEY, CSW

Provider Gender: U
License number: 68697
NPI: 1801948187
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NEIGHBORHOOD

HEALTHCARE
215 W MADISON AVE
EL CAJON, CA 92020-3405
Phone: (619) 401-6236

Fax: (619) 667-6036

After Hours Phone: (619)

401-6236

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M,W,F 4PM-7PM

HEDMAN, TERI LEE, CSW

Provider Gender: U

License number: 74947

NPI: 1154811636

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

HEDMAN, TERI LEE, CSW

Provider Gender: U

License number: 74947

NPI: 1154811636

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)

515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

HOLDEN, MATTHEW, PSY

Provider Gender: Male

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J. Directorio de proveedores de salud mental

License number: PSY11197
NPI: 1740213487
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 855 E MADISON AVE
 EL CAJON, CA 92020-3819
Phone: (619) 440-2751
Fax:
After Hours Phone: (619)
 440-2751
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Arabic, Hindi, Nepali (Individual
 Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M,W-F 8AM-5PM, TU
 8AM-8PM

HORNBROOK, JESSICA, CSW

Provider Gender: Female
License number: 26598
NPI: 1134401805
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710

Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2499
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

HUBER, REBECCA, MD

Provider Gender: Female
License number: A133711
NPI: 1174960686
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

HUBER, REBECCA, MD

Provider Gender: Female
License number: A133711
NPI: 1174960686
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2499
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

ISHIDA, YO, CSW

Provider Gender: Female

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J. Directorio de proveedores de salud mental

License number: 29526
 NPI: 1225154081
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619)
 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

ISHIDA, YO, CSW

Provider Gender: Female
 License number: 29526
 NPI: 1225154081
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710

Phone: (619) 515-2499
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2499
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

JACKSON, TIENNA S , CSW

Provider Gender: Female
 License number: 89122
 NPI: 1194976225
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619)
 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

JALAN, DEVESH, MD

Provider Gender: Male
 License number: A167754
 NPI: 1083092134
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
 Phone: (619) 515-2499
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2499
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

JALAN, DEVESH, MD

Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: A167754
 NPI: 1083092134
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619)
 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

JAMES, CHRISTINE E , MD
 Provider Gender: Female
 License number: 20A13931
 NPI: 1679834022
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007

Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619)
 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

JAMES, CHRISTINE E , MD
 Provider Gender: Female
 License number: 20A13931
 NPI: 1679834022
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
 Phone: (619) 515-2499
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2499
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

**JASSO-RAMIREZ, MARTHA,
 CSW**
 Provider Gender: Female
 License number: 26493
 NPI: 1871772020
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
 Phone: (619) 515-2499
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2499
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

JAUREGUI, CYNTHIA J , MFT <i>Provider Gender:</i> Female <i>License number:</i> 46152 <i>NPI:</i> 1003953886 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1111 W CHASE AVE EL CAJON, CA 92020-5710 <i>Phone:</i> (619) 515-2499 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2499 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM	525 E MAIN ST EL CAJON, CA 92020-4007 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM	Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM
JAUREGUI, CYNTHIA J , MFT <i>Provider Gender:</i> Female <i>License number:</i> 46152 <i>NPI:</i> 1003953886 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO	JONES, ADELE, PSY <i>Provider Gender:</i> Female <i>License number:</i> 25311 <i>NPI:</i> 1558602490 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM	JONES, ADELE, PSY <i>Provider Gender:</i> Female <i>License number:</i> 25311 <i>NPI:</i> 1558602490 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

JONES, ATAVIA L , CSW

Provider Gender: Female
License number: LCSW76796
NPI: 1952734899

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300

Fax:
After Hours Phone: (619)
515-2300

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

JONES, ATAVIA L , CSW

Provider Gender: Female
License number: LCSW76796
NPI: 1952734899

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1111 W CHASE AVE
EL CAJON, CA 92020-5710

Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619)
515-2499
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

JONES, MICHAEL A , CSW

Provider Gender: Male
License number: LCS 22452
NPI: 1548205719

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300

Fax:
After Hours Phone: (619)
515-2300

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

JONES, MICHAEL A , CSW

Provider Gender: Male
License number: LCS 22452
NPI: 1548205719

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499

Fax: (619) 702-8536
After Hours Phone: (619)
515-2499

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,

Spanish, Yue Chinese
TDD: No

Min/Max Age:
Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information

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

KAHLY, BROOKE, CSW

Provider Gender: U

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 84367
 NPI: 1649833120
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 215 W MADISON AVE
 EL CAJON, CA 92020-3405
 Phone: (619) 401-6236
 Fax: (619) 667-6036
 After Hours Phone: (619)
 401-6236
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M,W,F 4PM-7PM

KEI, JUSTIN, MD

Provider Gender: Male
 License number: A138266
 NPI: 1396150041
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
 Phone: (619) 515-2499
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2499
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

KEI, JUSTIN, MD

Provider Gender: Male
 License number: A138266
 NPI: 1396150041
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619)
 515-2300
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes

Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

KELLEY, KIMBERLY L , CSW

Provider Gender: Female
 License number: 97888
 NPI: 1326447897
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
 Phone: (619) 515-2499
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2499
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes

Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

KELLEY, KIMBERLY L , CSW

Provider Gender: Female
 License number: 97888
 NPI: 1326447897
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF

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J. Directorio de proveedores de salud mental

SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

KHAN, MAYSUN, CSW
Provider Gender: Female
License number: 71910
NPI: 1033519632
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

KHAN, MAYSUN, CSW
Provider Gender: Female
License number: 71910
NPI: 1033519632
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619)
515-2499
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

KLEAST, RUTH A , CSW
Provider Gender: Female
License number: LCSW28504
NPI: 1326272378
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
855 E MADISON AVE
EL CAJON, CA 92020-3819
Phone: (619) 440-2751
Fax:
After Hours Phone: (619)
440-2751
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Arabic, Hindi, Nepali (Individual
Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M,W-F 8AM-5PM, TU
8AM-8PM

**KLOBERDANZ, KELSEY L ,
NPA**
Provider Gender: Female
License number: 95005293
NPI: 1235672502
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
525 E MAIN ST

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J. Directorio de proveedores de salud mental

EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

**KLOBERDANZ, KELSEY L ,
NPA**
Provider Gender: Female
License number: 95005293
NPI: 1235672502
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619)
515-2499
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,

Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

KNIGHT, MARK ANTHONY, MD
Provider Gender: Male
License number: A94460
NPI: 1851573554
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619)
515-2499
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

KNIGHT, MARK ANTHONY, MD
Provider Gender: Male
License number: A94460
NPI: 1851573554
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

KOH, STEVE H , MD
Provider Gender: Male
License number: A103468
NPI: 1467650473
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007

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J. Directorio de proveedores de salud mental

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)
515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

KOH, STEVE H , MD

Provider Gender: Male

License number: A103468

NPI: 1467650473

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)

515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

KRITTMAN, STUART W , PSY

Provider Gender: Male

License number: PSY20233

NPI: 1174964399

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

KRITTMAN, STUART W , PSY

Provider Gender: Male

License number: PSY20233

NPI: 1174964399

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)

515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

KYLE, MARCIE, CSW

Provider Gender: Female

License number: LCSW78555

NPI: 1174981500

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>Phone: (619) 515-2300 Fax: After Hours Phone: (619) 515-2300 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM</p>	<p>TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>License number: 161149 NPI: 1942662093 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1111 W CHASE AVE EL CAJON, CA 92020-5710 Phone: (619) 515-2499 Fax: (619) 702-8536 After Hours Phone: (619) 515-2499 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>
<p>KYLE, MARCIE, CSW Provider Gender: Female License number: LCSW78555 NPI: 1174981500 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1111 W CHASE AVE EL CAJON, CA 92020-5710 Phone: (619) 515-2499 Fax: (619) 702-8536 After Hours Phone: (619) 515-2499 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese</p>	<p>LIDSTONE, PAVEN, MD Provider Gender: Female License number: 161149 NPI: 1942662093 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 525 E MAIN ST EL CAJON, CA 92020-4007 Phone: (619) 515-2300 Fax: After Hours Phone: (619) 515-2300 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM</p>	<p>LIDSTONE, PAVEN, MD Provider Gender: Female License number: 161149 NPI: 1942662093 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 680 FLETCHER PKWY STE 200 EL CAJON, CA 92020-2500</p>
<p>LIDSTONE, PAVEN, MD Provider Gender: Female</p>		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
Fax: (619) 269-0598
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
 No
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5:30PM

LIM, SANDRA S , MD

Provider Gender: Female
License number: 20A13075
NPI: 1083963094
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:

Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

LIM, SANDRA S , MD

Provider Gender: Female
License number: 20A13075
NPI: 1083963094
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:

Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

LIPPERT, HEATHER M , CSW

Provider Gender: Female
License number: 22526
NPI: 1093991663

Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300

Fax:
After Hours Phone: (619) 515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No

Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

LIPPERT, HEATHER M , CSW

Provider Gender: Female
License number: 22526
NPI: 1093991663
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p> <p>LIU-BARBARO, DOROTHY, MD <i>Provider Gender:</i> Female <i>License number:</i> A115342 <i>NPI:</i> 1851602270 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> NEIGHBORHOOD HEALTHCARE 855 E MADISON AVE EL CAJON, CA 92020-3819 <i>Phone:</i> (619) 440-2751 <i>Fax:</i> <i>After Hours Phone:</i> (619) 440-2751 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Arabic, Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i></p>	<p>No Please contact provider for Accessibility information <i>Hours:</i> M,W-F 8AM-5PM, TU 8AM-8PM</p> <p>LLAMAS, SASHA G , CSW <i>Provider Gender:</i> Female <i>License number:</i> 94249 <i>NPI:</i> 1356713739 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 525 E MAIN ST EL CAJON, CA 92020-4007 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p> <p>LLAMAS, SASHA G , CSW <i>Provider Gender:</i> Female <i>License number:</i> 94249 <i>NPI:</i> 1356713739 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i></p>	<p><i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1111 W CHASE AVE EL CAJON, CA 92020-5710 <i>Phone:</i> (619) 515-2499 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2499 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p> <p>LOEB, CINDY, CSW <i>Provider Gender:</i> Female <i>License number:</i> 75333 <i>NPI:</i> 1619108511 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 525 E MAIN ST EL CAJON, CA 92020-4007 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes</p>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p> <p>LOEB, CINDY, CSW <i>Provider Gender:</i> Female <i>License number:</i> 75333 <i>NPI:</i> 1619108511 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1111 W CHASE AVE EL CAJON, CA 92020-5710 <i>Phone:</i> (619) 515-2499 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2499 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for</p>	<p>Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p> <p>LYDIARD, JESSICA, MD <i>Provider Gender:</i> Female <i>License number:</i> A171775 <i>NPI:</i> 1841731296 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1111 W CHASE AVE EL CAJON, CA 92020-5710 <i>Phone:</i> (619) 515-2499 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2499 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p> <p>LYDIARD, JESSICA, MD <i>Provider Gender:</i> Female <i>License number:</i> A171775 <i>NPI:</i> 1841731296 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO</p>	<p>680 FLETCHER PKWY STE 200 EL CAJON, CA 92020-2500 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 269-0598 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5:30PM</p> <p>LYDIARD, JESSICA, MD <i>Provider Gender:</i> Female <i>License number:</i> A171775 <i>NPI:</i> 1841731296 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 525 E MAIN ST EL CAJON, CA 92020-4007 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese</p>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM</p> <p>LYONS, KEITH E , CSW Provider Gender: Male License number: 92724 NPI: 1538704002 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE 215 W MADISON AVE EL CAJON, CA 92020-3405 Phone: (619) 401-6236 Fax: (619) 667-6036 After Hours Phone: (619) 401-6236 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M,W,F 4PM-7PM</p> <p>LYONS, KEITH E , CSW Provider Gender: Male License number: 92724 NPI: 1538704002 Provider English Spoken: Yes</p>	<p>Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1111 W CHASE AVE EL CAJON, CA 92020-5710 Phone: (619) 515-2499 Fax: (619) 702-8536 After Hours Phone: (619) 515-2499 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p> <p>LYONS, KEITH E , CSW Provider Gender: Male License number: 92724 NPI: 1538704002 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 525 E MAIN ST EL CAJON, CA 92020-4007 Phone: (619) 515-2300 Fax: After Hours Phone: (619) 515-2300 Website: www.beaconhealthoptions.com</p>	<p>Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM</p> <p>MACIAS, ZIRLEY, CSW Provider Gender: Female License number: 96997 NPI: 1245616887 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE 855 E MADISON AVE EL CAJON, CA 92020-3819 Phone: (619) 440-2751 Fax: After Hours Phone: (619) 440-2751 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Arabic, Hindi, Nepali (Individual Language), Spanish TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for</p>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accessibility information
Hours: M,W-F 8AM-5PM, TU
8AM-8PM

MACMASTER, LINDSAY, PSY

Provider Gender: Female
License number: 25570
NPI: 1659520179
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300

Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No

Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

MACMASTER, LINDSAY, PSY

Provider Gender: Female
License number: 25570
NPI: 1659520179
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF

SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619)
515-2499
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No

Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

MAGOS, DANIEL, CSW

Provider Gender: Male
License number: 88270
NPI: 1578983664
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
855 E MADISON AVE
EL CAJON, CA 92020-3819
Phone: (619) 440-2751

Fax:
After Hours Phone: (619)
440-2751
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

Arabic, Hindi, Nepali (Individual
Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M,W-F 8AM-5PM, TU
8AM-8PM

MAIETTA, KATHLEEN H , CSW

Provider Gender: Female
License number: 88399
NPI: 1487128617
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499

Fax: (619) 702-8536
After Hours Phone: (619)
515-2499
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No

Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

MALAK, LAWRENCE, MD

Provider Gender: Male
License number: A115345
NPI: 1467773028
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

MALAK, LAWRENCE, MD

Provider Gender: Male
License number: A115345
NPI: 1467773028
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710

Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2499
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

MARTINEZ, IVONNE B , CSW

Provider Gender: Female
License number: 85604
NPI: 1225355498
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

MARTINEZ, STEPHANIE, MD

Provider Gender: Female
License number: 152787
NPI: 1699126367
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2499
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

MARTINEZ, STEPHANIE, MD

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>License number: 152787 NPI: 1699126367 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 525 E MAIN ST EL CAJON, CA 92020-4007 Phone: (619) 515-2300 Fax: After Hours Phone: (619) 515-2300 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM</p>	<p>Phone: (619) 515-2300 Fax: After Hours Phone: (619) 515-2300 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM</p>	<p>Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>
<p>MARTIR, MICHEL, CSW Provider Gender: Female License number: 73174 NPI: 1356528434 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 525 E MAIN ST EL CAJON, CA 92020-4007</p>	<p>MARTIR, MICHEL, CSW Provider Gender: Female License number: 73174 NPI: 1356528434 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1111 W CHASE AVE EL CAJON, CA 92020-5710 Phone: (619) 515-2499 Fax: (619) 702-8536 After Hours Phone: (619) 515-2499 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian,</p>	<p>MAXWELL, MELISSA K , CSW Provider Gender: U License number: 90791 NPI: 1275182826 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE 215 W MADISON AVE EL CAJON, CA 92020-3405 Phone: (619) 401-6236 Fax: (619) 667-6036 After Hours Phone: (619) 401-6236 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M,W,F 4PM-7PM</p>
		<p>MCADAMS, HILDA, NPA Provider Gender: Female License number: 14201 NPI: 1396838082</p>

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J. Directorio de proveedores de salud mental

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

MCADAMS, HILDA, NPA

Provider Gender: Female
License number: 14201
NPI: 1396838082
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 680 FLETCHER PKWY STE 200
 EL CAJON, CA 92020-2500

Phone: (619) 515-2338
Fax: (619) 269-0598
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5:30PM

MCADAMS, HILDA, NPA

Provider Gender: Female
License number: 14201
NPI: 1396838082
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No

Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

MCGINLEY, NANCY R , MD

Provider Gender: Female
License number: A167231
NPI: 1649765124
Provider English Spoken: Yes
Provider Language(s) Spoken:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:

After Hours Phone: (619) 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

MCHENRY, KELLY, CSW

Provider Gender: Female
License number: 29689

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

NPI: 1851544340
Provider English Spoken: Yes
Provider Language(s) Spoken:
 American Sign Language
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

MCHENRY, KELLY, CSW

Provider Gender: Female
License number: 29689
NPI: 1851544340
Provider English Spoken: Yes
Provider Language(s) Spoken:
 American Sign Language
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710

Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2499
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

MEJIAS, JUAN C , PSY

Provider Gender: Male
License number: 26953
NPI: 1558560730
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 855 E MADISON AVE
 EL CAJON, CA 92020-3819
Phone: (619) 440-2751
Fax:
After Hours Phone: (619)
 440-2751
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Arabic, Hindi, Nepali (Individual
 Language), Spanish

TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M,W-F 8AM-5PM, TU
 8AM-8PM

MEJIA, RITA I , MFT

Provider Gender: Female
License number: 99697
NPI: 1952741506
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

MEJIA, RITA I , MFT

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Gender: Female
License number: 99697
NPI: 1952741506
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2499
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

MENDEZ PEREZ, MARIA C , CSW

Provider Gender: Female
License number: 89151
NPI: 1356902795
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007

Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

MENDEZ, ANDRES G , PSY

Provider Gender: Male
License number: 28907
NPI: 1841482692
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2499
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

MERRILL, SARAH M , CSW

Provider Gender: Female
License number: 79014
NPI: 1639403884
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2499
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

MERRILL, SARAH M , CSW

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 79014
NPI: 1639403884
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

MILLER, BRIAN P , MD

Provider Gender: Male
License number: A68180
NPI: 1861411381
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MILLER, BRIAN
1460 E MAIN ST
EL CAJON, CA 92021-8617
Phone: (858) 939-4393
Fax: (619) 740-4807
After Hours Phone: (858)
939-4393

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours:

MILLICAN, RUTH, PSY

Provider Gender: Female
License number: 25354
NPI: 1346472305
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619)
515-2499
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for

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

MILLICAN, RUTH, PSY

Provider Gender: Female
License number: 25354
NPI: 1346472305
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:

After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

MODAD, ALBERT, PSY

Provider Gender: Female
License number: 29697
NPI: 1629453691
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

MODAD, ALBERT, PSY
Provider Gender: Female
License number: 29697
NPI: 1629453691
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619)
515-2499
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,

Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

**MORALES MORENO,
MINERVA, CSW**
Provider Gender: Female
License number: 63550
NPI: 1841337565
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619)
515-2499
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

**MORALES MORENO,
MINERVA, CSW**
Provider Gender: Female
License number: 63550
NPI: 1841337565
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

**NADEAU MANNING, JULIE,
CSW**
Provider Gender: Female
License number: 25094
NPI: 1275609760
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

1111 W CHASE AVE
EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)

515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

NADEAU MANNING, JULIE, CSW

Provider Gender: Female

License number: 25094

NPI: 1275609760

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

NARANJO, JORGE, MD

Provider Gender: Male

License number: A62504

NPI: 1992838684

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

INTEGRATED HEALTH
PARTNERS- BORREGO
COMMUNITY HEALTH
FOUNDAT

133 W MAIN ST

EL CAJON, CA 92020-3315

Phone: (619) 401-0404

Fax: (619) 401-0522

After Hours Phone: (619)

401-0404

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Arabic, Mandarin, Spanish,
Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

NAWROCKI, KSENIA, MD

Provider Gender: Female

License number: A123879

NPI: 1487882742

Provider English Spoken: Yes

Provider Language(s) Spoken:
Russian

Cultural Competency:

COMMUNITY RESEARCH
FOUNDATION INC

1664 BROADWAY

EL CAJON, CA 92021-5201

Phone: (619) 579-8685

Fax: (619) 579-1969

After Hours Phone: (619)

579-8685

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Russian

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours:

NAZARIO, JACOBETH, PSY

Provider Gender: Female

License number: PSY32092

NPI: 1326648684

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1111 W CHASE AVE

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)

515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

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

NAZARIO, JACOBETH, PSY

Provider Gender: Female

License number: PSY32092

NPI: 1326648684

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

680 FLETCHER PKWY STE 200

EL CAJON, CA 92020-2500

Phone: (619) 515-2338

Fax: (619) 269-0598

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

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

NOUHI, NUSHA, PSY

Provider Gender: Female

License number: 27670

NPI: 1942433917

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)

515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

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

NOUHI, NUSHA, PSY

Provider Gender: Female

License number: 27670

NPI: 1942433917

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

NWANGANGA, OKECHUKU R , CSW

Provider Gender: Male

License number: 27072

NPI: 1285984450

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

OBRYAN, KELLY, PSY

Provider Gender: Female
License number: 24966
NPI: 1093882698
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619)
515-2499
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM
OBRYAN, KELLY, PSY
Provider Gender: Female
License number: 24966
NPI: 1093882698
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

OBRYAN, KELLY, PSY
Provider Gender: Female
License number: 24966
NPI: 1093882698
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM
OGLESBY, MONIQUE M , PSY
Provider Gender: Female

License number: PSY26802
NPI: 1831240720
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
855 E MADISON AVE
EL CAJON, CA 92020-3819
Phone: (619) 440-2751
Fax:
After Hours Phone: (619)
440-2751
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Arabic, Hindi, Nepali (Individual
Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M,W-F 8AM-5PM, TU
8AM-8PM

OJHA, PRITI, MD

Provider Gender: Female
License number: A139807
NPI: 1760897284
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)
515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

OJHA, PRITI, MD

Provider Gender: Female

License number: A139807

NPI: 1760897284

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)

515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

OLIVER, ELIZABETH, CSW

Provider Gender: Female

License number: 66862

NPI: 1326296351

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)

515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

OMORODIN, AISHA, MD

Provider Gender: Female

License number: A169651

NPI: 1629500301

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)

515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

OMORODIN, AISHA, MD

Provider Gender: Female

License number: A169651

NPI: 1629500301

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>Phone: (619) 515-2300 Fax: After Hours Phone: (619) 515-2300 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM</p>	<p>Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M-F 8:30AM-5:30PM</p>	<p>Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: OTIS, JOHN 1580 BROADWAY EL CAJON, CA 92021-5124 Phone: (619) 579-8745 Fax: (619) 579-1328 After Hours Phone: (619) 579-8745 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours:</p>
<p>OMORODIN, AISHA, MD Provider Gender: Female License number: A169651 NPI: 1629500301 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 680 FLETCHER PKWY STE 200 EL CAJON, CA 92020-2500 Phone: (619) 515-2338 Fax: (619) 269-0598 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Spanish TDD: No Min/Max Age:</p>	<p>ORBE, KERIN, MD Provider Gender: Female License number: 20A17225 NPI: 1114256690 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 525 E MAIN ST EL CAJON, CA 92020-4007 Phone: (619) 515-2300 Fax: After Hours Phone: (619) 515-2300 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM</p>	<p>PATES, HUGH, PSY Provider Gender: Male License number: 9576 NPI: 1457468233 Provider English Spoken: Yes Provider Language(s) Spoken: Latin Cultural Competency: CONCEPT HEALTHCARE PSYCHOLOGY GROUP 510 E WASHINGTON AVE EL CAJON, CA 92020-5324 Phone: (866) 284-0482 Fax: (888) 977-1204 After Hours Phone: (866) 284-0482 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes</p>
	<p>OTIS, JOHN L , MD Provider Gender: Male License number: G28506 NPI: 1235154535</p>	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Site Language(s) Spoken: Latin
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours:

PATES, HUGH, PSY

Provider Gender: Male
 License number: 9576
 NPI: 1457468233
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Latin
 Cultural Competency: CONCEPT HEALTHCARE PSYCHOLOGY GROUP
 1391 E MADISON AVE
 EL CAJON, CA 92021-8568
 Phone: (866) 284-0482
 Fax: (888) 977-1204
 After Hours Phone: (866) 284-0482
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Latin
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

PEDERSEN, SUESAN, MD

Provider Gender: Female
 License number: A138369

NPI: 1558603837
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 855 E MADISON AVE
 EL CAJON, CA 92020-3819
 Phone: (619) 440-2751
 Fax:
 After Hours Phone: (619) 440-2751
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Arabic, Hindi, Nepali (Individual Language), Spanish
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M,W-F 8AM-5PM, TU 8AM-8PM

PINEDO, YANELI, CSW

Provider Gender: Male
 License number: 91103
 NPI: 1710361712
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
 Phone: (619) 515-2499
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2499

Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

POSTLETHWAITE, ALEJANDRA, MD

Provider Gender: Female
 License number: A88938
 NPI: 1750566915
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: NEIGHBORHOOD HEALTHCARE
 855 E MADISON AVE
 EL CAJON, CA 92020-3819
 Phone: (619) 440-2751
 Fax:
 After Hours Phone: (619) 440-2751
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Arabic, Hindi, Nepali (Individual Language), Spanish
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M,W-F 8AM-5PM, TU 8AM-8PM</p> <p>PRASEK, LAUREN, NPA <i>Provider Gender:</i> Female <i>License number:</i> 95004145 <i>NPI:</i> 1932566031 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1111 W CHASE AVE EL CAJON, CA 92020-5710 <i>Phone:</i> (619) 515-2499 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2499 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p> <p>PRASEK, LAUREN, NPA <i>Provider Gender:</i> Female <i>License number:</i> 95004145 <i>NPI:</i> 1932566031</p>	<p><i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 525 E MAIN ST EL CAJON, CA 92020-4007 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p> <p>PRESLEY, ARNOLD S , PSY <i>Provider Gender:</i> Male <i>License number:</i> 23795 <i>NPI:</i> 1205017688 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> CONCEPT HEALTHCARE PSYCHOLOGY GROUP 1340 E MADISON AVE EL CAJON, CA 92021-8501 <i>Phone:</i> (866) 284-0478 <i>Fax:</i> (888) 977-1204 <i>After Hours Phone:</i> (866) 284-0478</p>	<p><i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p> <p>PROCTOR, MELISSA S , CSW <i>Provider Gender:</i> Female <i>License number:</i> 62650 <i>NPI:</i> 1336188655 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1111 W CHASE AVE EL CAJON, CA 92020-5710 <i>Phone:</i> (619) 515-2499 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2499 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes</p>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

PROOSASELTS, YULIYA, MD

Provider Gender: Female
License number: A133675
NPI: 1952747875
Provider English Spoken: Yes
Provider Language(s) Spoken:
Russian
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619)
515-2499
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

PROOSASELTS, YULIYA, MD

Provider Gender: Female
License number: A133675
NPI: 1952747875
Provider English Spoken: Yes
Provider Language(s) Spoken:
Russian

Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

QUIROZ, NORMA, MFT

Provider Gender: Female
License number: 50504
NPI: 1902945199
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619)
515-2499
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

QUIROZ, NORMA, MFT

Provider Gender: Female
License number: 50504
NPI: 1902945199
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accessibility information

Hours: M-F 8AM-5PM

RABBAN, DIANA, CSW

Provider Gender: Female

License number: 72987

NPI: 1033426374

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

RAMOS, ELIZABETH, CSW

Provider Gender: Female

License number: 73374

NPI: 1992046890

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)

515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

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

RAMOS, ELIZABETH, CSW

Provider Gender: Female

License number: 73374

NPI: 1992046890

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

RATNIEWSKI, JANET, PSY

Provider Gender: Female

License number: PSY26406

NPI: 1245649599

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

INTEGRATED HEALTH
PARTNERS- BORREGO
COMMUNITY HEALTH
FOUNDAT

133 W MAIN ST

EL CAJON, CA 92020-3315

Phone: (619) 401-0404

Fax: (619) 401-0522

After Hours Phone: (619)

401-0404

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Arabic, Mandarin, Spanish,
Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p>	<p>SAN DIEGO 1111 W CHASE AVE EL CAJON, CA 92020-5710 <i>Phone:</i> (619) 515-2499 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2499 <i>Website:</i></p>	<p>Arabic, Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M,W-F 8AM-5PM, TU 8AM-8PM</p>
<p>RENERIA, SABRINA, MD <i>Provider Gender:</i> Female <i>License number:</i> A145894 <i>NPI:</i> 1285029421 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 525 E MAIN ST EL CAJON, CA 92020-4007 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes</p>	<p>www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>RODRIGUEZ, CHRISTINE, PSY <i>Provider Gender:</i> Female <i>License number:</i> 30472 <i>NPI:</i> 1568656619 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1111 W CHASE AVE EL CAJON, CA 92020-5710 <i>Phone:</i> (619) 515-2499 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2499 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes</p>
<p>Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p>	<p>RODARTE, GABRIEL, MD <i>Provider Gender:</i> Male <i>License number:</i> A87906 <i>NPI:</i> 1184649212 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> NEIGHBORHOOD HEALTHCARE 855 E MADISON AVE EL CAJON, CA 92020-3819 <i>Phone:</i> (619) 440-2751 <i>Fax:</i> <i>After Hours Phone:</i> (619) 440-2751 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i></p>	<p>Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>
<p>RENERIA, SABRINA, MD <i>Provider Gender:</i> Female <i>License number:</i> A145894 <i>NPI:</i> 1285029421 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF</p>	<p>www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i></p>	<p>Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>RODRIGUEZ, CHRISTINE, PSY <i>Provider Gender:</i> Female <i>License number:</i> 30472 <i>NPI:</i> 1568656619 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 525 E MAIN ST EL CAJON, CA 92020-4007 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p>	<p><i>Phone:</i> (619) 515-2499 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2499 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p> <p>ROSENFARB, BARBARA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 28590 <i>NPI:</i> 1447477781 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 525 E MAIN ST EL CAJON, CA 92020-4007 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese</p>	<p><i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p> <p>ROSS, ANNE T, NPA <i>Provider Gender:</i> Female <i>License number:</i> 53359 <i>NPI:</i> 1447334883 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> NEIGHBORHOOD HEALTHCARE 855 E MADISON AVE EL CAJON, CA 92020-3819 <i>Phone:</i> (619) 440-2751 <i>Fax:</i> <i>After Hours Phone:</i> (619) 440-2751 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Arabic, Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M,W-F 8AM-5PM, TU 8AM-8PM</p>
<p>ROSENFARB, BARBARA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 28590 <i>NPI:</i> 1447477781 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1111 W CHASE AVE EL CAJON, CA 92020-5710</p>	<p><i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese</p>	<p>ROZELL, KATHY, CSW <i>Provider Gender:</i> Female</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 25068
 NPI: 1578603973
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619)
 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

ROZELL, KATHY, CSW
 Provider Gender: Female
 License number: 25068
 NPI: 1578603973
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710

Phone: (619) 515-2499
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2499
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

SABEN, LAURENCE R , MD
 Provider Gender: Male
 License number: G27446
 NPI: 1669454898
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 SABEN, LAURENCE
 615 E LEXINGTON AVE
 EL CAJON, CA 92020-4617
 Phone: (619) 440-7831
 Fax: (619) 440-0540
 After Hours Phone: (619)
 440-7831
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 7AM-6PM

SCHEUBER, TIMOTHY, PSY
 Provider Gender: Male
 License number: PSY26681
 NPI: 1083017396
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 INTEGRATED HEALTH
 PARTNERS- BORREGO
 COMMUNITY HEALTH
 FOUNDAT
 133 W MAIN ST
 EL CAJON, CA 92020-3315
 Phone: (619) 401-0404
 Fax: (619) 401-0522
 After Hours Phone: (619)
 401-0404
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Arabic, Mandarin, Spanish,
 Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

SEPULVEDA, JOE, MD
 Provider Gender: Male
 License number: A113283
 NPI: 1306165402
 Provider English Spoken: Yes

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J. Directorio de proveedores de salud mental

Provider Language(s) Spoken: Spanish
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

SEPULVEDA, JOE, MD

Provider Gender: Male
License number: A113283
NPI: 1306165402
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300

Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

SHEARED, JORDAN S , CSW

Provider Gender: Female
License number: ASW74739
NPI: 1699121749
Provider English Spoken: Yes
Provider Language(s) Spoken: *Cultural Competency:* FAMILY HEALTH CENTERS OF SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

SHEARED, JORDAN S , CSW

Provider Gender: Female
License number: ASW74739
NPI: 1699121749
Provider English Spoken: Yes
Provider Language(s) Spoken: *Cultural Competency:* FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes

Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

SIMPSON, JENNIFER, CSW

Provider Gender: Female
License number: 82678
NPI: 1740765866
Provider English Spoken: Yes
Provider Language(s) Spoken:

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J. Directorio de proveedores de salud mental

Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

SIMPSON, JENNIFER, CSW

Provider Gender: Female
License number: 82678
NPI: 1740765866
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619)
515-2499
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

SINGH, PARDEEP, NPA

Provider Gender: Female
License number: 95010750
NPI: 1992279004
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
855 E MADISON AVE
EL CAJON, CA 92020-3819
Phone: (619) 440-2751
Fax:

After Hours Phone: (619)
440-2751
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Arabic, Hindi, Nepali (Individual
Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information

Hours: M,W-F 8AM-5PM, TU
8AM-8PM

SIPIN, ELVIRA P , CSW

Provider Gender: Female
License number: LCS15308
NPI: 1477759892
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300

Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

SIPIN, ELVIRA P , CSW

Provider Gender: Female
License number: LCS15308
NPI: 1477759892
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO

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J. Directorio de proveedores de salud mental

1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619)
515-2499
Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

SIPIN, ELVIRA P , CSW

Provider Gender: Female

License number: LCS15308

NPI: 1477759892

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

680 FLETCHER PKWY STE 200
EL CAJON, CA 92020-2500

Phone: (619) 515-2338

Fax: (619) 269-0598

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

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

SPAHR, CHRISTIE, MFT

Provider Gender: Female

License number: 51792

NPI: 1295085736

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)

515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

STA ROMANA, JOSEFINA, MD

Provider Gender: Female

License number: C52364

NPI: 1003972175

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

COMMUNITY RESEARCH
FOUNDATION INC

460 N MAGNOLIA AVE STE 110

EL CAJON, CA 92020-3610

Phone: (619) 440-5133

Fax: (619) 440-8522

After Hours Phone: (619)

440-5133

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M,TU,TH,F 9AM-5PM, W
9AM-7PM

STEWART, ANDREA M , MFT

Provider Gender: U

License number: 45174

NPI: 1508993122

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p>	<p><i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p><i>Cultural Competency:</i> NEIGHBORHOOD HEALTHCARE 855 E MADISON AVE EL CAJON, CA 92020-3819 <i>Phone:</i> (619) 440-2751 <i>Fax:</i> <i>After Hours Phone:</i> (619) 440-2751 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Arabic, Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M,W-F 8AM-5PM, TU 8AM-8PM</p>
<p>STEWART, ANDREA M , MFT <i>Provider Gender:</i> U <i>License number:</i> 45174 <i>NPI:</i> 1508993122 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1111 W CHASE AVE EL CAJON, CA 92020-5710 <i>Phone:</i> (619) 515-2499 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2499 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions</p>	<p>STONE, CALVIN, MD <i>Provider Gender:</i> Male <i>License number:</i> 20A18127 <i>NPI:</i> 1275995870 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> NEIGHBORHOOD HEALTHCARE 855 E MADISON AVE EL CAJON, CA 92020-3819 <i>Phone:</i> (619) 440-2751 <i>Fax:</i> <i>After Hours Phone:</i> (619) 440-2751 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Arabic, Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M,W-F 8AM-5PM, TU 8AM-8PM</p>	<p>TAHBAZ, ASH, MFT <i>Provider Gender:</i> U <i>License number:</i> 87601 <i>NPI:</i> 1205294543 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 525 E MAIN ST EL CAJON, CA 92020-4007 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes</p>
<p>SUOZZO, JOSEPH J , PSY <i>Provider Gender:</i> Male <i>License number:</i> 18393 <i>NPI:</i> 1821013228 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i></p>	<p><i>Hours:</i> M,W-F 8AM-5PM, TU 8AM-8PM</p>	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p>	<p>Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p> <p>TEETER-WITT, ALYSSA, PSY <i>Provider Gender:</i> U <i>License number:</i> 31075 <i>NPI:</i> 1932308442 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> NEIGHBORHOOD HEALTHCARE 855 E MADISON AVE EL CAJON, CA 92020-3819 <i>Phone:</i> (619) 440-2751 <i>Fax:</i> <i>After Hours Phone:</i> (619) 440-2751 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Arabic, Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M,W-F 8AM-5PM, TU 8AM-8PM</p>	<p>SAN DIEGO 1111 W CHASE AVE EL CAJON, CA 92020-5710 <i>Phone:</i> (619) 515-2499 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2499 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>
<p>TAHBAZ, ASH, MFT <i>Provider Gender:</i> U <i>License number:</i> 87601 <i>NPI:</i> 1205294543 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1111 W CHASE AVE EL CAJON, CA 92020-5710 <i>Phone:</i> (619) 515-2499 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2499 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for</p>	<p>THICKSTUN, MARY SUSAN, CSW <i>Provider Gender:</i> Female <i>License number:</i> 21573 <i>NPI:</i> 1437354875 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 525 E MAIN ST EL CAJON, CA 92020-4007 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes</p>	<p>THICKSTUN, MARY SUSAN, CSW <i>Provider Gender:</i> Female <i>License number:</i> 21573 <i>NPI:</i> 1437354875 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 525 E MAIN ST EL CAJON, CA 92020-4007 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

THIESSEN, BRUCE L , PSY
Provider Gender: U
License number: 14259
NPI: 1841541984
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619)
515-2499
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM
THOMAS, PAULA M , CSW
Provider Gender: Female
License number: 29517
NPI: 1821389966
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
855 E MADISON AVE
EL CAJON, CA 92020-3819
Phone: (619) 440-2751
Fax:
After Hours Phone: (619)
440-2751
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Arabic, Hindi, Nepali (Individual
Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M,W-F 8AM-5PM, TU
8AM-8PM

THOMPSON, STEPHANIE G , CSW
Provider Gender: Female
License number: 75185
NPI: 1861938227
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE

855 E MADISON AVE
EL CAJON, CA 92020-3819
Phone: (619) 440-2751
Fax:
After Hours Phone: (619)
440-2751
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Arabic, Hindi, Nepali (Individual
Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M,W-F 8AM-5PM, TU
8AM-8PM

TONG, GARRICK, MD
Provider Gender: Male
License number: A102192
NPI: 1831361278
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Yue Chinese
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619)
515-2499
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

TONG, GARRICK, MD

Provider Gender: Male

License number: A102192

NPI: 1831361278

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Yue Chinese

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

TORRES, LAURA, CSW

Provider Gender: Female

License number: 65059

NPI: 1568612943

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)

515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

TORRES, LAURA, CSW

Provider Gender: Female

License number: 65059

NPI: 1568612943

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

TRIANA, JENNIFER, CSW

Provider Gender: Female

License number: 88589

NPI: 1073844460

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

680 FLETCHER PKWY STE 200

EL CAJON, CA 92020-2500

Phone: (619) 515-2338

Fax: (619) 269-0598

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5:30PM

TRIANA, JENNIFER, CSW

Provider Gender: Female
License number: 88589
NPI: 1073844460
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

TRIANA, JENNIFER, CSW

Provider Gender: Female
License number: 88589
NPI: 1073844460
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

TROYER, EMILY, PSY

Provider Gender: Female
License number: A149101
NPI: 1326484437
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710

Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

TROYER, EMILY, PSY

Provider Gender: Female
License number: A149101
NPI: 1326484437
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

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J. Directorio de proveedores de salud mental

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

VALLEZ BARLAM, ANDREA, PSY

Provider Gender: Female

License number: PSY9962

NPI: 1710902143

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

855 E MADISON AVE

EL CAJON, CA 92020-3819

Phone: (619) 440-2751

Fax:

After Hours Phone: (619)

440-2751

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Arabic, Hindi, Nepali (Individual Language), Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: M,W-F 8AM-5PM, TU 8AM-8PM

VAQUERO, JUANA, PSY

Provider Gender: Female

License number: PSY28364

NPI: 1023459708

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

855 E MADISON AVE

EL CAJON, CA 92020-3819

Phone: (619) 440-2751

Fax:

After Hours Phone: (619)

440-2751

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Arabic, Hindi, Nepali (Individual Language), Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: M,W-F 8AM-5PM, TU 8AM-8PM

WEAVER, JHOSMARA A , CSW

Provider Gender: Female

License number: 77233

NPI: 1982848594

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619) 515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

WEBSTER, KRISTIN K , CSW

Provider Gender: Female

License number: LCSW16118

NPI: 1902336837

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)

515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

WEBSTER, KRISTIN K , CSW
 Provider Gender: Female
 License number: LCSW16118
 NPI: 1902336837
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

WESH, MADELINE, PSY
 Provider Gender: Female

License number: 31736
 NPI: 1285864918
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 NEIGHBORHOOD HEALTHCARE
 215 W MADISON AVE
 EL CAJON, CA 92020-3405
 Phone: (619) 401-6236
 Fax: (619) 667-6036
 After Hours Phone: (619) 401-6236
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M,W,F 4PM-7PM

WIGLE, CHARLES E , MFT
 Provider Gender: Male
 License number: MFC29757
 NPI: 1407911878
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

WIGLE, CHARLES E , MFT
 Provider Gender: Male
 License number: MFC29757
 NPI: 1407911878
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
 Phone: (619) 515-2499
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2499
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

WILLIAMS, SHANTRICE M , NPA

Provider Gender: Female
License number: 19664
NPI: 1578865549
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish

Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
855 E MADISON AVE
EL CAJON, CA 92020-3819
Phone: (619) 440-2751

Fax:
After Hours Phone: (619)
440-2751
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Arabic, Hindi, Nepali (Individual
Language), Spanish
TDD: No

Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No

Please contact provider for
Accessibility information
Hours: M,W-F 8AM-5PM, TU
8AM-8PM

WILSON, NICOLE M , CSW

Provider Gender: Female
License number: 94855
NPI: 1033576400
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619)
515-2499
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No

Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

WITT, ANNETTE, CSW

Provider Gender: Female
License number: 15770
NPI: 1912263468
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499

Fax: (619) 702-8536
After Hours Phone: (619)
515-2499
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No

Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

WITT, ANNETTE, CSW

Provider Gender: Female
License number: 15770
NPI: 1912263468
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300

Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No

Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accessibility information

Hours: M-F 8AM-5PM

WOLF, CELIA C , NPA

Provider Gender: Female

License number: 95001899

NPI: 1245635564

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

WOLF, CELIA C , NPA

Provider Gender: Female

License number: 95001899

NPI: 1245635564

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)

515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

Yes

Please contact provider for
Accessibility information

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

WOODWORTH, JENNIFER, PSY

Provider Gender: Female

License number: 26963

NPI: 1639362494

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

855 E MADISON AVE

EL CAJON, CA 92020-3819

Phone: (619) 440-2751

Fax:

After Hours Phone: (619)

440-2751

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Arabic, Hindi, Nepali (Individual
Language), Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M,W-F 8AM-5PM, TU
8AM-8PM

YALYSHAVA, VOLHA, CSW

Provider Gender: Female

License number: LCSW69810

NPI: 1821392002

Provider English Spoken: Yes

Provider Language(s) Spoken:

Russian

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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J. Directorio de proveedores de salud mental

Hours: M-F 8AM-5PM

YALYSHAVA, VOLHA, CSW

Provider Gender: Female

License number: LCSW69810

NPI: 1821392002

Provider English Spoken: Yes

Provider Language(s) Spoken:
Russian

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)

515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

YSLA, FRANCIS M , MD

Provider Gender: Male

License number: A155712

NPI: 1578978854

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

ZAYAS, GILBERTO, MD

Provider Gender: Male

License number: A136760

NPI: 1508174970

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)

515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

ZAYAS, GILBERTO, MD

Provider Gender: Male

License number: A136760

NPI: 1508174970

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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J. Directorio de proveedores de salud mental

Hours: M-F 8AM-5PM

ENCINITAS

ALTAMIRANO, LEON, PSY

Provider Gender: Male

License number: 23734

NPI: 1619271517

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

NORTH COUNTY HEALTH
SERVICES

1130 2ND ST

ENCINITAS, CA 92024-5008

Phone: (760) 736-6767

Fax:

After Hours Phone: (760)

736-6767

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

BUCKLEY, LISA J , PSY

Provider Gender: Female

License number: 15155

NPI: 1699873976

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

BUCKLEY, LISA

1991 VILLAGE PARK WAY STE
202B

ENCINITAS, CA 92024-1967

Phone: (760) 943-1226

Fax: (760) 634-7961

After Hours Phone: (760)

943-1226

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: TU,TH,F 8AM-5PM, W
8AM-7PM

BURCIAGA, HENRY, MFT

Provider Gender: Male

License number: MFT19940

NPI: 1487785705

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NORTH COUNTY HEALTH
SERVICES

1130 2ND ST

ENCINITAS, CA 92024-5008

Phone: (760) 736-6767

Fax:

After Hours Phone: (760)

736-6767

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

CAI, SHEILA X , MD

Provider Gender: Female

License number: C149845

NPI: 1780625012

Provider English Spoken: Yes

Provider Language(s) Spoken:
Chinese

Cultural Competency:

NORTH COUNTY HEALTH
SERVICES

1130 2ND ST

ENCINITAS, CA 92024-5008

Phone: (760) 736-6767

Fax:

After Hours Phone: (760)

736-6767

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

CHALMERS, VIRGINIA, CSW

Provider Gender: Female

License number: 28053

NPI: 1265613715

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
1130 2ND ST
ENCINITAS, CA 92024-5008
Phone: (760) 736-6767
Fax:
After Hours Phone: (760)
736-6767
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

CHENG, JIM, NPA

Provider Gender: Male
License number: 22852
NPI: 1790122638
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
1130 2ND ST
ENCINITAS, CA 92024-5008
Phone: (760) 736-6767
Fax:
After Hours Phone: (760)
736-6767
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

CORNER, EMILY, MFT

Provider Gender: Female
License number: 102353
NPI: 1093225823
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
1130 2ND ST
ENCINITAS, CA 92024-5008
Phone: (760) 736-6767
Fax:
After Hours Phone: (760)
736-6767
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

CORTIZO, ROSA, PSY

Provider Gender: Female
License number: 22278
NPI: 1952316648
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
1130 2ND ST
ENCINITAS, CA 92024-5008
Phone: (760) 736-6767
Fax:
After Hours Phone: (760)
736-6767
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

FLYNN (NEWMAN), DANIELLE I, PSY

Provider Gender: U
License number: 26184
NPI: 1477785137
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
1130 2ND ST
ENCINITAS, CA 92024-5008

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J. Directorio de proveedores de salud mental

Phone: (760) 736-6767

Fax:

After Hours Phone: (760)
736-6767

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

No

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

FREEMAN, WANDA, NPA

Provider Gender: Female

License number: 95003903

NPI: 1659504264

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NORTH COUNTY HEALTH
SERVICES

1130 2ND ST

ENCINITAS, CA 92024-5008

Phone: (760) 736-6767

Fax:

After Hours Phone: (760)

736-6767

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

No

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

GARCIA, JANET A , CSW

Provider Gender: Female

License number: 91462

NPI: 1790144756

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NORTH COUNTY HEALTH
SERVICES

1130 2ND ST

ENCINITAS, CA 92024-5008

Phone: (760) 736-6767

Fax:

After Hours Phone: (760)

736-6767

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

No

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

GEORGIEV, MARY JO C , PSY

Provider Gender: Female

License number: 17954

NPI: 1518996875

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NORTH COUNTY HEALTH

SERVICES

1130 2ND ST

ENCINITAS, CA 92024-5008

Phone: (760) 736-6767

Fax:

After Hours Phone: (760)

736-6767

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

No

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

GERAUGHTY (OLEARY), PAMELA J , CSW

Provider Gender: Female

License number: 25138

NPI: 1063800217

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NORTH COUNTY HEALTH
SERVICES

1130 2ND ST

ENCINITAS, CA 92024-5008

Phone: (760) 736-6767

Fax:

After Hours Phone: (760)

736-6767

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Chinese

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J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

GONZALEZ, JOSE, CSW

Provider Gender: Male
 License number: 80920
 NPI: 1689844847
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 1130 2ND ST
 ENCINITAS, CA 92024-5008
 Phone: (760) 736-6767
 Fax:
 After Hours Phone: (760) 736-6767
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish, Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

GUEVARA LEHMAN, NATALIE, CSW

Provider Gender: Female
 License number: 63746

NPI: 1578835757
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 1130 2ND ST
 ENCINITAS, CA 92024-5008
 Phone: (760) 736-6767
 Fax:

After Hours Phone: (760) 736-6767
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish, Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

JENSEN, BRIAN M , PSY

Provider Gender: Male
 License number: 26041
 NPI: 1518138049
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 1130 2ND ST
 ENCINITAS, CA 92024-5008
 Phone: (760) 736-6767
 Fax:
 After Hours Phone: (760) 736-6767

Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish, Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

KRAPES, MICHAEL B , PSY

Provider Gender: Male
 License number: 25077
 NPI: 1215233028
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 1130 2ND ST
 ENCINITAS, CA 92024-5008
 Phone: (760) 736-6767
 Fax:
 After Hours Phone: (760) 736-6767
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish, Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Hours: M-F 8AM-5PM

MONTEZ, REBECCA, CSW

Provider Gender: Female

License number: 26869

NPI: 1396047809

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

NORTH COUNTY HEALTH

SERVICES

1130 2ND ST

ENCINITAS, CA 92024-5008

Phone: (760) 736-6767

Fax:

After Hours Phone: (760)

736-6767

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

RANSON, NICOLA M , CSW

Provider Gender: Female

License number: LCSW18469

NPI: 1326082165

Provider English Spoken: Yes

Provider Language(s) Spoken:

French

Cultural Competency:

RANSON, NICOLA LCSW

2210 ENCINITAS BLVD STE T

ENCINITAS, CA 92024-4376

Phone: (760) 753-2604

Fax: (760) 632-6859

After Hours Phone: (760)

753-2604

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

French

TDD: No

Min/Max Age: 19/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours:

REBELO, MARCIA A , CSW

Provider Gender: Female

License number: 65679

NPI: 1649720566

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

REBELO, MARCIA

187 CALLE MAGDALENA STE

212

ENCINITAS, CA 92024-3709

Phone: (760) 846-1284

Fax: (760) 634-5397

After Hours Phone: (760)

846-1284

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours:

RESNICK, CECILY A , PSY

Provider Gender: Female

License number: 16956

NPI: 1023122579

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

RESNICK, CECILY

535 ENCINITAS BLVD STE 110

ENCINITAS, CA 92024-3742

Phone: (760) 445-3737

Fax:

After Hours Phone: (760)

445-3737

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M,TU 9AM-6PM

RIVERA, DEA R , MFT

Provider Gender: Female

License number: 39066

NPI: 1992967533

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

RIVERA, DEA

826 2ND ST

ENCINITAS, CA 92024-4408

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (760) 334-3077
Fax:
After Hours Phone: (760) 334-3077
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M 12PM-8PM, TU 8AM-8PM, SA 8AM-4PM

SIMMONS, LILIANA C , NPA

Provider Gender: Female
License number: 177800
NPI: 1396113254
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
NORTH COUNTY HEALTH SERVICES
1130 2ND ST
ENCINITAS, CA 92024-5008
Phone: (760) 736-6767
Fax:
After Hours Phone: (760) 736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age:

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

SIMMONS, SUZANNE, NPA

Provider Gender: Female
License number: 95016129
NPI: 1245733450
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH SERVICES
1130 2ND ST
ENCINITAS, CA 92024-5008
Phone: (760) 736-6767
Fax:

After Hours Phone: (760) 736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

SIMPSON, ERIC, PSY

Provider Gender: Male
License number: 28885
NPI: 1710110416
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency:
NORTH COUNTY HEALTH SERVICES
1130 2ND ST
ENCINITAS, CA 92024-5008
Phone: (760) 736-6767
Fax:
After Hours Phone: (760) 736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

TAYLOR, CORRDERO A , CSW

Provider Gender: Male
License number: 71284
NPI: 1346501533
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH SERVICES
1130 2ND ST
ENCINITAS, CA 92024-5008
Phone: (760) 736-6767
Fax:
After Hours Phone: (760) 736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

TORRES, HECTOR M , PSY

Provider Gender: Male
License number: 13309
NPI: 1720265614
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
1130 2ND ST
ENCINITAS, CA 92024-5008
Phone: (760) 736-6767
Fax:
After Hours Phone: (760)
736-6767
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

VETTER, JEAN L , CSW

Provider Gender: Female

License number: 93945
NPI: 1659898641
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
1130 2ND ST
ENCINITAS, CA 92024-5008
Phone: (760) 736-6767
Fax:

After Hours Phone: (760)
736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

WALKER, SHAYNA T , MD

Provider Gender: Female
License number: A107393
NPI: 1760688295
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
1130 2ND ST
ENCINITAS, CA 92024-5008
Phone: (760) 736-6767
Fax:
After Hours Phone: (760)
736-6767

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

WELCH, MEGAN, MFT

Provider Gender: Female
License number: 113763
NPI: 1689117400
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
1130 2ND ST
ENCINITAS, CA 92024-5008
Phone: (760) 736-6767
Fax:

After Hours Phone: (760)
736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information

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J. Directorio de proveedores de salud mental

Hours: M-F 8AM-5PM

ESCONDIDO

ANDERSEN, CLAIRE, MD

Provider Gender: Female

License number: 125942

NPI: 1831418664

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

488 E VALLEY PKWY STE 404

ESCONDIDO, CA 92025-3379

Phone: (760) 466-9800

Fax: (858) 633-4694

After Hours Phone: (760)

466-9800

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Nepali (Individual Language),

Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

ANDERSEN, CLAIRE, MD

Provider Gender: Female

License number: 125942

NPI: 1831418664

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

425 N DATE ST

ESCONDIDO, CA 92025-3413

Phone: (760) 520-8330

Fax:

After Hours Phone: (760)

520-8330

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Nepali (Individual Language),

Spanish, Serbian

TDD: Yes

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

ANDERSEN, CLAIRE, MD

Provider Gender: Female

License number: 125942

NPI: 1831418664

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

728 E VALLEY PKWY

ESCONDIDO, CA 92025-3052

Phone: (760) 737-6900

Fax: (858) 633-4694

After Hours Phone: (760)

737-6900

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Nepali (Individual Language),

Spanish

TDD: Yes

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

ANDERSEN, CLAIRE, MD

Provider Gender: Female

License number: 125942

NPI: 1831418664

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

426 N DATE ST

ESCONDIDO, CA 92025-3409

Phone: (760) 690-5900

Fax:

After Hours Phone: (760)

690-5900

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Nepali (Individual Language),

Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

ANDERSEN, CLAIRE, MD

Provider Gender: Female

License number: 125942

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

NPI: 1831418664
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 1001 E GRAND AVE
 ESCONDIDO, CA 92025-4604
 Phone: (760) 520-8200
 Fax: (858) 633-4695
 After Hours Phone: (760)
 520-8200
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

ANDERSEN, CLAIRE, MD

Provider Gender: Female
 License number: 125942
 NPI: 1831418664
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 460 N ELM ST
 ESCONDIDO, CA 92025-3002
 Phone: (760) 520-8100
 Fax: (858) 633-4691
 After Hours Phone: (760)
 520-8100

Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
 TDD: Yes
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-W 8AM-8PM, TH,F
 8AM-5PM, SA 8AM-12PM

ANDERSEN, CLAIRE, MD

Provider Gender: Female
 License number: 125942
 NPI: 1831418664
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 550 W WASHINGTON AVE
 ESCONDIDO, CA 92025-1643
 Phone: (760) 466-8600
 Fax:
 After Hours Phone: (760)
 466-8600
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):

No
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

BARMAK, SHANT, PSY

Provider Gender: Male
 License number: 24998
 NPI: 1235408972
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Armenian
 Cultural Competency:
 MOUNTAIN HEALTH AND
 COMMUNITY SERVICES INC
 255 N ASH ST
 ESCONDIDO, CA 92027-3068
 Phone: (619) 445-6200
 Fax: (619) 745-7847
 After Hours Phone: (619)
 445-6200
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Armenian
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

BELINSKY, MARIA T , CSW

Provider Gender: Female
 License number: LCSW69175
 NPI: 1760867824
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:

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J. Directorio de proveedores de salud mental

NEIGHBORHOOD
HEALTHCARE
728 E VALLEY PKWY
ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax: (858) 633-4694
After Hours Phone: (760)
737-6900
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

BELINSKY, MARIA T , CSW
Provider Gender: Female
License number: LCSW69175
NPI: 1760867824
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
426 N DATE ST
ESCONDIDO, CA 92025-3409
Phone: (760) 690-5900
Fax:
After Hours Phone: (760)
690-5900
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

BELINSKY, MARIA T , CSW
Provider Gender: Female
License number: LCSW69175
NPI: 1760867824
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
460 N ELM ST
ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax: (858) 633-4691
After Hours Phone: (760)
520-8100
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-W 8AM-8PM, TH,F

8AM-5PM, SA 8AM-12PM
BELINSKY, MARIA T , CSW
Provider Gender: Female
License number: LCSW69175
NPI: 1760867824
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
1001 E GRAND AVE
ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (858) 633-4695
After Hours Phone: (760)
520-8200
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM
BELINSKY, MARIA T , CSW
Provider Gender: Female
License number: LCSW69175
NPI: 1760867824
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

488 E VALLEY PKWY STE 404
 ESCONDIDO, CA 92025-3379
 Phone: (760) 466-9800
 Fax: (858) 633-4694
 After Hours Phone: (760)
 466-9800
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

BELINSKY, MARIA T , CSW

Provider Gender: Female
 License number: LCSW69175
 NPI: 1760867824
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 425 N DATE ST
 ESCONDIDO, CA 92025-3413
 Phone: (760) 520-8330
 Fax:
 After Hours Phone: (760)
 520-8330
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),

Spanish, Serbian
 TDD: Yes
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

BELINSKY, MARIA T , CSW

Provider Gender: Female
 License number: LCSW69175
 NPI: 1760867824
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 550 W WASHINGTON AVE
 ESCONDIDO, CA 92025-1643
 Phone: (760) 466-8600
 Fax:
 After Hours Phone: (760)
 466-8600
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

BHAJU, JESHMIN, PSY

Provider Gender: Female
 License number: 31625
 NPI: 1497081566
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Hindi, Nepali (Individual
 Language)
 Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 460 N ELM ST
 ESCONDIDO, CA 92025-3002
 Phone: (760) 520-8100
 Fax: (858) 633-4691
 After Hours Phone: (760)
 520-8100
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
 TDD: Yes
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-W 8AM-8PM, TH,F
 8AM-5PM, SA 8AM-12PM

BHAJU, JESHMIN, PSY

Provider Gender: Female
 License number: 31625
 NPI: 1497081566
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Hindi, Nepali (Individual
 Language)
 Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

426 N DATE ST
ESCONDIDO, CA 92025-3409
Phone: (760) 690-5900
Fax:
After Hours Phone: (760)
690-5900
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

BHAJU, JESHMIN, PSY
Provider Gender: Female
License number: 31625
NPI: 1497081566
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi, Nepali (Individual
Language)
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
425 N DATE ST
ESCONDIDO, CA 92025-3413
Phone: (760) 520-8330
Fax:
After Hours Phone: (760)
520-8330
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,

Nepali (Individual Language),
Spanish, Serbian
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

BHAJU, JESHMIN, PSY
Provider Gender: Female
License number: 31625
NPI: 1497081566
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi, Nepali (Individual
Language)
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
488 E VALLEY PKWY STE 404
ESCONDIDO, CA 92025-3379
Phone: (760) 466-9800
Fax: (858) 633-4694
After Hours Phone: (760)
466-9800
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

BHAJU, JESHMIN, PSY
Provider Gender: Female
License number: 31625
NPI: 1497081566
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi, Nepali (Individual
Language)
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
550 W WASHINGTON AVE
ESCONDIDO, CA 92025-1643
Phone: (760) 466-8600
Fax:
After Hours Phone: (760)
466-8600
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

BHAJU, JESHMIN, PSY
Provider Gender: Female
License number: 31625
NPI: 1497081566
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi, Nepali (Individual
Language)
Cultural Competency:
NEIGHBORHOOD

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

HEALTHCARE
728 E VALLEY PKWY
ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax: (858) 633-4694
After Hours Phone: (760)
737-6900
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

BHAJU, JESHMIN, PSY
Provider Gender: Female
License number: 31625
NPI: 1497081566
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi, Nepali (Individual
Language)
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
1001 E GRAND AVE
ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (858) 633-4695
After Hours Phone: (760)
520-8200
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

CALOCA, LAURA, PSY
Provider Gender: Female
License number: 29757
NPI: 1134364698
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
1001 E GRAND AVE
ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (858) 633-4695
After Hours Phone: (760)
520-8200
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

CALOCA, LAURA, PSY
Provider Gender: Female
License number: 29757
NPI: 1134364698
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
550 W WASHINGTON AVE
ESCONDIDO, CA 92025-1643
Phone: (760) 466-8600
Fax:
After Hours Phone: (760)
466-8600
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

CALOCA, LAURA, PSY
Provider Gender: Female
License number: 29757
NPI: 1134364698
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
425 N DATE ST

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

ESCONDIDO, CA 92025-3413
 Phone: (760) 520-8330
 Fax:
 After Hours Phone: (760) 520-8330
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish, Serbian
 TDD: Yes
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

CALOCA, LAURA, PSY
 Provider Gender: Female
 License number: 29757
 NPI: 1134364698
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: NEIGHBORHOOD HEALTHCARE
 460 N ELM ST
 ESCONDIDO, CA 92025-3002
 Phone: (760) 520-8100
 Fax: (858) 633-4691
 After Hours Phone: (760) 520-8100
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish

TDD: Yes
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-W 8AM-8PM, TH,F 8AM-5PM, SA 8AM-12PM

CALOCA, LAURA, PSY
 Provider Gender: Female
 License number: 29757
 NPI: 1134364698
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: NEIGHBORHOOD HEALTHCARE
 426 N DATE ST
 ESCONDIDO, CA 92025-3409
 Phone: (760) 690-5900
 Fax:
 After Hours Phone: (760) 690-5900
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

CALOCA, LAURA, PSY

Provider Gender: Female
 License number: 29757
 NPI: 1134364698
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: NEIGHBORHOOD HEALTHCARE
 728 E VALLEY PKWY
 ESCONDIDO, CA 92025-3052
 Phone: (760) 737-6900
 Fax: (858) 633-4694
 After Hours Phone: (760) 737-6900
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
 TDD: Yes
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

CALOCA, LAURA, PSY
 Provider Gender: Female
 License number: 29757
 NPI: 1134364698
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: NEIGHBORHOOD HEALTHCARE
 488 E VALLEY PKWY STE 404
 ESCONDIDO, CA 92025-3379

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (760) 466-9800
Fax: (858) 633-4694
After Hours Phone: (760) 466-9800
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CARLTON PENN, CORNELIA, PSY

Provider Gender: Female
License number: PSY14310
NPI: 1891720611
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
1001 E GRAND AVE
ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (858) 633-4695
After Hours Phone: (760) 520-8200
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No

Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CARLTON PENN, CORNELIA, PSY

Provider Gender: Female
License number: PSY14310
NPI: 1891720611
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
550 W WASHINGTON AVE
ESCONDIDO, CA 92025-1643
Phone: (760) 466-8600

Fax:
After Hours Phone: (760) 466-8600
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CARLTON PENN, CORNELIA, PSY

Provider Gender: Female

License number: PSY14310
NPI: 1891720611
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
426 N DATE ST
ESCONDIDO, CA 92025-3409
Phone: (760) 690-5900
Fax:
After Hours Phone: (760) 690-5900
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CARLTON PENN, CORNELIA, PSY

Provider Gender: Female
License number: PSY14310
NPI: 1891720611
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
488 E VALLEY PKWY STE 404
ESCONDIDO, CA 92025-3379

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (760) 466-9800
Fax: (858) 633-4694
After Hours Phone: (760) 466-9800
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CARLTON PENN, CORNELIA, PSY

Provider Gender: Female
License number: PSY14310
NPI: 1891720611
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
460 N ELM ST
ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax: (858) 633-4691
After Hours Phone: (760) 520-8100
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes

Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-W 8AM-8PM, TH,F 8AM-5PM, SA 8AM-12PM

CARLTON PENN, CORNELIA, PSY

Provider Gender: Female
License number: PSY14310
NPI: 1891720611
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
425 N DATE ST
ESCONDIDO, CA 92025-3413
Phone: (760) 520-8330
Fax:
After Hours Phone: (760) 520-8330
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish, Serbian
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CARLTON PENN, CORNELIA, PSY

Provider Gender: Female
License number: PSY14310
NPI: 1891720611
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
728 E VALLEY PKWY
ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax: (858) 633-4694
After Hours Phone: (760) 737-6900
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CASTILLO, TIFFANY A , MD

Provider Gender: Female
License number: A158480
NPI: 1114459252
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NEIGHBORHOOD HEALTHCARE
425 N DATE ST
ESCONDIDO, CA 92025-3413

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (760) 520-8330

Fax:

After Hours Phone: (760)
520-8330

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish, Serbian

TDD: Yes

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

CELAYA, MARY, NPA

Provider Gender: Female

License number: 11425

NPI: 1710060231

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

550 W WASHINGTON AVE

ESCONDIDO, CA 92025-1643

Phone: (760) 466-8600

Fax:

After Hours Phone: (760)

466-8600

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

CELAYA, MARY, NPA

Provider Gender: Female

License number: 11425

NPI: 1710060231

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

426 N DATE ST

ESCONDIDO, CA 92025-3409

Phone: (760) 690-5900

Fax:

After Hours Phone: (760)

690-5900

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Nepali (Individual Language),

Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

CELAYA, MARY, NPA

Provider Gender: Female

License number: 11425

NPI: 1710060231

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

425 N DATE ST

ESCONDIDO, CA 92025-3413

Phone: (760) 520-8330

Fax:

After Hours Phone: (760)

520-8330

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Nepali (Individual Language),

Spanish, Serbian

TDD: Yes

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

CELAYA, MARY, NPA

Provider Gender: Female

License number: 11425

NPI: 1710060231

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

728 E VALLEY PKWY

ESCONDIDO, CA 92025-3052

Phone: (760) 737-6900

Fax: (858) 633-4694

After Hours Phone: (760)

737-6900

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CELAYA, MARY, NPA

Provider Gender: Female
License number: 11425
NPI: 1710060231
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 460 N ELM ST
 ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax: (858) 633-4691
After Hours Phone: (760) 520-8100
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-W 8AM-8PM, TH,F

8AM-5PM, SA 8AM-12PM
CELAYA, MARY, NPA
Provider Gender: Female
License number: 11425
NPI: 1710060231
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 1001 E GRAND AVE
 ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (858) 633-4695
After Hours Phone: (760) 520-8200
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CELAYA, MARY, NPA
Provider Gender: Female
License number: 11425
NPI: 1710060231
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 488 E VALLEY PKWY STE 404
 ESCONDIDO, CA 92025-3379

Phone: (760) 466-9800
Fax: (858) 633-4694
After Hours Phone: (760) 466-9800
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CHAFFEE, CHRISTI E , MFT

Provider Gender: Female
License number: 28950
NPI: 1881641983
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: CHAFFEE, CHRISTI
 327 S IVY ST
 ESCONDIDO, CA 92025-4337
Phone: (760) 791-7922
Fax: (760) 294-2151
After Hours Phone: (760) 791-7922
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>No Please contact provider for Accessibility information <i>Hours:</i> M 12PM-3:30PM, TU 8AM-8PM, W 2PM-8PM, TH 8AM-4PM</p>	<p><i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> NEIGHBORHOOD HEALTHCARE 1001 E GRAND AVE ESCONDIDO, CA 92025-4604 <i>Phone:</i> (760) 520-8200 <i>Fax:</i> (858) 633-4695 <i>After Hours Phone:</i> (760) 520-8200 <i>Website:</i> www.beaconhealthoptions.com</p>	<p><i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> Yes <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-W 8AM-8PM, TH,F 8AM-5PM, SA 8AM-12PM</p>
<p>CHALMERS, VIRGINIA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 28053 <i>NPI:</i> 1265613715 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> NEIGHBORHOOD HEALTHCARE 425 N DATE ST ESCONDIDO, CA 92025-3413 <i>Phone:</i> (760) 520-8330 <i>Fax:</i> <i>After Hours Phone:</i> (760) 520-8330 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish, Serbian <i>TDD:</i> Yes <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p>	<p><i>Phone:</i> (760) 520-8200 <i>Fax:</i> (858) 633-4695 <i>After Hours Phone:</i> (760) 520-8200 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> No <i>Min/Max Age:</i> 19/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p>	<p>CHAO, BRIAN, PSY <i>Provider Gender:</i> Male <i>License number:</i> 28796 <i>NPI:</i> 1114196987 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> NEIGHBORHOOD HEALTHCARE 425 N DATE ST ESCONDIDO, CA 92025-3413 <i>Phone:</i> (760) 520-8330 <i>Fax:</i> <i>After Hours Phone:</i> (760) 520-8330 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish, Serbian <i>TDD:</i> Yes <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for</p>
<p>CHALMERS, VIRGINIA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 28053 <i>NPI:</i> 1265613715 <i>Provider English Spoken:</i> Yes</p>	<p>CHAO, BRIAN, PSY <i>Provider Gender:</i> Male <i>License number:</i> 28796 <i>NPI:</i> 1114196987 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> NEIGHBORHOOD HEALTHCARE 460 N ELM ST ESCONDIDO, CA 92025-3002 <i>Phone:</i> (760) 520-8100 <i>Fax:</i> (858) 633-4691 <i>After Hours Phone:</i> (760) 520-8100 <i>Website:</i> www.beaconhealthoptions.com</p>	<p><i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish, Serbian <i>TDD:</i> Yes <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accessibility information

Hours: M-F 8AM-5PM

CHAO, BRIAN, PSY

Provider Gender: Male

License number: 28796

NPI: 1114196987

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

488 E VALLEY PKWY STE 404

ESCONDIDO, CA 92025-3379

Phone: (760) 466-9800

Fax: (858) 633-4694

After Hours Phone: (760)

466-9800

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Nepali (Individual Language),

Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

CHAO, BRIAN, PSY

Provider Gender: Male

License number: 28796

NPI: 1114196987

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

426 N DATE ST

ESCONDIDO, CA 92025-3409

Phone: (760) 690-5900

Fax:

After Hours Phone: (760)

690-5900

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Nepali (Individual Language),

Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

CHAO, BRIAN, PSY

Provider Gender: Male

License number: 28796

NPI: 1114196987

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

1001 E GRAND AVE

ESCONDIDO, CA 92025-4604

Phone: (760) 520-8200

Fax: (858) 633-4695

After Hours Phone: (760)

520-8200

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Nepali (Individual Language),

Spanish

TDD: No

Min/Max Age: 19/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

CHAO, BRIAN, PSY

Provider Gender: Male

License number: 28796

NPI: 1114196987

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

550 W WASHINGTON AVE

ESCONDIDO, CA 92025-1643

Phone: (760) 466-8600

Fax:

After Hours Phone: (760)

466-8600

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Nepali (Individual Language),

Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

CORVINI, NICOLAS, NPA

Provider Gender: Male

License number: 55107

NPI: 1194242461

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 1001 E GRAND AVE
 ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (858) 633-4695
After Hours Phone: (760)
 520-8200
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

CORVINI, NICOLAS, NPA

Provider Gender: Male
License number: 55107
NPI: 1194242461
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 460 N ELM ST
 ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax: (858) 633-4691
After Hours Phone: (760)
 520-8100
Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-W 8AM-8PM, TH,F
 8AM-5PM, SA 8AM-12PM

CORVINI, NICOLAS, NPA

Provider Gender: Male
License number: 55107
NPI: 1194242461
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 426 N DATE ST
 ESCONDIDO, CA 92025-3409
Phone: (760) 690-5900
Fax:
After Hours Phone: (760)
 690-5900
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for

Accessibility information
Hours: M-F 8AM-5PM

CORVINI, NICOLAS, NPA

Provider Gender: Male
License number: 55107
NPI: 1194242461
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 488 E VALLEY PKWY STE 404
 ESCONDIDO, CA 92025-3379
Phone: (760) 466-9800
Fax: (858) 633-4694
After Hours Phone: (760)
 466-9800
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

CORVINI, NICOLAS, NPA

Provider Gender: Male
License number: 55107
NPI: 1194242461
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 550 W WASHINGTON AVE

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

ESCONDIDO, CA 92025-1643
 Phone: (760) 466-8600
 Fax:

After Hours Phone: (760)
 466-8600

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 No

Please contact provider for
 Accessibility information

Hours: M-F 8AM-5PM

CORVINI, NICOLAS, NPA

Provider Gender: Male

License number: 55107

NPI: 1194242461

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

728 E VALLEY PKWY

ESCONDIDO, CA 92025-3052

Phone: (760) 737-6900

Fax: (858) 633-4694

After Hours Phone: (760)

737-6900

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish

TDD: Yes

Min/Max Age:

Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 No

Please contact provider for
 Accessibility information

Hours: M-F 8AM-5PM

CORVINI, NICOLAS, NPA

Provider Gender: Male

License number: 55107

NPI: 1194242461

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

425 N DATE ST

ESCONDIDO, CA 92025-3413

Phone: (760) 520-8330

Fax:

After Hours Phone: (760)

520-8330

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish, Serbian

TDD: Yes

Min/Max Age:

Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 No

Please contact provider for
 Accessibility information

Hours: M-F 8AM-5PM

COSTELLO, JENNIFER R , CSW

Provider Gender: Female

License number: 84174

NPI: 1619506250

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

426 N DATE ST

ESCONDIDO, CA 92025-3409

Phone: (760) 690-5900

Fax:

After Hours Phone: (760)

690-5900

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 No

Please contact provider for
 Accessibility information

Hours: M-F 8AM-5PM

COSTELLO, JENNIFER R , CSW

Provider Gender: Female

License number: 84174

NPI: 1619506250

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

550 W WASHINGTON AVE

ESCONDIDO, CA 92025-1643

Phone: (760) 466-8600

Fax:

After Hours Phone: (760)

466-8600

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p>	<p>No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p> <p>COSTELLO, JENNIFER R , CSW <i>Provider Gender:</i> Female <i>License number:</i> 84174 <i>NPI:</i> 1619506250 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> NEIGHBORHOOD HEALTHCARE 488 E VALLEY PKWY STE 404 ESCONDIDO, CA 92025-3379 <i>Phone:</i> (760) 466-9800 <i>Fax:</i> (858) 633-4694 <i>After Hours Phone:</i> (760) 466-9800 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p>	<p><i>Cultural Competency:</i> NEIGHBORHOOD HEALTHCARE 425 N DATE ST ESCONDIDO, CA 92025-3413 <i>Phone:</i> (760) 520-8330 <i>Fax:</i> <i>After Hours Phone:</i> (760) 520-8330 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish, Serbian <i>TDD:</i> Yes <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p>
<p>COSTELLO, JENNIFER R , CSW <i>Provider Gender:</i> Female <i>License number:</i> 84174 <i>NPI:</i> 1619506250 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> NEIGHBORHOOD HEALTHCARE 728 E VALLEY PKWY ESCONDIDO, CA 92025-3052 <i>Phone:</i> (760) 737-6900 <i>Fax:</i> (858) 633-4694 <i>After Hours Phone:</i> (760) 737-6900 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> Yes <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i></p>	<p>COSTELLO, JENNIFER R , CSW <i>Provider Gender:</i> Female <i>License number:</i> 84174 <i>NPI:</i> 1619506250 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> NEIGHBORHOOD HEALTHCARE 1001 E GRAND AVE ESCONDIDO, CA 92025-4604 <i>Phone:</i> (760) 520-8200 <i>Fax:</i> (858) 633-4695 <i>After Hours Phone:</i> (760) 520-8200 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes</p>	<p>COSTELLO, JENNIFER R , CSW <i>Provider Gender:</i> Female <i>License number:</i> 84174 <i>NPI:</i> 1619506250 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> NEIGHBORHOOD HEALTHCARE 1001 E GRAND AVE ESCONDIDO, CA 92025-4604 <i>Phone:</i> (760) 520-8200 <i>Fax:</i> (858) 633-4695 <i>After Hours Phone:</i> (760) 520-8200 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes</p>

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J. Directorio de proveedores de salud mental

Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

COSTELLO, JENNIFER R , CSW

Provider Gender: Female
License number: 84174
NPI: 1619506250
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
460 N ELM ST
ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax: (858) 633-4691
After Hours Phone: (760) 520-8100
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information

Hours: M-W 8AM-8PM, TH,F 8AM-5PM, SA 8AM-12PM

EDE, KEKOA, MD

Provider Gender: Male
License number: A101211
NPI: 1134224843
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
425 N DATE ST
ESCONDIDO, CA 92025-3413
Phone: (760) 520-8330

Fax:
After Hours Phone: (760) 520-8330
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish, Serbian
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

EDE, KEKOA, MD

Provider Gender: Male
License number: A101211
NPI: 1134224843
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
460 N ELM ST

ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax: (858) 633-4691
After Hours Phone: (760) 520-8100
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-W 8AM-8PM, TH,F 8AM-5PM, SA 8AM-12PM

EDE, KEKOA, MD

Provider Gender: Male
License number: A101211
NPI: 1134224843
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
426 N DATE ST
ESCONDIDO, CA 92025-3409
Phone: (760) 690-5900
Fax:
After Hours Phone: (760) 690-5900
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

EDE, KEKOA, MD

Provider Gender: Male
 License number: A101211
 NPI: 1134224843
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 1001 E GRAND AVE
 ESCONDIDO, CA 92025-4604
 Phone: (760) 520-8200
 Fax: (858) 633-4695
 After Hours Phone: (760) 520-8200
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
 TDD: No

Min/Max Age: 19/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

EDE, KEKOA, MD

Provider Gender: Male
 License number: A101211

NPI: 1134224843
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 550 W WASHINGTON AVE
 ESCONDIDO, CA 92025-1643
 Phone: (760) 466-8600
 Fax:

After Hours Phone: (760) 466-8600
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
 TDD: No

Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

EDE, KEKOA, MD

Provider Gender: Male
 License number: A101211
 NPI: 1134224843
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 728 E VALLEY PKWY
 ESCONDIDO, CA 92025-3052
 Phone: (760) 737-6900
 Fax: (858) 633-4694
 After Hours Phone: (760) 737-6900

Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
 TDD: Yes
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

FERTIG, PATRICIA A , MD

Provider Gender: Female
 License number: 20A14928
 NPI: 1457642803
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 425 N DATE ST
 ESCONDIDO, CA 92025-3413
 Phone: (760) 520-8330
 Fax:

After Hours Phone: (760) 520-8330
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish, Serbian
 TDD: Yes
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

FRITZ, JENNIFER K , PSY

Provider Gender: Female
License number: PSY24350
NPI: 1013071497
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MOUNTAIN HEALTH AND
COMMUNITY SERVICES INC
255 N ASH ST
ESCONDIDO, CA 92027-3068
Phone: (619) 445-6200
Fax: (619) 745-7847
After Hours Phone: (619)
445-6200
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

Armenian

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

GANDY, SHARAREH, PSY

Provider Gender: Female
License number: PSY28097
NPI: 1730310723
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
INTEGRATED HEALTH
PARTNERS- BORREGO
COMMUNITY HEALTH

FOUNDAT
1121 E WASHINGTON AVE
ESCONDIDO, CA 92025-2214
Phone: (760) 871-0606
Fax: (858) 634-6918
After Hours Phone: (760)
871-0606
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Kiswahili, Swahili
(Individual Language)

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

GARCIA, JANET A , CSW

Provider Gender: Female
License number: 91462
NPI: 1790144756
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
550 W WASHINGTON AVE
ESCONDIDO, CA 92025-1643
Phone: (760) 466-8600
Fax:
After Hours Phone: (760)
466-8600
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),

Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

GOEHRING, KATHERINE R , NPA

Provider Gender: Female
License number: 95002763
NPI: 1972929404
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
460 N ELM ST
ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax: (858) 633-4691
After Hours Phone: (760)
520-8100
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish

TDD: Yes

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information
Hours: M-W 8AM-8PM, TH,F
8AM-5PM, SA 8AM-12PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

GOEHRING, KATHERINE R , NPA

Provider Gender: Female
License number: 95002763
NPI: 1972929404
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 425 N DATE ST
 ESCONDIDO, CA 92025-3413
Phone: (760) 520-8330
Fax:
After Hours Phone: (760)
 520-8330
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish, Serbian
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

GOEHRING, KATHERINE R , NPA

Provider Gender: Female
License number: 95002763
NPI: 1972929404
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 426 N DATE ST

ESCONDIDO, CA 92025-3409
Phone: (760) 690-5900
Fax:
After Hours Phone: (760)
 690-5900
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

GOEHRING, KATHERINE R , NPA

Provider Gender: Female
License number: 95002763
NPI: 1972929404
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 488 E VALLEY PKWY STE 404
 ESCONDIDO, CA 92025-3379
Phone: (760) 466-9800
Fax: (858) 633-4694
After Hours Phone: (760)
 466-9800
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish

TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

GOEHRING, KATHERINE R , NPA

Provider Gender: Female
License number: 95002763
NPI: 1972929404
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 550 W WASHINGTON AVE
 ESCONDIDO, CA 92025-1643
Phone: (760) 466-8600
Fax:
After Hours Phone: (760)
 466-8600
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

GOEHRING, KATHERINE R , NPA

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Gender: Female
License number: 95002763
NPI: 1972929404
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 1001 E GRAND AVE
 ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (858) 633-4695
After Hours Phone: (760)
 520-8200
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

GUARDADO SOTO, RAQUEL E , PSY

Provider Gender: Female
License number: 26883
NPI: 1194999276
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 425 N DATE ST
 ESCONDIDO, CA 92025-3413

Phone: (760) 520-8330
Fax:
After Hours Phone: (760)
 520-8330
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish, Serbian
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

GUARDADO SOTO, RAQUEL E , PSY

Provider Gender: Female
License number: 26883
NPI: 1194999276
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 550 W WASHINGTON AVE
 ESCONDIDO, CA 92025-1643
Phone: (760) 466-8600
Fax:
After Hours Phone: (760)
 466-8600
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish

TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

GUARDADO SOTO, RAQUEL E , PSY

Provider Gender: Female
License number: 26883
NPI: 1194999276
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 1001 E GRAND AVE
 ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (858) 633-4695
After Hours Phone: (760)
 520-8200
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

GUARDADO SOTO, RAQUEL E

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>, PSY <i>Provider Gender:</i> Female <i>License number:</i> 26883 <i>NPI:</i> 1194999276 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> NEIGHBORHOOD HEALTHCARE 460 N ELM ST ESCONDIDO, CA 92025-3002 <i>Phone:</i> (760) 520-8100 <i>Fax:</i> (858) 633-4691 <i>After Hours Phone:</i> (760) 520-8100 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> Yes <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-W 8AM-8PM, TH,F 8AM-5PM, SA 8AM-12PM</p>	<p>426 N DATE ST ESCONDIDO, CA 92025-3409 <i>Phone:</i> (760) 690-5900 <i>Fax:</i> <i>After Hours Phone:</i> (760) 690-5900 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p>	<p>Nepali (Individual Language), Spanish <i>TDD:</i> Yes <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p>
<p>GUARDADO SOTO, RAQUEL E , PSY <i>Provider Gender:</i> Female <i>License number:</i> 26883 <i>NPI:</i> 1194999276 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> NEIGHBORHOOD HEALTHCARE</p>	<p>GUARDADO SOTO, RAQUEL E , PSY <i>Provider Gender:</i> Female <i>License number:</i> 26883 <i>NPI:</i> 1194999276 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> NEIGHBORHOOD HEALTHCARE 728 E VALLEY PKWY ESCONDIDO, CA 92025-3052 <i>Phone:</i> (760) 737-6900 <i>Fax:</i> (858) 633-4694 <i>After Hours Phone:</i> (760) 737-6900 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi,</p>	<p>HAMISI, KHADIJA H , NPA <i>Provider Gender:</i> Female <i>License number:</i> 20560 <i>NPI:</i> 1225360498 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Kiswahili, Swahili (Individual Language) <i>Cultural Competency:</i> INTEGRATED HEALTH PARTNERS- BORREGO COMMUNITY HEALTH FOUNDAT 1121 E WASHINGTON AVE ESCONDIDO, CA 92025-2214 <i>Phone:</i> (760) 871-0606 <i>Fax:</i> (858) 634-6918 <i>After Hours Phone:</i> (760) 871-0606 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish, Kiswahili, Swahili (Individual Language) <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accessibility information
Hours: M-F 8AM-5PM

HOLDEN, MATTHEW, PSY

Provider Gender: Male
License number: PSY11197
NPI: 1740213487
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
425 N DATE ST
ESCONDIDO, CA 92025-3413
Phone: (760) 520-8330
Fax:

After Hours Phone: (760)
520-8330

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish, Serbian
TDD: Yes

Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

HOLDEN, MATTHEW, PSY

Provider Gender: Male
License number: PSY11197
NPI: 1740213487
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
426 N DATE ST

ESCONDIDO, CA 92025-3409
Phone: (760) 690-5900
Fax:

After Hours Phone: (760)
690-5900
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: No

Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

HOLDEN, MATTHEW, PSY

Provider Gender: Male
License number: PSY11197
NPI: 1740213487
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
550 W WASHINGTON AVE
ESCONDIDO, CA 92025-1643
Phone: (760) 466-8600
Fax:

After Hours Phone: (760)
466-8600
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: No

Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

HOLDEN, MATTHEW, PSY

Provider Gender: Male
License number: PSY11197
NPI: 1740213487
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
1001 E GRAND AVE
ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (858) 633-4695

After Hours Phone: (760)
520-8200

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: No

Min/Max Age: 19/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

HOLDEN, MATTHEW, PSY

Provider Gender: Male
License number: PSY11197
NPI: 1740213487

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J. Directorio de proveedores de salud mental

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 460 N ELM ST
 ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax: (858) 633-4691
After Hours Phone: (760)
 520-8100
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-W 8AM-8PM, TH,F
 8AM-5PM, SA 8AM-12PM

HOLDEN, MATTHEW, PSY
Provider Gender: Male
License number: PSY11197
NPI: 1740213487
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 728 E VALLEY PKWY
 ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax: (858) 633-4694
After Hours Phone: (760)
 737-6900

Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

HORSLEY, DEBRA L , CSW
Provider Gender: Female
License number: 15974
NPI: 1205849825
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 HORSLEY, DEBRA
 332 S JUNIPER ST STE 203B
 ESCONDIDO, CA 92025-4942
Phone: (760) 233-7730
Fax: (760) 233-7730
After Hours Phone: (760)
 233-7730
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-7PM, SA

8AM-3PM

JOHNSON, JENNIFER, CSW
Provider Gender: Female
License number: 74200
NPI: 1871725838
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 1002 E GRAND AVE
 ESCONDIDO, CA 92025-4605
Phone: (760) 741-2660
Fax: (760) 741-2647
After Hours Phone: (760)
 741-2660
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Hebrew
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

KLEAST, RUTH A , CSW
Provider Gender: Female
License number: LCSW28504
NPI: 1326272378
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 460 N ELM ST
 ESCONDIDO, CA 92025-3002

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J. Directorio de proveedores de salud mental

Phone: (760) 520-8100
 Fax: (858) 633-4691
 After Hours Phone: (760) 520-8100
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
 TDD: Yes
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-W 8AM-8PM, TH,F 8AM-5PM, SA 8AM-12PM

KLEAST, RUTH A , CSW
 Provider Gender: Female
 License number: LCSW28504
 NPI: 1326272378
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 728 E VALLEY PKWY
 ESCONDIDO, CA 92025-3052
 Phone: (760) 737-6900
 Fax: (858) 633-4694
 After Hours Phone: (760) 737-6900
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
 TDD: Yes

Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

KLEAST, RUTH A , CSW
 Provider Gender: Female
 License number: LCSW28504
 NPI: 1326272378
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 1001 E GRAND AVE
 ESCONDIDO, CA 92025-4604
 Phone: (760) 520-8200
 Fax: (858) 633-4695
 After Hours Phone: (760) 520-8200
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

KLEAST, RUTH A , CSW
 Provider Gender: Female
 License number: LCSW28504
 NPI: 1326272378
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 426 N DATE ST
 ESCONDIDO, CA 92025-3409
 Phone: (760) 690-5900
 Fax:
 After Hours Phone: (760) 690-5900
 Website:
 www.beaconhealthoptions.com

KLEAST, RUTH A , CSW
 Provider Gender: Female
 License number: LCSW28504
 NPI: 1326272378

Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 550 W WASHINGTON AVE
 ESCONDIDO, CA 92025-1643
 Phone: (760) 466-8600
 Fax:
 After Hours Phone: (760) 466-8600
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

KLEAST, RUTH A , CSW
 Provider Gender: Female
 License number: LCSW28504
 NPI: 1326272378
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 426 N DATE ST
 ESCONDIDO, CA 92025-3409
 Phone: (760) 690-5900
 Fax:
 After Hours Phone: (760) 690-5900
 Website:
 www.beaconhealthoptions.com

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

KLEAST, RUTH A , CSW
Provider Gender: Female
License number: LCSW28504
NPI: 1326272378
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 488 E VALLEY PKWY STE 404 ESCONDIDO, CA 92025-3379
Phone: (760) 466-9800
Fax: (858) 633-4694
After Hours Phone: (760) 466-9800
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information

Hours: M-F 8AM-5PM
KLEAST, RUTH A , CSW
Provider Gender: Female
License number: LCSW28504
NPI: 1326272378
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 425 N DATE ST ESCONDIDO, CA 92025-3413
Phone: (760) 520-8330
Fax:
After Hours Phone: (760) 520-8330
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish, Serbian
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

LIU-BARBARO, DOROTHY, MD
Provider Gender: Female
License number: A115342
NPI: 1851602270
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 426 N DATE ST ESCONDIDO, CA 92025-3409

Phone: (760) 690-5900
Fax:
After Hours Phone: (760) 690-5900
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

LIU-BARBARO, DOROTHY, MD
Provider Gender: Female
License number: A115342
NPI: 1851602270
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 728 E VALLEY PKWY ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax: (858) 633-4694
After Hours Phone: (760) 737-6900
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

LIU-BARBARO, DOROTHY, MD

Provider Gender: Female
License number: A115342
NPI: 1851602270
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 488 E VALLEY PKWY STE 404 ESCONDIDO, CA 92025-3379
Phone: (760) 466-9800
Fax: (858) 633-4694
After Hours Phone: (760) 466-9800
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

LIU-BARBARO, DOROTHY, MD

Provider Gender: Female
License number: A115342
NPI: 1851602270
Provider English Spoken: Yes

Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 425 N DATE ST ESCONDIDO, CA 92025-3413
Phone: (760) 520-8330
Fax:
After Hours Phone: (760) 520-8330
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish, Serbian
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

LIU-BARBARO, DOROTHY, MD

Provider Gender: Female
License number: A115342
NPI: 1851602270
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 460 N ELM ST ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax: (858) 633-4691
After Hours Phone: (760) 520-8100
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-W 8AM-8PM, TH,F 8AM-5PM, SA 8AM-12PM

LIU-BARBARO, DOROTHY, MD

Provider Gender: Female
License number: A115342
NPI: 1851602270
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 1001 E GRAND AVE ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (858) 633-4695
After Hours Phone: (760) 520-8200
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Hours: M-F 8AM-5PM

LIU-BARBARO, DOROTHY, MD

Provider Gender: Female

License number: A115342

NPI: 1851602270

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

550 W WASHINGTON AVE

ESCONDIDO, CA 92025-1643

Phone: (760) 466-8600

Fax:

After Hours Phone: (760)

466-8600

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Nepali (Individual Language),

Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

LONGACRE, BRETT, NPA

Provider Gender: Male

License number: 95003600

NPI: 1295089332

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

1001 E GRAND AVE

ESCONDIDO, CA 92025-4604

Phone: (760) 520-8200

Fax: (858) 633-4695

After Hours Phone: (760)

520-8200

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Nepali (Individual Language),

Spanish

TDD: No

Min/Max Age: 19/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

LONGACRE, BRETT, NPA

Provider Gender: Male

License number: 95003600

NPI: 1295089332

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

425 N DATE ST

ESCONDIDO, CA 92025-3413

Phone: (760) 520-8330

Fax:

After Hours Phone: (760)

520-8330

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Nepali (Individual Language),

Spanish, Serbian

TDD: Yes

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

MACIAS, ZIRLEY, CSW

Provider Gender: Female

License number: 96997

NPI: 1245616887

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

426 N DATE ST

ESCONDIDO, CA 92025-3409

Phone: (760) 690-5900

Fax:

After Hours Phone: (760)

690-5900

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Nepali (Individual Language),

Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

MACIAS, ZIRLEY, CSW

Provider Gender: Female

License number: 96997

NPI: 1245616887

Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 550 W WASHINGTON AVE
 ESCONDIDO, CA 92025-1643
Phone: (760) 466-8600
Fax:
After Hours Phone: (760)
 466-8600
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
 TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

MACIAS, ZIRLEY, CSW

Provider Gender: Female
License number: 96997
NPI: 1245616887
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 1001 E GRAND AVE
 ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (858) 633-4695
After Hours Phone: (760)
 520-8200
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
 TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

MACIAS, ZIRLEY, CSW

Provider Gender: Female
License number: 96997
NPI: 1245616887
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 728 E VALLEY PKWY
 ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax: (858) 633-4694
After Hours Phone: (760)
 737-6900
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
 TDD: Yes
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

MACIAS, ZIRLEY, CSW

Provider Gender: Female
License number: 96997
NPI: 1245616887
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 425 N DATE ST
 ESCONDIDO, CA 92025-3413
Phone: (760) 520-8330
Fax:
After Hours Phone: (760)
 520-8330
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish, Serbian
 TDD: Yes
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

MACIAS, ZIRLEY, CSW

Provider Gender: Female
License number: 96997
NPI: 1245616887
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 488 E VALLEY PKWY STE 404
 ESCONDIDO, CA 92025-3379

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (760) 466-9800
Fax: (858) 633-4694
After Hours Phone: (760) 466-9800
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

MACIAS, ZIRLEY, CSW

Provider Gender: Female
License number: 96997
NPI: 1245616887
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
460 N ELM ST
ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax: (858) 633-4691
After Hours Phone: (760) 520-8100
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-W 8AM-8PM, TH,F 8AM-5PM, SA 8AM-12PM

MAGOS, DANIEL, CSW

Provider Gender: Male
License number: 88270
NPI: 1578983664
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
488 E VALLEY PKWY STE 404
ESCONDIDO, CA 92025-3379
Phone: (760) 466-9800
Fax: (858) 633-4694
After Hours Phone: (760) 466-9800
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

MAGOS, DANIEL, CSW

Provider Gender: Male
License number: 88270
NPI: 1578983664

Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
426 N DATE ST
ESCONDIDO, CA 92025-3409
Phone: (760) 690-5900
Fax:

After Hours Phone: (760) 690-5900
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

MAGOS, DANIEL, CSW

Provider Gender: Male
License number: 88270
NPI: 1578983664
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
728 E VALLEY PKWY
ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax: (858) 633-4694
After Hours Phone: (760) 737-6900
Website:
www.beaconhealthoptions.com

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J. Directorio de proveedores de salud mental

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

MAGOS, DANIEL, CSW

Provider Gender: Male
License number: 88270
NPI: 1578983664
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
460 N ELM ST
ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax: (858) 633-4691
After Hours Phone: (760) 520-8100
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information

Hours: M-W 8AM-8PM, TH,F 8AM-5PM, SA 8AM-12PM

MAGOS, DANIEL, CSW

Provider Gender: Male
License number: 88270
NPI: 1578983664
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
425 N DATE ST
ESCONDIDO, CA 92025-3413
Phone: (760) 520-8330
Fax:
After Hours Phone: (760) 520-8330
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish, Serbian
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

MAGOS, DANIEL, CSW

Provider Gender: Male
License number: 88270
NPI: 1578983664
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
1001 E GRAND AVE

ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (858) 633-4695
After Hours Phone: (760) 520-8200
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

MAGOS, DANIEL, CSW

Provider Gender: Male
License number: 88270
NPI: 1578983664
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
550 W WASHINGTON AVE
ESCONDIDO, CA 92025-1643
Phone: (760) 466-8600
Fax:
After Hours Phone: (760) 466-8600
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p>	<p><i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> NEIGHBORHOOD HEALTHCARE 550 W WASHINGTON AVE ESCONDIDO, CA 92025-1643 <i>Phone:</i> (760) 466-8600 <i>Fax:</i> <i>After Hours Phone:</i> (760) 466-8600 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-W 8AM-8PM, TH,F 8AM-5PM, SA 8AM-12PM</p>	<p><i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> Yes <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-W 8AM-8PM, TH,F 8AM-5PM, SA 8AM-12PM</p>
<p>MANESS, PAULA J , PSY <i>Provider Gender:</i> Female <i>License number:</i> 23787 <i>NPI:</i> 1437312097 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: MOUNTAIN HEALTH AND COMMUNITY SERVICES INC 255 N ASH ST ESCONDIDO, CA 92027-3068 <i>Phone:</i> (619) 445-6200 <i>Fax:</i> (619) 745-7847 <i>After Hours Phone:</i> (619) 445-6200 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Armenian <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p>	<p>MEJIAS, JUAN C , PSY <i>Provider Gender:</i> Male <i>License number:</i> 26953 <i>NPI:</i> 1558560730 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> NEIGHBORHOOD HEALTHCARE 426 N DATE ST ESCONDIDO, CA 92025-3409 <i>Phone:</i> (760) 690-5900 <i>Fax:</i> <i>After Hours Phone:</i> (760) 690-5900 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions</p>	<p>MEJIAS, JUAN C , PSY <i>Provider Gender:</i> Male <i>License number:</i> 26953 <i>NPI:</i> 1558560730 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> NEIGHBORHOOD HEALTHCARE 460 N ELM ST ESCONDIDO, CA 92025-3002 <i>Phone:</i> (760) 520-8100 <i>Fax:</i> (858) 633-4691 <i>After Hours Phone:</i> (760) 520-8100</p>
<p>MEJIAS, JUAN C , PSY <i>Provider Gender:</i> Male <i>License number:</i> 26953 <i>NPI:</i> 1558560730 <i>Provider English Spoken:</i> Yes</p>	<p>MEJIAS, JUAN C , PSY <i>Provider Gender:</i> Male <i>License number:</i> 26953 <i>NPI:</i> 1558560730 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> NEIGHBORHOOD HEALTHCARE 460 N ELM ST ESCONDIDO, CA 92025-3002 <i>Phone:</i> (760) 520-8100 <i>Fax:</i> (858) 633-4691 <i>After Hours Phone:</i> (760) 520-8100</p>	<p>MEJIAS, JUAN C , PSY <i>Provider Gender:</i> Male <i>License number:</i> 26953 <i>NPI:</i> 1558560730 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> NEIGHBORHOOD HEALTHCARE 426 N DATE ST ESCONDIDO, CA 92025-3409 <i>Phone:</i> (760) 690-5900 <i>Fax:</i> <i>After Hours Phone:</i> (760) 690-5900 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language (ASL): Spanish
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

MEJIAS, JUAN C , PSY

Provider Gender: Male
License number: 26953
NPI: 1558560730
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
425 N DATE ST
ESCONDIDO, CA 92025-3413
Phone: (760) 520-8330
Fax:
After Hours Phone: (760)
520-8330
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish, Serbian
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

MEJIAS, JUAN C , PSY

Provider Gender: Male
License number: 26953
NPI: 1558560730
Provider English Spoken: Yes
Provider Language(s) Spoken:

Spanish
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
728 E VALLEY PKWY
ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax: (858) 633-4694
After Hours Phone: (760)
737-6900
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

MEJIAS, JUAN C , PSY

Provider Gender: Male
License number: 26953
NPI: 1558560730
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
488 E VALLEY PKWY STE 404
ESCONDIDO, CA 92025-3379
Phone: (760) 466-9800
Fax: (858) 633-4694
After Hours Phone: (760)
466-9800
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

MEJIAS, JUAN C , PSY

Provider Gender: Male
License number: 26953
NPI: 1558560730
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
1001 E GRAND AVE
ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (858) 633-4695
After Hours Phone: (760)
520-8200
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accessibility information

Hours: M-F 8AM-5PM

**NAVA-HERBERGER,
ALEJANDRA, NPA**

Provider Gender: Female

License number: 555127

NPI: 1093138422

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

425 N DATE ST

ESCONDIDO, CA 92025-3413

Phone: (760) 520-8330

Fax:

After Hours Phone: (760)

520-8330

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Nepali (Individual Language),

Spanish, Serbian

TDD: Yes

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

OSHRIN, HARVEY, MD

Provider Gender: Male

License number: G7257

NPI: 1952326324

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

425 N DATE ST

ESCONDIDO, CA 92025-3413

Phone: (760) 520-8330

Fax:

After Hours Phone: (760)

520-8330

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Nepali (Individual Language),

Spanish, Serbian

TDD: Yes

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

PEDERSEN, SUESAN, MD

Provider Gender: Female

License number: A138369

NPI: 1558603837

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

728 E VALLEY PKWY

ESCONDIDO, CA 92025-3052

Phone: (760) 737-6900

Fax: (858) 633-4694

After Hours Phone: (760)

737-6900

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Nepali (Individual Language),

Spanish

TDD: Yes

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

PEDERSEN, SUESAN, MD

Provider Gender: Female

License number: A138369

NPI: 1558603837

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

425 N DATE ST

ESCONDIDO, CA 92025-3413

Phone: (760) 520-8330

Fax:

After Hours Phone: (760)

520-8330

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Nepali (Individual Language),

Spanish, Serbian

TDD: Yes

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

PEDERSEN, SUESAN, MD

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: A138369
NPI: 1558603837
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
550 W WASHINGTON AVE
ESCONDIDO, CA 92025-1643
Phone: (760) 466-8600
Fax:
After Hours Phone: (760)
466-8600
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

PEDERSEN, SUESAN, MD

Provider Gender: Female
License number: A138369
NPI: 1558603837
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
1001 E GRAND AVE
ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (858) 633-4695
After Hours Phone: (760)
520-8200

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

PEDERSEN, SUESAN, MD

Provider Gender: Female
License number: A138369
NPI: 1558603837
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
488 E VALLEY PKWY STE 404
ESCONDIDO, CA 92025-3379
Phone: (760) 466-9800
Fax: (858) 633-4694
After Hours Phone: (760)
466-9800
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No

Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

PEDERSEN, SUESAN, MD

Provider Gender: Female
License number: A138369
NPI: 1558603837
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
426 N DATE ST
ESCONDIDO, CA 92025-3409
Phone: (760) 690-5900
Fax:

After Hours Phone: (760)
690-5900
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

PEDERSEN, SUESAN, MD

Provider Gender: Female
License number: A138369
NPI: 1558603837
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

460 N ELM ST
ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax: (858) 633-4691
After Hours Phone: (760)
520-8100
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-W 8AM-8PM, TH,F
8AM-5PM, SA 8AM-12PM

POPOCA LOGUE, ANA J , NPA
Provider Gender: Female
License number: 12900
NPI: 1437262219
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
425 N DATE ST
ESCONDIDO, CA 92025-3413
Phone: (760) 520-8330
Fax:
After Hours Phone: (760)
520-8330
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,

Nepali (Individual Language),
Spanish, Serbian
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

**POSTLETHWAITE,
ALEJANDRA, MD**
Provider Gender: Female
License number: A88938
NPI: 1750566915
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
728 E VALLEY PKWY
ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax: (858) 633-4694
After Hours Phone: (760)
737-6900
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

**POSTLETHWAITE,
ALEJANDRA, MD**
Provider Gender: Female
License number: A88938
NPI: 1750566915
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
425 N DATE ST
ESCONDIDO, CA 92025-3413
Phone: (760) 520-8330
Fax:
After Hours Phone: (760)
520-8330
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish, Serbian
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

**POSTLETHWAITE,
ALEJANDRA, MD**
Provider Gender: Female
License number: A88938
NPI: 1750566915
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NEIGHBORHOOD

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

HEALTHCARE
550 W WASHINGTON AVE
ESCONDIDO, CA 92025-1643
Phone: (760) 466-8600
Fax:
After Hours Phone: (760)
466-8600
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

**POSTLETHWAITE,
ALEJANDRA, MD**
Provider Gender: Female
License number: A88938
NPI: 1750566915
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
488 E VALLEY PKWY STE 404
ESCONDIDO, CA 92025-3379
Phone: (760) 466-9800
Fax: (858) 633-4694
After Hours Phone: (760)
466-9800
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

**POSTLETHWAITE,
ALEJANDRA, MD**
Provider Gender: Female
License number: A88938
NPI: 1750566915
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
426 N DATE ST
ESCONDIDO, CA 92025-3409
Phone: (760) 690-5900
Fax:
After Hours Phone: (760)
690-5900
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM
**POSTLETHWAITE,
ALEJANDRA, MD**
Provider Gender: Female
License number: A88938
NPI: 1750566915
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
1001 E GRAND AVE
ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (858) 633-4695
After Hours Phone: (760)
520-8200
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM
**POSTLETHWAITE,
ALEJANDRA, MD**
Provider Gender: Female
License number: A88938
NPI: 1750566915
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

NEIGHBORHOOD
HEALTHCARE
460 N ELM ST
ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax: (858) 633-4691
After Hours Phone: (760)
520-8100
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-W 8AM-8PM, TH,F
8AM-5PM, SA 8AM-12PM

RATNIEWSKI, JANET, PSY
Provider Gender: Female
License number: PSY26406
NPI: 1245649599
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
INTEGRATED HEALTH
PARTNERS- BORREGO
COMMUNITY HEALTH
FOUNDAT
1121 E WASHINGTON AVE
ESCONDIDO, CA 92025-2214
Phone: (760) 871-0606
Fax: (858) 634-6918
After Hours Phone: (760)
871-0606

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Kiswahili, Swahili
(Individual Language)
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

RINGEL, BRENDA L , MD
Provider Gender: Female
License number: A65800
NPI: 1689869976
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
EXODUS RECOVERY, INC.
1520 S ESCONDIDO BLVD
ESCONDIDO, CA 92025-6017
Phone: (760) 870-2020
Fax: (760) 489-1321
After Hours Phone: (760)
870-2020
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-4:30PM

RODARTE, GABRIEL, MD
Provider Gender: Male
License number: A87906
NPI: 1184649212
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
728 E VALLEY PKWY
ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax: (858) 633-4694
After Hours Phone: (760)
737-6900
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

RODARTE, GABRIEL, MD
Provider Gender: Male
License number: A87906
NPI: 1184649212
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
426 N DATE ST
ESCONDIDO, CA 92025-3409

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (760) 690-5900

Fax:

After Hours Phone: (760)
690-5900

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

RODARTE, GABRIEL, MD

Provider Gender: Male

License number: A87906

NPI: 1184649212

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

425 N DATE ST

ESCONDIDO, CA 92025-3413

Phone: (760) 520-8330

Fax:

After Hours Phone: (760)

520-8330

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish, Serbian

TDD: Yes

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

RODARTE, GABRIEL, MD

Provider Gender: Male

License number: A87906

NPI: 1184649212

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

488 E VALLEY PKWY STE 404

ESCONDIDO, CA 92025-3379

Phone: (760) 466-9800

Fax: (858) 633-4694

After Hours Phone: (760)

466-9800

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,
Nepali (Individual Language),

Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

RODARTE, GABRIEL, MD

Provider Gender: Male

License number: A87906

NPI: 1184649212

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

550 W WASHINGTON AVE

ESCONDIDO, CA 92025-1643

Phone: (760) 466-8600

Fax:

After Hours Phone: (760)

466-8600

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,
Nepali (Individual Language),

Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

RODARTE, GABRIEL, MD

Provider Gender: Male

License number: A87906

NPI: 1184649212

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

460 N ELM ST

ESCONDIDO, CA 92025-3002

Phone: (760) 520-8100

Fax: (858) 633-4691

After Hours Phone: (760)

520-8100

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-W 8AM-8PM, TH,F 8AM-5PM, SA 8AM-12PM

RODARTE, GABRIEL, MD
Provider Gender: Male
License number: A87906
NPI: 1184649212
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 1001 E GRAND AVE
 ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (858) 633-4695
After Hours Phone: (760) 520-8200
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information

Hours: M-F 8AM-5PM
ROSS, ANNE T , NPA
Provider Gender: Female
License number: 53359
NPI: 1447334883
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 1001 E GRAND AVE
 ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (858) 633-4695
After Hours Phone: (760) 520-8200
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

ROSS, ANNE T , NPA
Provider Gender: Female
License number: 53359
NPI: 1447334883
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 460 N ELM ST
 ESCONDIDO, CA 92025-3002

Phone: (760) 520-8100
Fax: (858) 633-4691
After Hours Phone: (760) 520-8100
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-W 8AM-8PM, TH,F 8AM-5PM, SA 8AM-12PM

ROSS, ANNE T , NPA
Provider Gender: Female
License number: 53359
NPI: 1447334883
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 550 W WASHINGTON AVE
 ESCONDIDO, CA 92025-1643
Phone: (760) 466-8600
Fax:
After Hours Phone: (760) 466-8600
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

ROSS, ANNE T , NPA

Provider Gender: Female
License number: 53359
NPI: 1447334883
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 426 N DATE ST
 ESCONDIDO, CA 92025-3409
Phone: (760) 690-5900
Fax:
After Hours Phone: (760) 690-5900
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

ROSS, ANNE T , NPA

Provider Gender: Female
License number: 53359
NPI: 1447334883

Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 728 E VALLEY PKWY
 ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax: (858) 633-4694
After Hours Phone: (760) 737-6900
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

ROSS, ANNE T , NPA

Provider Gender: Female
License number: 53359
NPI: 1447334883
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 425 N DATE ST
 ESCONDIDO, CA 92025-3413
Phone: (760) 520-8330
Fax:
After Hours Phone: (760) 520-8330
Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish, Serbian
TDD: Yes

Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

ROSS, ANNE T , NPA

Provider Gender: Female
License number: 53359
NPI: 1447334883
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 488 E VALLEY PKWY STE 404
 ESCONDIDO, CA 92025-3379
Phone: (760) 466-9800
Fax: (858) 633-4694
After Hours Phone: (760) 466-9800
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Hours: M-F 8AM-5PM

SINGH, PARDEEP, NPA

Provider Gender: Female
 License number: 95010750
 NPI: 1992279004
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 460 N ELM ST
 ESCONDIDO, CA 92025-3002
 Phone: (760) 520-8100
 Fax: (858) 633-4691
 After Hours Phone: (760)
 520-8100
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
 TDD: Yes
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-W 8AM-8PM, TH,F
 8AM-5PM, SA 8AM-12PM

SINGH, PARDEEP, NPA

Provider Gender: Female
 License number: 95010750
 NPI: 1992279004
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 425 N DATE ST

ESCONDIDO, CA 92025-3413
 Phone: (760) 520-8330
 Fax:
 After Hours Phone: (760)
 520-8330
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish, Serbian
 TDD: Yes
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

SINGH, PARDEEP, NPA

Provider Gender: Female
 License number: 95010750
 NPI: 1992279004
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 488 E VALLEY PKWY STE 404
 ESCONDIDO, CA 92025-3379
 Phone: (760) 466-9800
 Fax: (858) 633-4694
 After Hours Phone: (760)
 466-9800
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
 TDD: No

Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

SINGH, PARDEEP, NPA

Provider Gender: Female
 License number: 95010750
 NPI: 1992279004
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 426 N DATE ST
 ESCONDIDO, CA 92025-3409
 Phone: (760) 690-5900
 Fax:
 After Hours Phone: (760)
 690-5900
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

SINGH, PARDEEP, NPA

Provider Gender: Female
 License number: 95010750
 NPI: 1992279004

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 728 E VALLEY PKWY
 ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax: (858) 633-4694
After Hours Phone: (760)
 737-6900
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

SINGH, PARDEEP, NPA
Provider Gender: Female
License number: 95010750
NPI: 1992279004
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 550 W WASHINGTON AVE
 ESCONDIDO, CA 92025-1643
Phone: (760) 466-8600
Fax:
After Hours Phone: (760)
 466-8600
Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

SINGH, PARDEEP, NPA
Provider Gender: Female
License number: 95010750
NPI: 1992279004
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 1001 E GRAND AVE
 ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (858) 633-4695
After Hours Phone: (760)
 520-8200
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information

Hours: M-F 8AM-5PM
STANIGAR, JUDITH, CSW
Provider Gender: Female
License number: 25701
NPI: 1255501870
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Hebrew
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 1002 E GRAND AVE
 ESCONDIDO, CA 92025-4605
Phone: (760) 741-2660
Fax: (760) 741-2647
After Hours Phone: (760)
 741-2660
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Hebrew
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

STONE, CALVIN, MD
Provider Gender: Male
License number: 20A18127
NPI: 1275995870
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 426 N DATE ST
 ESCONDIDO, CA 92025-3409

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (760) 690-5900

Fax:

After Hours Phone: (760)
690-5900

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

STONE, CALVIN, MD

Provider Gender: Male

License number: 20A18127

NPI: 1275995870

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

550 W WASHINGTON AVE

ESCONDIDO, CA 92025-1643

Phone: (760) 466-8600

Fax:

After Hours Phone: (760)

466-8600

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

STONE, CALVIN, MD

Provider Gender: Male

License number: 20A18127

NPI: 1275995870

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

460 N ELM ST

ESCONDIDO, CA 92025-3002

Phone: (760) 520-8100

Fax: (858) 633-4691

After Hours Phone: (760)

520-8100

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish

TDD: Yes

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for

Accessibility information

Hours: M-W 8AM-8PM, TH,F
8AM-5PM, SA 8AM-12PM

STONE, CALVIN, MD

Provider Gender: Male

License number: 20A18127

NPI: 1275995870

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

488 E VALLEY PKWY STE 404

ESCONDIDO, CA 92025-3379

Phone: (760) 466-9800

Fax: (858) 633-4694

After Hours Phone: (760)

466-9800

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

STONE, CALVIN, MD

Provider Gender: Male

License number: 20A18127

NPI: 1275995870

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

425 N DATE ST

ESCONDIDO, CA 92025-3413

Phone: (760) 520-8330

Fax:

After Hours Phone: (760)

520-8330

Website:

www.beaconhealthoptions.com

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish, Serbian
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

STONE, CALVIN, MD
Provider Gender: Male
License number: 20A18127
NPI: 1275995870
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 728 E VALLEY PKWY
 ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax: (858) 633-4694
After Hours Phone: (760) 737-6900
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information

Hours: M-F 8AM-5PM
STONE, CALVIN, MD
Provider Gender: Male
License number: 20A18127
NPI: 1275995870
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 1001 E GRAND AVE
 ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (858) 633-4695
After Hours Phone: (760) 520-8200
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

SUOZZO, JOSEPH J , PSY
Provider Gender: Male
License number: 18393
NPI: 1821013228
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 1001 E GRAND AVE
 ESCONDIDO, CA 92025-4604

Phone: (760) 520-8200
Fax: (858) 633-4695
After Hours Phone: (760) 520-8200
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

SUOZZO, JOSEPH J , PSY
Provider Gender: Male
License number: 18393
NPI: 1821013228
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 425 N DATE ST
 ESCONDIDO, CA 92025-3413
Phone: (760) 520-8330
Fax:
After Hours Phone: (760) 520-8330
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish, Serbian
TDD: Yes
Min/Max Age:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

SUOZZO, JOSEPH J , PSY

Provider Gender: Male
License number: 18393
NPI: 1821013228
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 550 W WASHINGTON AVE
 ESCONDIDO, CA 92025-1643
Phone: (760) 466-8600
Fax:
After Hours Phone: (760) 466-8600
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

SUOZZO, JOSEPH J , PSY

Provider Gender: Male
License number: 18393
NPI: 1821013228
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: NEIGHBORHOOD HEALTHCARE
 460 N ELM ST
 ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax: (858) 633-4691
After Hours Phone: (760) 520-8100
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-W 8AM-8PM, TH,F 8AM-5PM, SA 8AM-12PM

SUOZZO, JOSEPH J , PSY

Provider Gender: Male
License number: 18393
NPI: 1821013228
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 728 E VALLEY PKWY
 ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax: (858) 633-4694
After Hours Phone: (760) 737-6900
Website: www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

SUOZZO, JOSEPH J , PSY

Provider Gender: Male
License number: 18393
NPI: 1821013228
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 426 N DATE ST
 ESCONDIDO, CA 92025-3409
Phone: (760) 690-5900
Fax:
After Hours Phone: (760) 690-5900
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Hours: M-F 8AM-5PM

TASIC, KATARINA, MD

Provider Gender: Female

License number: A67158

NPI: 1528185949

Provider English Spoken: Yes

Provider Language(s) Spoken:

Serbian

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

425 N DATE ST

ESCONDIDO, CA 92025-3413

Phone: (760) 520-8330

Fax:

After Hours Phone: (760)

520-8330

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Nepali (Individual Language),

Spanish, Serbian

TDD: Yes

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

TEETER-WITT, ALYSSA, PSY

Provider Gender: U

License number: 31075

NPI: 1932308442

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

728 E VALLEY PKWY

ESCONDIDO, CA 92025-3052

Phone: (760) 737-6900

Fax: (858) 633-4694

After Hours Phone: (760)

737-6900

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Nepali (Individual Language),

Spanish

TDD: Yes

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

TEETER-WITT, ALYSSA, PSY

Provider Gender: U

License number: 31075

NPI: 1932308442

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

550 W WASHINGTON AVE

ESCONDIDO, CA 92025-1643

Phone: (760) 466-8600

Fax:

After Hours Phone: (760)

466-8600

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Nepali (Individual Language),

Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

TEETER-WITT, ALYSSA, PSY

Provider Gender: U

License number: 31075

NPI: 1932308442

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

426 N DATE ST

ESCONDIDO, CA 92025-3409

Phone: (760) 690-5900

Fax:

After Hours Phone: (760)

690-5900

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Nepali (Individual Language),

Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

TEETER-WITT, ALYSSA, PSY

Provider Gender: U

License number: 31075

NPI: 1932308442

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 488 E VALLEY PKWY STE 404
 ESCONDIDO, CA 92025-3379
Phone: (760) 466-9800
Fax: (858) 633-4694
After Hours Phone: (760)
 466-9800
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

TEETER-WITT, ALYSSA, PSY

Provider Gender: U
License number: 31075
NPI: 1932308442
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 460 N ELM ST
 ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax: (858) 633-4691
After Hours Phone: (760)
 520-8100
Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-W 8AM-8PM, TH,F
 8AM-5PM, SA 8AM-12PM

TEETER-WITT, ALYSSA, PSY

Provider Gender: U
License number: 31075
NPI: 1932308442
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 425 N DATE ST
 ESCONDIDO, CA 92025-3413
Phone: (760) 520-8330
Fax:

After Hours Phone: (760)
 520-8330
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish, Serbian
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for

Accessibility information
Hours: M-F 8AM-5PM

THOMAS, PAULA M , CSW

Provider Gender: Female
License number: 29517
NPI: 1821389966
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 426 N DATE ST
 ESCONDIDO, CA 92025-3409
Phone: (760) 690-5900
Fax:

After Hours Phone: (760)
 690-5900
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

THOMAS, PAULA M , CSW

Provider Gender: Female
License number: 29517
NPI: 1821389966
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 728 E VALLEY PKWY

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

ESCONDIDO, CA 92025-3052
 Phone: (760) 737-6900
 Fax: (858) 633-4694
 After Hours Phone: (760) 737-6900

Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes

Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish

TDD: Yes

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

THOMAS, PAULA M , CSW

Provider Gender: Female

License number: 29517

NPI: 1821389966

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

425 N DATE ST

ESCONDIDO, CA 92025-3413

Phone: (760) 520-8330

Fax:

After Hours Phone: (760)

520-8330

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Nepali (Individual Language),

Spanish, Serbian

TDD: Yes

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

THOMAS, PAULA M , CSW

Provider Gender: Female

License number: 29517

NPI: 1821389966

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

1001 E GRAND AVE

ESCONDIDO, CA 92025-4604

Phone: (760) 520-8200

Fax: (858) 633-4695

After Hours Phone: (760)

520-8200

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Nepali (Individual Language),

Spanish

TDD: No

Min/Max Age: 19/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

THOMAS, PAULA M , CSW

Provider Gender: Female

License number: 29517

NPI: 1821389966

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

460 N ELM ST

ESCONDIDO, CA 92025-3002

Phone: (760) 520-8100

Fax: (858) 633-4691

After Hours Phone: (760)

520-8100

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Nepali (Individual Language),

Spanish

TDD: Yes

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-W 8AM-8PM, TH,F

8AM-5PM, SA 8AM-12PM

THOMAS, PAULA M , CSW

Provider Gender: Female

License number: 29517

NPI: 1821389966

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

550 W WASHINGTON AVE

ESCONDIDO, CA 92025-1643

Phone: (760) 466-8600

Fax:

After Hours Phone: (760)

466-8600

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p> <p>THOMPSON, STEPHANIE G , CSW <i>Provider Gender:</i> Female <i>License number:</i> 75185 <i>NPI:</i> 1861938227 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> NEIGHBORHOOD HEALTHCARE 488 E VALLEY PKWY STE 404 ESCONDIDO, CA 92025-3379 <i>Phone:</i> (760) 466-9800 <i>Fax:</i> (858) 633-4694 <i>After Hours Phone:</i> (760) 466-9800 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p> <p>THOMPSON, STEPHANIE G , CSW <i>Provider Gender:</i> Female <i>License number:</i> 75185 <i>NPI:</i> 1861938227 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> NEIGHBORHOOD HEALTHCARE 728 E VALLEY PKWY ESCONDIDO, CA 92025-3052 <i>Phone:</i> (760) 737-6900 <i>Fax:</i> (858) 633-4694 <i>After Hours Phone:</i> (760) 737-6900 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> Yes <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i></p>	<p>No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p> <p>THOMPSON, STEPHANIE G , CSW <i>Provider Gender:</i> Female <i>License number:</i> 75185 <i>NPI:</i> 1861938227 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> NEIGHBORHOOD HEALTHCARE 488 E VALLEY PKWY STE 404 ESCONDIDO, CA 92025-3379 <i>Phone:</i> (760) 466-9800 <i>Fax:</i> (858) 633-4694 <i>After Hours Phone:</i> (760) 466-9800 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p> <p>THOMPSON, STEPHANIE G , CSW <i>Provider Gender:</i> Female <i>License number:</i> 75185 <i>NPI:</i> 1861938227 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> NEIGHBORHOOD HEALTHCARE 1001 E GRAND AVE ESCONDIDO, CA 92025-4604 <i>Phone:</i> (760) 520-8200 <i>Fax:</i> (858) 633-4695 <i>After Hours Phone:</i> (760) 520-8200 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes</p>	<p><i>Cultural Competency:</i> NEIGHBORHOOD HEALTHCARE 550 W WASHINGTON AVE ESCONDIDO, CA 92025-1643 <i>Phone:</i> (760) 466-8600 <i>Fax:</i> <i>After Hours Phone:</i> (760) 466-8600 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p> <p>THOMPSON, STEPHANIE G , CSW <i>Provider Gender:</i> Female <i>License number:</i> 75185 <i>NPI:</i> 1861938227 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> NEIGHBORHOOD HEALTHCARE 1001 E GRAND AVE ESCONDIDO, CA 92025-4604 <i>Phone:</i> (760) 520-8200 <i>Fax:</i> (858) 633-4695 <i>After Hours Phone:</i> (760) 520-8200 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes</p>
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J. Directorio de proveedores de salud mental

Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

THOMPSON, STEPHANIE G , CSW

Provider Gender: Female
License number: 75185
NPI: 1861938227
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 426 N DATE ST
 ESCONDIDO, CA 92025-3409
Phone: (760) 690-5900
Fax:
After Hours Phone: (760) 690-5900
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information

Hours: M-F 8AM-5PM
THOMPSON, STEPHANIE G , CSW
Provider Gender: Female
License number: 75185
NPI: 1861938227
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 460 N ELM ST
 ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax: (858) 633-4691
After Hours Phone: (760) 520-8100
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-W 8AM-8PM, TH,F 8AM-5PM, SA 8AM-12PM

THOMPSON, STEPHANIE G , CSW
Provider Gender: Female
License number: 75185
NPI: 1861938227
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 460 N ELM ST
 ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax: (858) 633-4691
After Hours Phone: (760) 520-8100
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-W 8AM-8PM, TH,F 8AM-5PM, SA 8AM-12PM

THOMPSON, STEPHANIE G , CSW
Provider Gender: Female
License number: 75185
NPI: 1861938227
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 460 N ELM ST
 ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax: (858) 633-4691
After Hours Phone: (760) 520-8100
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

HEALTHCARE
 425 N DATE ST
 ESCONDIDO, CA 92025-3413
Phone: (760) 520-8330
Fax:
After Hours Phone: (760) 520-8330
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish, Serbian
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

VALLEZ BARLAM, ANDREA, PSY

Provider Gender: Female
License number: PSY9962
NPI: 1710902143
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NEIGHBORHOOD HEALTHCARE
 460 N ELM ST
 ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax: (858) 633-4691
After Hours Phone: (760) 520-8100
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

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J. Directorio de proveedores de salud mental

Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish

TDD: Yes

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: M-W 8AM-8PM, TH,F 8AM-5PM, SA 8AM-12PM

VALLEZ BARLAM, ANDREA, PSY

Provider Gender: Female

License number: PSY9962

NPI: 1710902143

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

426 N DATE ST

ESCONDIDO, CA 92025-3409

Phone: (760) 690-5900

Fax:

After Hours Phone: (760) 690-5900

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

VALLEZ BARLAM, ANDREA, PSY

Provider Gender: Female

License number: PSY9962

NPI: 1710902143

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

728 E VALLEY PKWY

ESCONDIDO, CA 92025-3052

Phone: (760) 737-6900

Fax: (858) 633-4694

After Hours Phone: (760)

737-6900

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish

TDD: Yes

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

VALLEZ BARLAM, ANDREA, PSY

Provider Gender: Female

License number: PSY9962

NPI: 1710902143

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

425 N DATE ST

ESCONDIDO, CA 92025-3413

Phone: (760) 520-8330

Fax:

After Hours Phone: (760)

520-8330

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish, Serbian

TDD: Yes

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

VALLEZ BARLAM, ANDREA, PSY

Provider Gender: Female

License number: PSY9962

NPI: 1710902143

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

488 E VALLEY PKWY STE 404

ESCONDIDO, CA 92025-3379

Phone: (760) 466-9800

Fax: (858) 633-4694

After Hours Phone: (760)

466-9800

Website:

www.beaconhealthoptions.com

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

VALLEZ BARLAM, ANDREA, PSY

Provider Gender: Female
License number: PSY9962
NPI: 1710902143
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NEIGHBORHOOD HEALTHCARE
 550 W WASHINGTON AVE
 ESCONDIDO, CA 92025-1643
Phone: (760) 466-8600
Fax:
After Hours Phone: (760) 466-8600
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No

Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

VALLEZ BARLAM, ANDREA, PSY

Provider Gender: Female
License number: PSY9962
NPI: 1710902143
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NEIGHBORHOOD HEALTHCARE
 1001 E GRAND AVE
 ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (858) 633-4695
After Hours Phone: (760) 520-8200
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

VAQUERO, JUANA, PSY

Provider Gender: Female
License number: PSY28364
NPI: 1023459708
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:

NEIGHBORHOOD HEALTHCARE
 550 W WASHINGTON AVE
 ESCONDIDO, CA 92025-1643
Phone: (760) 466-8600

Fax:
After Hours Phone: (760) 466-8600
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

VAQUERO, JUANA, PSY

Provider Gender: Female
License number: PSY28364
NPI: 1023459708
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NEIGHBORHOOD HEALTHCARE
 425 N DATE ST
 ESCONDIDO, CA 92025-3413
Phone: (760) 520-8330
Fax:
After Hours Phone: (760) 520-8330
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Nepali (Individual Language),
Spanish, Serbian
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

VAQUERO, JUANA, PSY

Provider Gender: Female
License number: PSY28364
NPI: 1023459708
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
1001 E GRAND AVE
ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (858) 633-4695
After Hours Phone: (760)
520-8200
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

VAQUERO, JUANA, PSY

Provider Gender: Female
License number: PSY28364
NPI: 1023459708
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
426 N DATE ST
ESCONDIDO, CA 92025-3409
Phone: (760) 690-5900
Fax:
After Hours Phone: (760)
690-5900
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

VAQUERO, JUANA, PSY

Provider Gender: Female
License number: PSY28364
NPI: 1023459708
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
728 E VALLEY PKWY
ESCONDIDO, CA 92025-3052

Phone: (760) 737-6900
Fax: (858) 633-4694
After Hours Phone: (760)
737-6900
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

VAQUERO, JUANA, PSY

Provider Gender: Female
License number: PSY28364
NPI: 1023459708
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
460 N ELM ST
ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax: (858) 633-4691
After Hours Phone: (760)
520-8100
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: Yes
Min/Max Age:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-W 8AM-8PM, TH,F 8AM-5PM, SA 8AM-12PM

VAQUERO, JUANA, PSY

Provider Gender: Female
License number: PSY28364
NPI: 1023459708
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
488 E VALLEY PKWY STE 404 ESCONDIDO, CA 92025-3379
Phone: (760) 466-9800
Fax: (858) 633-4694
After Hours Phone: (760) 466-9800
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

WILLIAMS, SHANTRICE M , NPA

Provider Gender: Female
License number: 19664

NPI: 1578865549
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NEIGHBORHOOD HEALTHCARE
1001 E GRAND AVE ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (858) 633-4695
After Hours Phone: (760) 520-8200
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

WILLIAMS, SHANTRICE M , NPA

Provider Gender: Female
License number: 19664
NPI: 1578865549
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NEIGHBORHOOD HEALTHCARE
728 E VALLEY PKWY ESCONDIDO, CA 92025-3052

Phone: (760) 737-6900
Fax: (858) 633-4694
After Hours Phone: (760) 737-6900
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

WILLIAMS, SHANTRICE M , NPA

Provider Gender: Female
License number: 19664
NPI: 1578865549
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NEIGHBORHOOD HEALTHCARE
460 N ELM ST ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax: (858) 633-4691
After Hours Phone: (760) 520-8100
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: Yes

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: M-W 8AM-8PM, TH,F 8AM-5PM, SA 8AM-12PM

WILLIAMS, SHANTRICE M , NPA

Provider Gender: Female

License number: 19664

NPI: 1578865549

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

488 E VALLEY PKWY STE 404 ESCONDIDO, CA 92025-3379

Phone: (760) 466-9800

Fax: (858) 633-4694

After Hours Phone: (760)

466-9800

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

WILLIAMS, SHANTRICE M , NPA

Provider Gender: Female

License number: 19664

NPI: 1578865549

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

426 N DATE ST

ESCONDIDO, CA 92025-3409

Phone: (760) 690-5900

Fax:

After Hours Phone: (760)

690-5900

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

WILLIAMS, SHANTRICE M , NPA

Provider Gender: Female

License number: 19664

NPI: 1578865549

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

550 W WASHINGTON AVE ESCONDIDO, CA 92025-1643

Phone: (760) 466-8600

Fax:

After Hours Phone: (760)

466-8600

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

WILLIAMS, SHANTRICE M , NPA

Provider Gender: Female

License number: 19664

NPI: 1578865549

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

425 N DATE ST

ESCONDIDO, CA 92025-3413

Phone: (760) 520-8330

Fax:

After Hours Phone: (760)

520-8330

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish, Serbian
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

WINTER, JEFFERY C , PSY

Provider Gender: Male
License number: 6795
NPI: 1396904850
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 MOUNTAIN HEALTH AND COMMUNITY SERVICES INC
 255 N ASH ST
 ESCONDIDO, CA 92027-3068
Phone: (619) 445-6200
Fax: (619) 745-7847
After Hours Phone: (619) 445-6200
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Armenian
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

WOODWORTH, JENNIFER,

PSY
Provider Gender: Female
License number: 26963
NPI: 1639362494
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD HEALTHCARE
 460 N ELM ST
 ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax: (858) 633-4691
After Hours Phone: (760) 520-8100
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-W 8AM-8PM, TH,F 8AM-5PM, SA 8AM-12PM

WOODWORTH, JENNIFER, PSY

Provider Gender: Female
License number: 26963
NPI: 1639362494
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD HEALTHCARE
 550 W WASHINGTON AVE
 ESCONDIDO, CA 92025-1643

Phone: (760) 466-8600
Fax:
After Hours Phone: (760) 466-8600
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

WOODWORTH, JENNIFER, PSY

Provider Gender: Female
License number: 26963
NPI: 1639362494
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD HEALTHCARE
 425 N DATE ST
 ESCONDIDO, CA 92025-3413
Phone: (760) 520-8330
Fax:
After Hours Phone: (760) 520-8330
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish, Serbian
TDD: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

WOODWORTH, JENNIFER, PSY

Provider Gender: Female
License number: 26963
NPI: 1639362494
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 728 E VALLEY PKWY
 ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax: (858) 633-4694
After Hours Phone: (760) 737-6900
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes

Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

WOODWORTH, JENNIFER, PSY

Provider Gender: Female

License number: 26963
NPI: 1639362494
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 488 E VALLEY PKWY STE 404
 ESCONDIDO, CA 92025-3379
Phone: (760) 466-9800
Fax: (858) 633-4694
After Hours Phone: (760) 466-9800
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No

Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

WOODWORTH, JENNIFER, PSY

Provider Gender: Female
License number: 26963
NPI: 1639362494
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 426 N DATE ST
 ESCONDIDO, CA 92025-3409

Phone: (760) 690-5900
Fax:
After Hours Phone: (760) 690-5900
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

FALLBROOK

GUZMAN, MARIANA, MFT

Provider Gender: Female
License number: 80015
NPI: 1093025546
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: GUZMAN, MARIANA
 577 E ELDER ST STE B
 FALLBROOK, CA 92028-3079
Phone: (760) 542-8002
Fax:
After Hours Phone: (760) 542-8002
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
TDD: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Min/Max Age: 19/64
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: SA 8:30AM-1:30PM

GUZMAN, MARIANA, MFT

Provider Gender: Female
License number: 80015
NPI: 1093025546
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: GUZMAN, MARIANA
 577 E ELDER ST
 FALLBROOK, CA 92028-3079
Phone: (760) 542-8002
Fax: (888) 292-0251
After Hours Phone: (760) 542-8002
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
TDD: No

Min/Max Age: 19/64
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: W 8AM-5PM

IMPERIAL BEACH

BARTHOLOMEW, SARAH C , CSW

Provider Gender: Female

License number: 86542
NPI: 1720339708
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 742 10TH ST
 IMPERIAL BEACH, CA 91932-2216
Phone: (619) 906-5322
Fax: (619) 271-4963
After Hours Phone: (619) 906-5322
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
TDD: No

Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours:

DIAZ, LIZETH, CSW

Provider Gender: Female
License number: 97277
NPI: 1124457023
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 742 10TH ST
 IMPERIAL BEACH, CA 91932-2216

Phone: (619) 906-5322
Fax: (619) 271-4963
After Hours Phone: (619) 906-5322
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours:

DUNFORD, KATELYN C , MFT

Provider Gender: Female
License number: 126626
NPI: 1437517497
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 742 10TH ST
 IMPERIAL BEACH, CA 91932-2216
Phone: (619) 906-5322
Fax: (619) 271-4963
After Hours Phone: (619) 906-5322
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours:

FEDEROFF, MONICA, MD

Provider Gender: Female

License number: A164677

NPI: 1912404492

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

742 10TH ST

IMPERIAL BEACH, CA

91932-2216

Phone: (619) 906-5322

Fax: (619) 271-4963

After Hours Phone: (619)

906-5322

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

TDD: No

Min/Max Age: 19/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours:

GAUD, KRISTINA G , MD

Provider Gender: Female

License number: 170667

NPI: 1508151598

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

742 10TH ST

IMPERIAL BEACH, CA

91932-2216

Phone: (619) 906-5322

Fax: (619) 271-4963

After Hours Phone: (619)

906-5322

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

TDD: No

Min/Max Age: 19/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours:

GLASSMAN, JAGA NATH, MD

Provider Gender: Male

License number: G55004

NPI: 1558409771

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

742 10TH ST

IMPERIAL BEACH, CA

91932-2216

Phone: (619) 906-5322

Fax: (619) 271-4963

After Hours Phone: (619)

906-5322

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:
Spanish

TDD: No

Min/Max Age: 19/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours:

GONZALEZ, ANDREA, CSW

Provider Gender: Female

License number: 97593

NPI: 1326346198

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

742 10TH ST

IMPERIAL BEACH, CA

91932-2216

Phone: (619) 906-5322

Fax: (619) 271-4963

After Hours Phone: (619)

906-5322

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

TDD: No

Min/Max Age: 19/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours:

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J. Directorio de proveedores de salud mental

GONZALEZ, CLAUDIA, CSW

Provider Gender: Female
License number: 100328
NPI: 1770055543
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 IMPERIAL BEACH HEALTH CENTER
 949 PALM AVE
 IMPERIAL BEACH, CA
 91932-1503
Phone: (619) 429-3733
Fax: (619) 575-7972
After Hours Phone: (619) 429-3733
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-TH 8AM-8PM, F 8AM-5PM, SA 8AM-12PM

LIDSTONE, PAVEN, MD

Provider Gender: Female
License number: 161149
NPI: 1942662093
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 742 10TH ST

IMPERIAL BEACH, CA
 91932-2216
Phone: (619) 906-5322
Fax: (619) 271-4963
After Hours Phone: (619) 906-5322
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours:

LYDIARD, JESSICA, MD

Provider Gender: Female
License number: A171775
NPI: 1841731296
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 742 10TH ST
 IMPERIAL BEACH, CA
 91932-2216
Phone: (619) 906-5322
Fax: (619) 271-4963
After Hours Phone: (619) 906-5322
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish
TDD: No

Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours:

MCADAMS, HILDA, NPA

Provider Gender: Female
License number: 14201
NPI: 1396838082
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 742 10TH ST
 IMPERIAL BEACH, CA
 91932-2216
Phone: (619) 906-5322
Fax: (619) 271-4963
After Hours Phone: (619) 906-5322
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours:

NGUYEN, MAILY, NPA

Provider Gender: Female
License number: 95000861

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J. Directorio de proveedores de salud mental

NPI: 1255732160
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
IMPERIAL BEACH HEALTH
CENTER
949 PALM AVE
IMPERIAL BEACH, CA
91932-1503
Phone: (619) 429-3733
Fax: (619) 575-7972
After Hours Phone: (619)
429-3733
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-8PM, F
8AM-5PM, SA 8AM-12PM

ROEHR, ARTHUR, NPA

Provider Gender: Male
License number: 95012079
NPI: 1851946016
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
IMPERIAL BEACH HEALTH
CENTER
949 PALM AVE
IMPERIAL BEACH, CA
91932-1503

Phone: (619) 429-3733
Fax: (619) 575-7972
After Hours Phone: (619)
429-3733
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-8PM, F
8AM-5PM, SA 8AM-12PM

SOLTANI, MARYAM, MD

Provider Gender: Female
License number: A139075
NPI: 1518372267
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
IMPERIAL BEACH HEALTH
CENTER
949 PALM AVE
IMPERIAL BEACH, CA
91932-1503
Phone: (619) 429-3733
Fax: (619) 575-7972
After Hours Phone: (619)
429-3733
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
TDD: No
Min/Max Age: 13/99

Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-8PM, F
8AM-5PM, SA 8AM-12PM

TRIANA, JENNIFER, CSW

Provider Gender: Female
License number: 88589
NPI: 1073844460
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
742 10TH ST
IMPERIAL BEACH, CA
91932-2216
Phone: (619) 906-5322
Fax: (619) 271-4963
After Hours Phone: (619)
906-5322
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours:

ZUREK, BEDEANIA R , CSW

Provider Gender: Female
License number: LCSW74215

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J. Directorio de proveedores de salud mental

NPI: 1942375811
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
IMPERIAL BEACH HEALTH
CENTER
949 PALM AVE
IMPERIAL BEACH, CA
91932-1503
Phone: (619) 429-3733
Fax: (619) 575-7972
After Hours Phone: (619)
429-3733
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-8PM, F
8AM-5PM, SA 8AM-12PM

LA JOLLA

HINTZ, SONYA, MD
Provider Gender: Female
License number: G58561
NPI: 1790774446
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
HINTZ, SONYA
3252 HOLIDAY CT STE 100
LA JOLLA, CA 92037-1807

Phone: (858) 455-6511
Fax: (858) 455-5747
After Hours Phone: (858)
455-6511
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age: 19/64
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 7AM-7PM, F
9AM-6PM

KUGEL, SAMUEL, MD
Provider Gender: Male
License number: A54412
NPI: 1497813968
Provider English Spoken: Yes
Provider Language(s) Spoken:
Portuguese, Spanish
Cultural Competency:
KUGEL, SAMUEL
1342 RHODA DR
LA JOLLA, CA 92037-5223
Phone: (619) 472-2600
Fax:
After Hours Phone: (619)
472-2600
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Portuguese, Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours:

OTIS, JOHN L , MD
Provider Gender: Male
License number: G28506
NPI: 1235154535
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
OTIS, JOHN
8950 VILLA LA JOLLA DR STE
A215
LA JOLLA, CA 92037-1711
Phone: (858) 457-2180
Fax: (858) 457-2194
After Hours Phone: (858)
457-2180
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M,TU,TH 2:30PM-5:30PM

LA MESA

ABDULLAH, KERI, PSY
Provider Gender: Female
License number: 29990
NPI: 1699840587
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

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J. Directorio de proveedores de salud mental

<p>FAMILY HEALTH CENTERS OF SAN DIEGO 8851 CENTER DR STE 312 LA MESA, CA 91942-3050 Phone: (619) 515-2383 Fax: (619) 269-0883 After Hours Phone: (619) 515-2383 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 19/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-TH 8:30AM-5PM</p>	<p>Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 19/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-TH 8:30AM-5PM</p>	<p>Hours: M-TH 8:30AM-5PM ALVAREZ, DIANA P , CSW Provider Gender: Female License number: 81025 NPI: 1013200617 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 8851 CENTER DR STE 312 LA MESA, CA 91942-3050 Phone: (619) 515-2383 Fax: (619) 269-0883 After Hours Phone: (619) 515-2383 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 19/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-TH 8:30AM-5PM</p>
<p>AGUIRRE, LEAH B , CSW Provider Gender: Female License number: 74440 NPI: 1306151998 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 8851 CENTER DR STE 312 LA MESA, CA 91942-3050 Phone: (619) 515-2383 Fax: (619) 269-0883 After Hours Phone: (619) 515-2383 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes</p>	<p>ALTERS, DENNIS, MD Provider Gender: Male License number: G36206 NPI: 1457371635 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 8851 CENTER DR STE 312 LA MESA, CA 91942-3050 Phone: (619) 515-2383 Fax: (619) 269-0883 After Hours Phone: (619) 515-2383 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 19/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information</p>	<p>ANDERSON, NICOLE M , CSW Provider Gender: Female License number: LCSW28443 NPI: 1679766380 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO</p>

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J. Directorio de proveedores de salud mental

8851 CENTER DR STE 312
LA MESA, CA 91942-3050
Phone: (619) 515-2383
Fax: (619) 269-0883
After Hours Phone: (619)
515-2383
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

ARIELLA, LYNDA R , PSY
Provider Gender: Female
License number: 19450
NPI: 1073518965
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
8851 CENTER DR STE 312
LA MESA, CA 91942-3050
Phone: (619) 515-2383
Fax: (619) 269-0883
After Hours Phone: (619)
515-2383
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,

Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

ASH, VIVIAN, CSW
Provider Gender: Female
License number: 14619
NPI: 1033623293
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
8851 CENTER DR STE 312
LA MESA, CA 91942-3050
Phone: (619) 515-2383
Fax: (619) 269-0883
After Hours Phone: (619)
515-2383
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

ASUNCION, JENNIFER, CSW
Provider Gender: Male
License number: LCSW75956
NPI: 1083056279
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
8851 CENTER DR STE 312
LA MESA, CA 91942-3050
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Fax: (619) 269-0883
After Hours Phone: (619)
515-2383
Website:
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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

ATALLAH, HANI M , MD
Provider Gender: Male
License number: 132530
NPI: 1104169655
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
8851 CENTER DR STE 312
LA MESA, CA 91942-3050

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J. Directorio de proveedores de salud mental

Phone: (619) 515-2383
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After Hours Phone: (619) 515-2383
Website:
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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

AUCOIN, DOUGLAS, CSW

Provider Gender: Male
License number: 24707
NPI: 1699007609
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
8851 CENTER DR STE 312
LA MESA, CA 91942-3050
Phone: (619) 515-2383
Fax: (619) 269-0883
After Hours Phone: (619)
515-2383
Website:
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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

AVILA, RADOMIR M , CSW

Provider Gender: Male
License number: 75520
NPI: 1487937330
Provider English Spoken: Yes
Provider Language(s) Spoken:
Portuguese, Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
8851 CENTER DR STE 312
LA MESA, CA 91942-3050
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Fax: (619) 269-0883
After Hours Phone: (619)
515-2383
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

BARCELOS ANTONIO, TIAGO,

CSW

Provider Gender: Male
License number: 90529
NPI: 1194159871
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
8851 CENTER DR STE 312
LA MESA, CA 91942-3050
Phone: (619) 515-2383
Fax: (619) 269-0883
After Hours Phone: (619)
515-2383
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

BARTHOLOMEW, SARAH C , CSW

Provider Gender: Female
License number: 86542
NPI: 1720339708
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
8851 CENTER DR STE 312
LA MESA, CA 91942-3050

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2383
 Fax: (619) 269-0883
 After Hours Phone: (619) 515-2383
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

BENNETT, CATHERINE V , MFT

Provider Gender: Female
 License number: 18154
 NPI: 1861577967
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 BENNETT, KATE
 5480 BALTIMORE DR STE 201
 LA MESA, CA 91942-2015
 Phone: (619) 823-0204
 Fax: (858) 459-2128
 After Hours Phone: (619)
 823-0204
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender

Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-TH 1PM-7PM, F
 1PM-6PM

BENNETT, RACHEL Q , CSW

Provider Gender: Female
 License number: 76466
 NPI: 1558659797
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
 Phone: (619) 515-2383
 Fax: (619) 269-0883
 After Hours Phone: (619)
 515-2383
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

BERKSON, BARRIE, CSW

Provider Gender: Female
 License number: 63313
 NPI: 1922305465

Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
 Phone: (619) 515-2383
 Fax: (619) 269-0883
 After Hours Phone: (619)
 515-2383
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

BIRNBAUM, DEBORAH, MD

Provider Gender: Female
 License number: 20A11387
 NPI: 1639308265
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
 Phone: (619) 515-2383
 Fax: (619) 269-0883
 After Hours Phone: (619)
 515-2383

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J. Directorio de proveedores de salud mental

<p><i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 19/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM</p>	<p><i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM</p>	<p>Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8851 CENTER DR STE 312 LA MESA, CA 91942-3050 <i>Phone:</i> (619) 515-2383 <i>Fax:</i> (619) 269-0883 <i>After Hours Phone:</i> (619) 515-2383 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 19/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM</p>
<p>BOND, ALAN, PSY <i>Provider Gender:</i> Male <i>License number:</i> PSY25805 <i>NPI:</i> 1881927184 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8851 CENTER DR STE 312 LA MESA, CA 91942-3050 <i>Phone:</i> (619) 515-2383 <i>Fax:</i> (619) 269-0883 <i>After Hours Phone:</i> (619) 515-2383 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 19/99 <i>Gender Restriction:</i> No Gender Restrictions</p>	<p>BORREGO, DIANA E , NPA <i>Provider Gender:</i> Female <i>License number:</i> 95005019 <i>NPI:</i> 1184012866 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8851 CENTER DR STE 312 LA MESA, CA 91942-3050 <i>Phone:</i> (619) 515-2383 <i>Fax:</i> (619) 269-0883 <i>After Hours Phone:</i> (619) 515-2383 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 19/99 <i>Gender Restriction:</i> No Gender Restrictions</p>	<p>BURGOS, EDNA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 85597 <i>NPI:</i> 1134591167 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8851 CENTER DR STE 312 LA MESA, CA 91942-3050 <i>Phone:</i> (619) 515-2383 <i>Fax:</i> (619) 269-0883 <i>After Hours Phone:</i> (619) 515-2383</p>
<p>BUBY, MYRA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 23172 <i>NPI:</i> 1093747511 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i></p>	<p><i>Hours:</i> M-TH 8:30AM-5PM</p>	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 19/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM</p>	<p><i>Restrictions</i> <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM</p> <p>CABREJOS, CLAUDIO, MD <i>Provider Gender:</i> Male <i>License number:</i> A71653 <i>NPI:</i> 1033133483 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Portuguese, Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8851 CENTER DR STE 312 LA MESA, CA 91942-3050 <i>Phone:</i> (619) 515-2383 <i>Fax:</i> (619) 269-0883 <i>After Hours Phone:</i> (619) 515-2383 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 19/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM</p>	<p><i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8851 CENTER DR STE 312 LA MESA, CA 91942-3050 <i>Phone:</i> (619) 515-2383 <i>Fax:</i> (619) 269-0883 <i>After Hours Phone:</i> (619) 515-2383 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 19/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM</p>
<p>BUTERBAUGH, KRISTY L , CSW <i>Provider Gender:</i> Female <i>License number:</i> 65477 <i>NPI:</i> 1346615838 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8851 CENTER DR STE 312 LA MESA, CA 91942-3050 <i>Phone:</i> (619) 515-2383 <i>Fax:</i> (619) 269-0883 <i>After Hours Phone:</i> (619) 515-2383 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 19/99 <i>Gender Restriction:</i> No Gender</p>	<p><i>Restrictions</i> <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM</p> <p>CARILLO, KRYSTAL I , CSW <i>Provider Gender:</i> Female <i>License number:</i> 80068 <i>NPI:</i> 1871906735</p>	<p>CARINO DIOKNO, RHODA, PSY <i>Provider Gender:</i> Female <i>License number:</i> 28073 <i>NPI:</i> 1629109483 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8851 CENTER DR STE 312 LA MESA, CA 91942-3050 <i>Phone:</i> (619) 515-2383 <i>Fax:</i> (619) 269-0883 <i>After Hours Phone:</i> (619) 515-2383</p>

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J. Directorio de proveedores de salud mental

<p><i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 19/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM</p> <p>CHEN, ANGELA, MFT <i>Provider Gender:</i> Female <i>License number:</i> LMFT40923 <i>NPI:</i> 1811027956 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8851 CENTER DR STE 312 LA MESA, CA 91942-3050 <i>Phone:</i> (619) 515-2383 <i>Fax:</i> (619) 269-0883 <i>After Hours Phone:</i> (619) 515-2383 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 19/99 <i>Gender Restriction:</i> No Gender Restrictions</p>	<p><i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM</p> <p>CHRISTENSEN, MELISSA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 69616 <i>NPI:</i> 1922313394 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8851 CENTER DR STE 312 LA MESA, CA 91942-3050 <i>Phone:</i> (619) 515-2383 <i>Fax:</i> (619) 269-0883 <i>After Hours Phone:</i> (619) 515-2383 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 19/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM</p> <p>COMBS, LAURI, CSW <i>Provider Gender:</i> Female <i>License number:</i> LCSW75330 <i>NPI:</i> 1538398979 <i>Provider English Spoken:</i> Yes</p>	<p><i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8851 CENTER DR STE 312 LA MESA, CA 91942-3050 <i>Phone:</i> (619) 515-2383 <i>Fax:</i> (619) 269-0883 <i>After Hours Phone:</i> (619) 515-2383 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 19/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM</p> <p>CROCKFORD, DANE, PSY <i>Provider Gender:</i> Male <i>License number:</i> 28313 <i>NPI:</i> 1780031831 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8851 CENTER DR STE 312 LA MESA, CA 91942-3050 <i>Phone:</i> (619) 515-2383 <i>Fax:</i> (619) 269-0883 <i>After Hours Phone:</i> (619) 515-2383 <i>Website:</i> www.beaconhealthoptions.com</p>
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J. Directorio de proveedores de salud mental

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM

DALONSO, SANDRA L , CSW
Provider Gender: Female
License number: 82240
NPI: 1841797644
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
Phone: (619) 515-2383
Fax: (619) 269-0883
After Hours Phone: (619)
 515-2383
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes

Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM
DAN, WENDY L , CSW
Provider Gender: Female
License number: 26015
NPI: 1700224037
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
Phone: (619) 515-2383
Fax: (619) 269-0883
After Hours Phone: (619)
 515-2383
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM
DIAZ, LIZETH, CSW
Provider Gender: Female
License number: 97277
NPI: 1124457023
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency:

FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
Phone: (619) 515-2383
Fax: (619) 269-0883
After Hours Phone: (619)
 515-2383
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM
DOBOS, DAVID, MD
Provider Gender: Male
License number: G57276
NPI: 1548318348
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
Phone: (619) 515-2383
Fax: (619) 269-0883
After Hours Phone: (619)
 515-2383
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

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 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de
 Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 19/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM</p> <p>DRISCOLL, MICHAEL S , CSW <i>Provider Gender:</i> Male <i>License number:</i> 93951 <i>NPI:</i> 1659761880 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8851 CENTER DR STE 312 LA MESA, CA 91942-3050 <i>Phone:</i> (619) 515-2383 <i>Fax:</i> (619) 269-0883 <i>After Hours Phone:</i> (619) 515-2383 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 19/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information</p>	<p><i>Hours:</i> M-TH 8:30AM-5PM</p> <p>DUNFORD, KATELYN C , MFT <i>Provider Gender:</i> Female <i>License number:</i> 126626 <i>NPI:</i> 1437517497 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8851 CENTER DR STE 312 LA MESA, CA 91942-3050 <i>Phone:</i> (619) 515-2383 <i>Fax:</i> (619) 269-0883 <i>After Hours Phone:</i> (619) 515-2383 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 19/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM</p> <p>DWYER, GEORGE, CSW <i>Provider Gender:</i> Male <i>License number:</i> 70988 <i>NPI:</i> 1437606126 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8851 CENTER DR STE 312</p>	<p>LA MESA, CA 91942-3050 <i>Phone:</i> (619) 515-2383 <i>Fax:</i> (619) 269-0883 <i>After Hours Phone:</i> (619) 515-2383 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 19/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM</p> <p>FAJARDO, JACQUELINE M , CSW <i>Provider Gender:</i> Female <i>License number:</i> 87322 <i>NPI:</i> 1215342118 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8851 CENTER DR STE 312 LA MESA, CA 91942-3050 <i>Phone:</i> (619) 515-2383 <i>Fax:</i> (619) 269-0883 <i>After Hours Phone:</i> (619) 515-2383 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i></p>
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J. Directorio de proveedores de salud mental

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 19/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

FEDEROFF, MONICA, MD

Provider Gender: Female

License number: A164677

NPI: 1912404492

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

8851 CENTER DR STE 312

LA MESA, CA 91942-3050

Phone: (619) 515-2383

Fax: (619) 269-0883

After Hours Phone: (619)

515-2383

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 19/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

FLORES, MARY LUPE, CSW

Provider Gender: Female

License number: 19815

NPI: 1134147457

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

8851 CENTER DR STE 312

LA MESA, CA 91942-3050

Phone: (619) 515-2383

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515-2383

Website:

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 19/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

FRANCO, RODRIGO, CSW

Provider Gender: Male

License number: 71548

NPI: 1952736043

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

8851 CENTER DR STE 312

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 19/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

FUKUI, TOMONORI, MD

Provider Gender: Male

License number: 75713

NPI: 1366519670

Provider English Spoken: Yes

Provider Language(s) Spoken:

Japanese, Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

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After Hours Phone: (619)

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-TH 8:30AM-5PM

GALAPON, DIXIE L , PSY

Provider Gender: Female
 License number: 16711
 NPI: 1174646301
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
 Phone: (619) 515-2383
 Fax: (619) 269-0883
 After Hours Phone: (619) 515-2383
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-TH 8:30AM-5PM

GAUD, KRISTINA G , MD

Provider Gender: Female
 License number: 170667
 NPI: 1508151598
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
 Phone: (619) 515-2383
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 After Hours Phone: (619) 515-2383
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-TH 8:30AM-5PM

GLASSMAN, JAGA NATH, MD

Provider Gender: Male
 License number: G55004
 NPI: 1558409771
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050

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 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-TH 8:30AM-5PM

GLEASON, SHEILA, PSY

Provider Gender: Female
 License number: 13685
 NPI: 1366641813
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
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 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

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J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-TH 8:30AM-5PM

GONZALES, JULIANA, CSW

Provider Gender: Female
 License number: 83254
 NPI: 1821487406
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
 Phone: (619) 515-2383
 Fax: (619) 269-0883
 After Hours Phone: (619) 515-2383
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-TH 8:30AM-5PM

GONZALEZ, ANDREA, CSW

Provider Gender: Female
 License number: 97593
 NPI: 1326346198
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
 Phone: (619) 515-2383
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 After Hours Phone: (619) 515-2383
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-TH 8:30AM-5PM

GOTTUNG, CHRISTINA, CSW

Provider Gender: Female
 License number: 87716
 NPI: 1134597123
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050

Phone: (619) 515-2383
 Fax: (619) 269-0883
 After Hours Phone: (619) 515-2383
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-TH 8:30AM-5PM

GRACE, MONIKA M , PSY

Provider Gender: Female
 License number: 24462
 NPI: 1497985832
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Modern Greek, French, Portuguese, Spanish
 Cultural Competency:
 GRACE COUNSELING AND PSYCHOTHERAPY
 5575 LAKE PARK WAY STE 100-6
 LA MESA, CA 91942-1664
 Phone: (619) 381-8472
 Fax: (619) 839-3973
 After Hours Phone: (619) 381-8472
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Modern Greek, French,
Portuguese, Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-SU 8AM-8PM

GUTIERREZ, APRIL P , CSW
Provider Gender: Female
License number: 86166
NPI: 1356749949
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
8851 CENTER DR STE 312
LA MESA, CA 91942-3050
Phone: (619) 515-2383
Fax: (619) 269-0883
After Hours Phone: (619)
515-2383
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

HARADON, SUSAN, PSY
Provider Gender: Female
License number: 6075
NPI: 1841289246
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
HARADON, SUSAN
4700 SPRING ST STE 306
LA MESA, CA 91942-2294
Phone: (619) 462-1611
Fax: (619) 460-8093
After Hours Phone: (619)
462-1611
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age: 19/64
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 9AM-7PM, F
9AM-5PM

HARRIMAN, CORAL, PSY
Provider Gender: Female
License number: 26098
NPI: 1417373069
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
8851 CENTER DR STE 312
LA MESA, CA 91942-3050

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Fax: (619) 269-0883
After Hours Phone: (619)
515-2383
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

HAYDEN WADE, HELEN, PSY
Provider Gender: Female
License number: PSY19313
NPI: 1366951105
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
8851 CENTER DR STE 312
LA MESA, CA 91942-3050
Phone: (619) 515-2383
Fax: (619) 269-0883
After Hours Phone: (619)
515-2383
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

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J. Directorio de proveedores de salud mental

TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-TH 8:30AM-5PM

HUBER, REBECCA, MD

Provider Gender: Female
License number: A133711
NPI: 1174960686
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
8851 CENTER DR STE 312
LA MESA, CA 91942-3050
Phone: (619) 515-2383
Fax: (619) 269-0883
After Hours Phone: (619) 515-2383
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-TH 8:30AM-5PM

ISHIDA, YO, CSW

Provider Gender: Female

License number: 29526
NPI: 1225154081
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
8851 CENTER DR STE 312
LA MESA, CA 91942-3050
Phone: (619) 515-2383
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www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-TH 8:30AM-5PM

JALAN, DEVESH, MD

Provider Gender: Male
License number: A167754
NPI: 1083092134
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
8851 CENTER DR STE 312
LA MESA, CA 91942-3050

Phone: (619) 515-2383
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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-TH 8:30AM-5PM

JAMES, CHRISTINE E , MD

Provider Gender: Female
License number: 20A13931
NPI: 1679834022
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
8851 CENTER DR STE 312
LA MESA, CA 91942-3050
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After Hours Phone: (619) 515-2383
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www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

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J. Directorio de proveedores de salud mental

TDD: No

Min/Max Age: 19/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

JASSO-RAMIREZ, MARTHA, CSW

Provider Gender: Female

License number: 26493

NPI: 1871772020

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

8851 CENTER DR STE 312

LA MESA, CA 91942-3050

Phone: (619) 515-2383

Fax: (619) 269-0883

After Hours Phone: (619)

515-2383

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 19/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

JENSEN, DEXTER, MD

Provider Gender: Male

License number: A67960

NPI: 1740465541

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

8851 CENTER DR STE 312

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 19/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

JONES, ADELE, PSY

Provider Gender: Female

License number: 25311

NPI: 1558602490

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

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Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 19/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

JONES, ATAVIA L , CSW

Provider Gender: Female

License number: LCSW76796

NPI: 1952734899

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

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J. Directorio de proveedores de salud mental

TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-TH 8:30AM-5PM

JONES, MICHAEL A , CSW

Provider Gender: Male
License number: LCS 22452
NPI: 1548205719
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
8851 CENTER DR STE 312
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Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-TH 8:30AM-5PM

JOSHI, YASH, MD

Provider Gender: Male

License number: A147156
NPI: 1598151433
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
YASH JOSHI
5555 GROSSMONT CENTER DR
LA MESA, CA 91942-3019
Phone: (619) 740-6000
Fax:

After Hours Phone: (619) 740-6000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours:

KEI, JUSTIN, MD

Provider Gender: Male
License number: A138266
NPI: 1396150041
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
8851 CENTER DR STE 312
LA MESA, CA 91942-3050
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Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-TH 8:30AM-5PM

KLOBERDANZ, KELSEY L , NPA

Provider Gender: Female
License number: 95005293
NPI: 1235672502
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
8851 CENTER DR STE 312
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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):

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J. Directorio de proveedores de salud mental

<p>Yes Please contact provider for Accessibility information Hours: M-TH 8:30AM-5PM</p>	<p>FAMILY HEALTH CENTERS OF SAN DIEGO 8851 CENTER DR STE 312 LA MESA, CA 91942-3050 Phone: (619) 515-2383</p>	<p>Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No</p>
<p>KNIGHT, MARK ANTHONY, MD Provider Gender: Male License number: A94460 NPI: 1851573554</p>	<p>Fax: (619) 269-0883 After Hours Phone: (619) 515-2383 Website:</p>	<p>Min/Max Age: 19/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes</p>
<p>Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency:</p>	<p>www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken:</p>	<p>Please contact provider for Accessibility information Hours: M-TH 8:30AM-5PM</p>
<p>FAMILY HEALTH CENTERS OF SAN DIEGO 8851 CENTER DR STE 312 LA MESA, CA 91942-3050 Phone: (619) 515-2383</p>	<p>American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No</p>	<p>LIDSTONE, PAVEN, MD Provider Gender: Female License number: 161149 NPI: 1942662093</p>
<p>Fax: (619) 269-0883 After Hours Phone: (619) 515-2383 Website:</p>	<p>Min/Max Age: 19/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes</p>	<p>Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency:</p>
<p>www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken:</p>	<p>Please contact provider for Accessibility information Hours: M-TH 8:30AM-5PM</p>	<p>FAMILY HEALTH CENTERS OF SAN DIEGO 8851 CENTER DR STE 312 LA MESA, CA 91942-3050 Phone: (619) 515-2383</p>
<p>American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No</p>	<p>KYLE, MARCIE, CSW Provider Gender: Female License number: LCSW78555 NPI: 1174981500</p>	<p>Fax: (619) 269-0883 After Hours Phone: (619) 515-2383 Website:</p>
<p>Min/Max Age: 19/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes</p>	<p>Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency:</p>	<p>www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken:</p>
<p>Please contact provider for Accessibility information Hours: M-TH 8:30AM-5PM</p>	<p>FAMILY HEALTH CENTERS OF SAN DIEGO 8851 CENTER DR STE 312 LA MESA, CA 91942-3050 Phone: (619) 515-2383</p>	<p>American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No</p>
<p>KOH, STEVE H , MD Provider Gender: Male License number: A103468 NPI: 1467650473</p>	<p>Fax: (619) 269-0883 After Hours Phone: (619) 515-2383 Website:</p>	<p>Min/Max Age: 19/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes</p>
<p>Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency:</p>	<p>www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes</p>	<p>Please contact provider for Accessibility information</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

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

LIM, SANDRA S , MD

Provider Gender: Female

License number: 20A13075

NPI: 1083963094

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

8851 CENTER DR STE 312

LA MESA, CA 91942-3050

Phone: (619) 515-2383

Fax: (619) 269-0883

After Hours Phone: (619)

515-2383

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 19/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

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

LIPPERT, HEATHER M , CSW

Provider Gender: Female

License number: 22526

NPI: 1093991663

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

8851 CENTER DR STE 312

LA MESA, CA 91942-3050

Phone: (619) 515-2383

Fax: (619) 269-0883

After Hours Phone: (619)

515-2383

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 19/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

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

LOEB, CINDY, CSW

Provider Gender: Female

License number: 75333

NPI: 1619108511

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

8851 CENTER DR STE 312

LA MESA, CA 91942-3050

Phone: (619) 515-2383

Fax: (619) 269-0883

After Hours Phone: (619)

515-2383

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 19/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

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

LYDIARD, JESSICA, MD

Provider Gender: Female

License number: A171775

NPI: 1841731296

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

8851 CENTER DR STE 312

LA MESA, CA 91942-3050

Phone: (619) 515-2383

Fax: (619) 269-0883

After Hours Phone: (619)

515-2383

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 19/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

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

LYONS, KEITH E , CSW

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J. Directorio de proveedores de salud mental

Provider Gender: Male
License number: 92724
NPI: 1538704002
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
Phone: (619) 515-2383
Fax: (619) 269-0883
After Hours Phone: (619)
 515-2383
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM

MACMASTER, LINDSAY, PSY
Provider Gender: Female
License number: 25570
NPI: 1659520179
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050

Phone: (619) 515-2383
Fax: (619) 269-0883
After Hours Phone: (619)
 515-2383
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM

MAHONEY, PATRICIA A , CSW
Provider Gender: Female
License number: 22296
NPI: 1700200888
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
Phone: (619) 515-2383
Fax: (619) 269-0883
After Hours Phone: (619)
 515-2383
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM

MAIETTA, KATHLEEN H , CSW
Provider Gender: Female
License number: 88399
NPI: 1487128617
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
Phone: (619) 515-2383
Fax: (619) 269-0883
After Hours Phone: (619)
 515-2383
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM

MARTIR, MICHEL, CSW
Provider Gender: Female

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J. Directorio de proveedores de salud mental

License number: 73174
 NPI: 1356528434
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
 Phone: (619) 515-2383
 Fax: (619) 269-0883
 After Hours Phone: (619) 515-2383
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-TH 8:30AM-5PM

MCADAMS, HILDA, NPA
 Provider Gender: Female
 License number: 14201
 NPI: 1396838082
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050

Phone: (619) 515-2383
 Fax: (619) 269-0883
 After Hours Phone: (619) 515-2383
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-TH 8:30AM-5PM

MCHENRY, KELLY, CSW
 Provider Gender: Female
 License number: 29689
 NPI: 1851544340
 Provider English Spoken: Yes
 Provider Language(s) Spoken: American Sign Language
 Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
 Phone: (619) 515-2383
 Fax: (619) 269-0883
 After Hours Phone: (619) 515-2383
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian,

Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-TH 8:30AM-5PM

MEJIA, RITA I, MFT
 Provider Gender: Female
 License number: 99697
 NPI: 1952741506
 Provider English Spoken: Yes
 Provider Language(s) Spoken: American Sign Language
 Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
 Phone: (619) 515-2383
 Fax: (619) 269-0883
 After Hours Phone: (619) 515-2383
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-TH 8:30AM-5PM

MENDEZ, ANDRES G, PSY

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Gender: Male
License number: 28907
NPI: 1841482692
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
Phone: (619) 515-2383
Fax: (619) 269-0883
After Hours Phone: (619)
 515-2383
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM

MERRILL, SARAH M , CSW
Provider Gender: Female
License number: 79014
NPI: 1639403884
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050

Phone: (619) 515-2383
Fax: (619) 269-0883
After Hours Phone: (619)
 515-2383
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM

MILLER, BRIAN P , MD
Provider Gender: Male
License number: A68180
NPI: 1861411381
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 MILLER, BRIAN
 5555 GROSSMONT CENTER
 DR
 LA MESA, CA 91942-3019
Phone: (858) 939-4393
Fax: (619) 740-5055
After Hours Phone: (858)
 939-4393
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age:
Gender Restriction: No Gender

Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours:

MILLICAN, RUTH, PSY
Provider Gender: Female
License number: 25354
NPI: 1346472305
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
Phone: (619) 515-2383
Fax: (619) 269-0883
After Hours Phone: (619)
 515-2383
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM

MODAD, ALBERT, PSY
Provider Gender: Female
License number: 29697
NPI: 1629453691
Provider English Spoken: Yes

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J. Directorio de proveedores de salud mental

Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
Phone: (619) 515-2383
Fax: (619) 269-0883
After Hours Phone: (619) 515-2383
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-TH 8:30AM-5PM

MORALES MORENO, MINERVA, CSW

Provider Gender: Female
License number: 63550
NPI: 1841337565
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
Phone: (619) 515-2383
Fax: (619) 269-0883
After Hours Phone: (619) 515-2383

Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-TH 8:30AM-5PM

MORRISON, TYLER E , MD

Provider Gender: Male
License number: A144917
NPI: 1912391814
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Japanese
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
Phone: (619) 515-2383
Fax: (619) 269-0883
After Hours Phone: (619) 515-2383
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender

Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-TH 8:30AM-5PM

MOYER, TRENTON E , MD

Provider Gender: Male
License number: A78165
NPI: 1437180791
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MOYER, TRENTON
 5555 GROSSMONT CENTER DR
 LA MESA, CA 91942-3019
Phone: (619) 740-4800
Fax:

After Hours Phone: (619) 740-4800
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours:

MUNOZ, VIVIANA, CSW

Provider Gender: Female
License number: 66637
NPI: 1497987713
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>SAN DIEGO 8851 CENTER DR STE 312 LA MESA, CA 91942-3050 <i>Phone:</i> (619) 515-2383 <i>Fax:</i> (619) 269-0883 <i>After Hours Phone:</i> (619) 515-2383 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 19/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM</p>	<p><i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 19/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM</p>	<p><i>Hours:</i> M-TH 8:30AM-5PM NOUHI, NUSHA, PSY <i>Provider Gender:</i> Female <i>License number:</i> 27670 <i>NPI:</i> 1942433917 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8851 CENTER DR STE 312 LA MESA, CA 91942-3050 <i>Phone:</i> (619) 515-2383 <i>Fax:</i> (619) 269-0883 <i>After Hours Phone:</i> (619) 515-2383 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 19/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM</p>
<p>NADEAU MANNING, JULIE, CSW <i>Provider Gender:</i> Female <i>License number:</i> 25094 <i>NPI:</i> 1275609760 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8851 CENTER DR STE 312 LA MESA, CA 91942-3050 <i>Phone:</i> (619) 515-2383 <i>Fax:</i> (619) 269-0883 <i>After Hours Phone:</i> (619) 515-2383 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes</p>	<p>NAZARIO, JACOBETH, PSY <i>Provider Gender:</i> Female <i>License number:</i> PSY32092 <i>NPI:</i> 1326648684 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8851 CENTER DR STE 312 LA MESA, CA 91942-3050 <i>Phone:</i> (619) 515-2383 <i>Fax:</i> (619) 269-0883 <i>After Hours Phone:</i> (619) 515-2383 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 19/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information</p>	<p>NWANGANGA, OKECHUKU R , CSW <i>Provider Gender:</i> Male <i>License number:</i> 27072 <i>NPI:</i> 1285984450 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF</p>

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J. Directorio de proveedores de salud mental

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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

OBRYAN, KELLY, PSY
Provider Gender: Female
License number: 24966
NPI: 1093882698
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
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TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

OMORODIN, AISHA, MD
Provider Gender: Female
License number: A169651
NPI: 1629500301
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
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Min/Max Age: 19/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

OTIS, JOHN L , MD
Provider Gender: Male
License number: G28506
NPI: 1235154535
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
OTIS, JOHN
5555 GROSSMONT CENTER
DR
LA MESA, CA 91942-3019
Phone: (858) 457-2180
Fax:
After Hours Phone: (858)
457-2180
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours:

PINEDO, YANELI, CSW
Provider Gender: Male
License number: 91103
NPI: 1710361712
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
8851 CENTER DR STE 312
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Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

PRASEK, LAUREN, NPA

Provider Gender: Female
License number: 95004145
NPI: 1932566031
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
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Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

PROCTOR, MELISSA S , CSW

Provider Gender: Female
License number: 62650
NPI: 1336188655
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
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TDD: No
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Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
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Hours: M-TH 8:30AM-5PM

PROOSASELTS, YULIYA, MD

Provider Gender: Female

License number: A133675
NPI: 1952747875
Provider English Spoken: Yes
Provider Language(s) Spoken:
Russian
Cultural Competency:
FAMILY HEALTH CENTERS OF
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TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

RAMOS, ELIZABETH, CSW

Provider Gender: Female
License number: 73374
NPI: 1992046890
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
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Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

RODRIGUEZ, CHRISTINE, PSY

Provider Gender: Female
License number: 30472
NPI: 1568656619
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
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Min/Max Age: 19/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

ROSENFARB, BARBARA, CSW

Provider Gender: Female
License number: 28590
NPI: 1447477781
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
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Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

ROZELL, KATHY, CSW

Provider Gender: Female

License number: 25068
NPI: 1578603973
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
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Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

SACHS, MELISSA R , CSW

Provider Gender: Female
License number: 76968
NPI: 1649760356
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
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 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

SEPULVEDA, JOE, MD

Provider Gender: Male
 License number: A113283
 NPI: 1306165402
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
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 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
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 Hours: M-TH 8:30AM-5PM

SIPIN, ELVIRA P , CSW

Provider Gender: Female
 License number: LCS15308
 NPI: 1477759892
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
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 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

THICKSTUN, MARY SUSAN,

CSW

Provider Gender: Female
 License number: 21573
 NPI: 1437354875
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
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 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

TONG, GARRICK, MD

Provider Gender: Male
 License number: A102192
 NPI: 1831361278
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish, Yue Chinese
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
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 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
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 Hours: M-TH 8:30AM-5PM

TORRES, LAURA, CSW

Provider Gender: Female
 License number: 65059
 NPI: 1568612943
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
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TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

TRIANA, JENNIFER, CSW

Provider Gender: Female
 License number: 88589
 NPI: 1073844460
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
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 Min/Max Age: 19/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
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 Hours: M-TH 8:30AM-5PM

Provider Gender: Male
 License number: 36841
 NPI: 1831228824
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 VILLAFANA, JOSE
 8080 LA MESA BLVD STE 204
 LA MESA, CA 91942-0362
 Phone: (619) 540-0700
 Fax: (619) 462-1856
 After Hours Phone: (619)
 540-0700
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish
 TDD: No
 Min/Max Age: 0/64
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-6PM

VILLAFANA, JOSE E , MFT

Provider Gender: Female
 License number: LCSW16118
 NPI: 1902336837
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
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 LA MESA, CA 91942-3050
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 Fax: (619) 269-0883
 After Hours Phone: (619)
 515-2383

WEBSTER, KRISTIN K , CSW

Provider Gender: Female
 License number: LCSW16118
 NPI: 1902336837
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
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J. Directorio de proveedores de salud mental

<p><i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 19/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM</p>	<p><i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM</p>	<p><i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8851 CENTER DR STE 312 LA MESA, CA 91942-3050 <i>Phone:</i> (619) 515-2383 <i>Fax:</i> (619) 269-0883 <i>After Hours Phone:</i> (619) 515-2383 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 19/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM</p>
<p>WITT, ANNETTE, CSW <i>Provider Gender:</i> Female <i>License number:</i> 15770 <i>NPI:</i> 1912263468 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8851 CENTER DR STE 312 LA MESA, CA 91942-3050 <i>Phone:</i> (619) 515-2383 <i>Fax:</i> (619) 269-0883 <i>After Hours Phone:</i> (619) 515-2383 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 19/99 <i>Gender Restriction:</i> No Gender Restrictions</p>	<p>WOLF, CELIA C , NPA <i>Provider Gender:</i> Female <i>License number:</i> 95001899 <i>NPI:</i> 1245635564 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8851 CENTER DR STE 312 LA MESA, CA 91942-3050 <i>Phone:</i> (619) 515-2383 <i>Fax:</i> (619) 269-0883 <i>After Hours Phone:</i> (619) 515-2383 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 19/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM</p>	<p>YALYSHAVA, VOLHA, CSW <i>Provider Gender:</i> Female <i>License number:</i> LCSW69810 <i>NPI:</i> 1821392002 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Russian <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8851 CENTER DR STE 312 LA MESA, CA 91942-3050 <i>Phone:</i> (619) 515-2383 <i>Fax:</i> (619) 269-0883 <i>After Hours Phone:</i> (619) 515-2383 <i>Website:</i> www.beaconhealthoptions.com</p>
<p>WOOD, KEEGAN, NPA <i>Provider Gender:</i> Male <i>License number:</i> NP95006887 <i>NPI:</i> 1417471459 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i></p>		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM

YODER, BRENT E , CSW

Provider Gender: Male
License number: 9305
NPI: 1831184639
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 YODER, BRENT
 8432 LEMON AVE
 LA MESA, CA 91941-5310
Phone: (619) 447-7917
Fax: (619) 447-7917
After Hours Phone: (619)
 447-7917
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No

Min/Max Age: 13/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-TH 12PM-8PM, F
 8AM-5PM

ZAYAS, GILBERTO, MD
Provider Gender: Male
License number: A136760
NPI: 1508174970
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
Phone: (619) 515-2383
Fax: (619) 269-0883
After Hours Phone: (619)
 515-2383
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM

LAKESIDE

ANDERSEN, CLAIRE, MD
Provider Gender: Female
License number: 125942
NPI: 1831418664
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD

HEALTHCARE
 10039 VINE ST
 LAKESIDE, CA 92040-3120
Phone: (619) 390-9975
Fax: (858) 633-4690
After Hours Phone: (619)
 390-9975
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

BELINSKY, MARIA T , CSW

Provider Gender: Female
License number: LCSW69175
NPI: 1760867824
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish

Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 10039 VINE ST
 LAKESIDE, CA 92040-3120
Phone: (619) 390-9975
Fax: (858) 633-4690
After Hours Phone: (619)
 390-9975
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Nepali (Individual Language),
Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

BHAJU, JESHMIN, PSY

Provider Gender: Female
License number: 31625
NPI: 1497081566
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi, Nepali (Individual
Language)
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
10039 VINE ST
LAKESIDE, CA 92040-3120
Phone: (619) 390-9975
Fax: (858) 633-4690
After Hours Phone: (619)
390-9975
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

CALOCA, LAURA, PSY

Provider Gender: Female
License number: 29757
NPI: 1134364698
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
10039 VINE ST
LAKESIDE, CA 92040-3120
Phone: (619) 390-9975
Fax: (858) 633-4690
After Hours Phone: (619)
390-9975
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

CARLTON PENN, CORNELIA, PSY

Provider Gender: Female
License number: PSY14310
NPI: 1891720611
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
10039 VINE ST

LAKESIDE, CA 92040-3120
Phone: (619) 390-9975
Fax: (858) 633-4690
After Hours Phone: (619)
390-9975
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

CELAYA, MARY, NPA

Provider Gender: Female
License number: 11425
NPI: 1710060231
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
10039 VINE ST
LAKESIDE, CA 92040-3120
Phone: (619) 390-9975
Fax: (858) 633-4690
After Hours Phone: (619)
390-9975
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: No

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J. Directorio de proveedores de salud mental

Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CHAO, BRIAN, PSY

Provider Gender: Male
License number: 28796
NPI: 1114196987
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 10039 VINE ST
 LAKESIDE, CA 92040-3120
Phone: (619) 390-9975
Fax: (858) 633-4690
After Hours Phone: (619) 390-9975
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CORVINI, NICOLAS, NPA

Provider Gender: Male
License number: 55107
NPI: 1194242461

Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 10039 VINE ST
 LAKESIDE, CA 92040-3120
Phone: (619) 390-9975
Fax: (858) 633-4690
After Hours Phone: (619) 390-9975
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

COSTELLO, JENNIFER R , CSW

Provider Gender: Female
License number: 84174
NPI: 1619506250
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 10039 VINE ST
 LAKESIDE, CA 92040-3120
Phone: (619) 390-9975
Fax: (858) 633-4690
After Hours Phone: (619) 390-9975

Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

EDE, KEKOA, MD

Provider Gender: Male
License number: A101211
NPI: 1134224843
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 10039 VINE ST
 LAKESIDE, CA 92040-3120
Phone: (619) 390-9975
Fax: (858) 633-4690
After Hours Phone: (619) 390-9975
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

GOEHRING, KATHERINE R , NPA

Provider Gender: Female
License number: 95002763
NPI: 1972929404
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
10039 VINE ST
LAKESIDE, CA 92040-3120
Phone: (619) 390-9975
Fax: (858) 633-4690
After Hours Phone: (619)
390-9975
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

GUARDADO SOTO, RAQUEL E , PSY

Provider Gender: Female
License number: 26883
NPI: 1194999276
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish

Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
10039 VINE ST
LAKESIDE, CA 92040-3120
Phone: (619) 390-9975
Fax: (858) 633-4690
After Hours Phone: (619)
390-9975
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

HOLDEN, MATTHEW, PSY

Provider Gender: Male
License number: PSY11197
NPI: 1740213487
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
10039 VINE ST
LAKESIDE, CA 92040-3120
Phone: (619) 390-9975
Fax: (858) 633-4690
After Hours Phone: (619)
390-9975
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

KLEAST, RUTH A , CSW

Provider Gender: Female
License number: LCSW28504
NPI: 1326272378
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
10039 VINE ST
LAKESIDE, CA 92040-3120
Phone: (619) 390-9975
Fax: (858) 633-4690
After Hours Phone: (619)
390-9975
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

LIU-BARBARO, DOROTHY, MD Provider Gender: Female License number: A115342 NPI: 1851602270 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE 10039 VINE ST LAKESIDE, CA 92040-3120 Phone: (619) 390-9975 Fax: (858) 633-4690 After Hours Phone: (619) 390-9975 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M-F 8AM-5PM	<i>Phone:</i> (619) 390-9975 <i>Fax:</i> (858) 633-4690 <i>After Hours Phone:</i> (619) 390-9975 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM	<i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM
MACIAS, ZIRLEY, CSW Provider Gender: Female License number: 96997 NPI: 1245616887 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE 10039 VINE ST LAKESIDE, CA 92040-3120	MAGOS, DANIEL, CSW Provider Gender: Male License number: 88270 NPI: 1578983664 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE 10039 VINE ST LAKESIDE, CA 92040-3120 Phone: (619) 390-9975 Fax: (858) 633-4690 After Hours Phone: (619) 390-9975 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish TDD: No Min/Max Age:	MEJIAS, JUAN C , PSY Provider Gender: Male License number: 26953 NPI: 1558560730 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: NEIGHBORHOOD HEALTHCARE 10039 VINE ST LAKESIDE, CA 92040-3120 Phone: (619) 390-9975 Fax: (858) 633-4690 After Hours Phone: (619) 390-9975 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M-F 8AM-5PM
	METZLER, CINDEA J , MFT Provider Gender: Female License number: LMFT38808 NPI: 1487690483	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
CINDEA J METZLER, LMFT
10653 PALM ROW DR
LAKESIDE, CA 92040-1638
Phone: (858) 254-6590
Fax:
After Hours Phone: (858)
254-6590
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: TU 7PM-8PM

MILLER BRUNETTO, HEIDI, PSY

Provider Gender: Female
License number: PSY26809
NPI: 1023250453
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
10039 VINE ST
LAKESIDE, CA 92040-3120
Phone: (619) 390-9975
Fax: (858) 633-4690
After Hours Phone: (619)
390-9975
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

PEDERSEN, SUESAN, MD

Provider Gender: Female
License number: A138369
NPI: 1558603837
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
10039 VINE ST
LAKESIDE, CA 92040-3120
Phone: (619) 390-9975
Fax: (858) 633-4690
After Hours Phone: (619)
390-9975
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

POSTLETHWAITE, ALEJANDRA, MD

Provider Gender: Female
License number: A88938
NPI: 1750566915
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
10039 VINE ST
LAKESIDE, CA 92040-3120
Phone: (619) 390-9975
Fax: (858) 633-4690
After Hours Phone: (619)
390-9975
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

RODARTE, GABRIEL, MD

Provider Gender: Male
License number: A87906
NPI: 1184649212
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
10039 VINE ST

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

LAKESIDE, CA 92040-3120

Phone: (619) 390-9975

Fax: (858) 633-4690

After Hours Phone: (619)

390-9975

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Nepali (Individual Language),

Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

ROSS, ANNE T , NPA

Provider Gender: Female

License number: 53359

NPI: 1447334883

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

10039 VINE ST

LAKESIDE, CA 92040-3120

Phone: (619) 390-9975

Fax: (858) 633-4690

After Hours Phone: (619)

390-9975

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Nepali (Individual Language),

Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

SINGH, PARDEEP, NPA

Provider Gender: Female

License number: 95010750

NPI: 1992279004

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

10039 VINE ST

LAKESIDE, CA 92040-3120

Phone: (619) 390-9975

Fax: (858) 633-4690

After Hours Phone: (619)

390-9975

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Nepali (Individual Language),

Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

STONE, CALVIN, MD

Provider Gender: Male

License number: 20A18127

NPI: 1275995870

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

10039 VINE ST

LAKESIDE, CA 92040-3120

Phone: (619) 390-9975

Fax: (858) 633-4690

After Hours Phone: (619)

390-9975

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Nepali (Individual Language),

Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

SUOZZO, JOSEPH J , PSY

Provider Gender: Male

License number: 18393

NPI: 1821013228

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

10039 VINE ST

LAKESIDE, CA 92040-3120

Phone: (619) 390-9975

Fax: (858) 633-4690

After Hours Phone: (619)

390-9975

Website:

www.beaconhealthoptions.com

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM </p>	<p> <i>Hours:</i> M-F 8AM-5PM THOMPSON, STEPHANIE G , CSW <i>Provider Gender:</i> Female <i>License number:</i> 75185 <i>NPI:</i> 1861938227 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: NEIGHBORHOOD HEALTHCARE 10039 VINE ST LAKESIDE, CA 92040-3120 <i>Phone:</i> (619) 390-9975 <i>Fax:</i> (858) 633-4690 <i>After Hours Phone:</i> (619) 390-9975 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM </p>	<p> HEALTHCARE 10039 VINE ST LAKESIDE, CA 92040-3120 <i>Phone:</i> (619) 390-9975 <i>Fax:</i> (858) 633-4690 <i>After Hours Phone:</i> (619) 390-9975 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM </p>
<p> THOMAS, PAULA M , CSW <i>Provider Gender:</i> Female <i>License number:</i> 29517 <i>NPI:</i> 1821389966 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: NEIGHBORHOOD HEALTHCARE 10039 VINE ST LAKESIDE, CA 92040-3120 <i>Phone:</i> (619) 390-9975 <i>Fax:</i> (858) 633-4690 <i>After Hours Phone:</i> (619) 390-9975 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information </p>	<p> VALLEZ BARLAM, ANDREA, PSY <i>Provider Gender:</i> Female <i>License number:</i> PSY9962 <i>NPI:</i> 1710902143 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: NEIGHBORHOOD HEALTHCARE 10039 VINE ST LAKESIDE, CA 92040-3120 <i>Phone:</i> (619) 390-9975 <i>Fax:</i> (858) 633-4690 <i>After Hours Phone:</i> (619) 390-9975 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), </p>	<p> VAQUERO, JUANA, PSY <i>Provider Gender:</i> Female <i>License number:</i> PSY28364 <i>NPI:</i> 1023459708 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: NEIGHBORHOOD HEALTHCARE 10039 VINE ST LAKESIDE, CA 92040-3120 <i>Phone:</i> (619) 390-9975 <i>Fax:</i> (858) 633-4690 <i>After Hours Phone:</i> (619) 390-9975 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), </p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

WILLIAMS, SHANTRICE M , NPA

Provider Gender: Female
License number: 19664
NPI: 1578865549
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NEIGHBORHOOD HEALTHCARE
10039 VINE ST
LAKESIDE, CA 92040-3120
Phone: (619) 390-9975
Fax: (858) 633-4690
After Hours Phone: (619) 390-9975
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

WOODWORTH, JENNIFER, PSY
Provider Gender: Female
License number: 26963
NPI: 1639362494
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
10039 VINE ST
LAKESIDE, CA 92040-3120
Phone: (619) 390-9975
Fax: (858) 633-4690
After Hours Phone: (619) 390-9975
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

LEMON GROVE

ABDULLAH, KERI, PSY
Provider Gender: Female
License number: 29990
NPI: 1699840587
Provider English Spoken: Yes
Provider Language(s) Spoken: FAMILY HEALTH CENTERS OF SAN DIEGO

7592 BROADWAY
LEMON GROVE, CA
91945-1604
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

AGUIRRE, LEAH B , CSW
Provider Gender: Female
License number: 74440
NPI: 1306151998
Provider English Spoken: Yes
Provider Language(s) Spoken: FAMILY HEALTH CENTERS OF SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA
91945-1604
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

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J. Directorio de proveedores de salud mental

Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

AGUIRRE, WENDY, CSW

Provider Gender: Female

License number: 74219

NPI: 1205946282

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

7592 BROADWAY
LEMON GROVE, CA
91945-1604

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)
515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

ALTERS, DENNIS, MD

Provider Gender: Male

License number: G36206

NPI: 1457371635

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

7592 BROADWAY
LEMON GROVE, CA
91945-1604

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)
515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

ARAGON, DARINKA M , MD

Provider Gender: Female

License number: A139241

NPI: 1114347291

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

7592 BROADWAY
LEMON GROVE, CA
91945-1604

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)
515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

ARIELLA, LYNDAR , PSY

Provider Gender: Female

License number: 19450

NPI: 1073518965

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

7592 BROADWAY
LEMON GROVE, CA
91945-1604

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)
515-2338

Website:

www.beaconhealthoptions.com

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

ASH, VIVIAN, CSW

Provider Gender: Female
License number: 14619
NPI: 1033623293
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 7592 BROADWAY
 LEMON GROVE, CA
 91945-1604
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):

Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM
ASUNCION, JENNIFER, CSW
Provider Gender: Male
License number: LCSW75956
NPI: 1083056279
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 7592 BROADWAY
 LEMON GROVE, CA
 91945-1604
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM
AUCOIN, DOUGLAS, CSW
Provider Gender: Male
License number: 24707
NPI: 1699007609
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 7592 BROADWAY
 LEMON GROVE, CA
 91945-1604
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM
AVILA, RADOMIR M , CSW
Provider Gender: Male
License number: 75520
NPI: 1487937330
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Portuguese, Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 7592 BROADWAY
 LEMON GROVE, CA
 91945-1604
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338

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 información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de
 Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p><i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p><i>License number:</i> 76466 <i>NPI:</i> 1558659797 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>
<p>BARCELOS ANTONIO, TIAGO, CSW <i>Provider Gender:</i> Male <i>License number:</i> 90529 <i>NPI:</i> 1194159871 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99</p>	<p>BARTHOLOMEW, SARAH C , CSW <i>Provider Gender:</i> Female <i>License number:</i> 86542 <i>NPI:</i> 1720339708 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>BERKSON, BARRIE, CSW <i>Provider Gender:</i> Female <i>License number:</i> 63313 <i>NPI:</i> 1922305465 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604</p>
<p><i>Min/Max Age:</i> 0/99</p>	<p>BENNETT, RACHEL Q , CSW <i>Provider Gender:</i> Female</p>	

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J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 Yes

Please contact provider for
 Accessibility information

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

BIRNBAUM, DEBORAH, MD

Provider Gender: Female

License number: 20A11387

NPI: 1639308265

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
 SAN DIEGO

7592 BROADWAY

LEMON GROVE, CA

91945-1604

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
 Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 Yes

Please contact provider for
 Accessibility information

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

BOND, ALAN, PSY

Provider Gender: Male

License number: PSY25805

NPI: 1881927184

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
 SAN DIEGO

7592 BROADWAY

LEMON GROVE, CA

91945-1604

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Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 Yes

Please contact provider for
 Accessibility information

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

BORREGO, DIANA E , NPA

Provider Gender: Female

License number: 95005019

NPI: 1184012866

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
 SAN DIEGO

7592 BROADWAY

LEMON GROVE, CA

91945-1604

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 Yes

Please contact provider for
 Accessibility information

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

BUBY, MYRA, CSW

Provider Gender: Female

License number: 23172

NPI: 1093747511

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
 SAN DIEGO

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

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515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

BURGOS, EDNA, CSW
Provider Gender: Female
License number: 85597
NPI: 1134591167
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA
91945-1604
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Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

**BUTERBAUGH, KRISTY L ,
CSW**
Provider Gender: Female
License number: 65477
NPI: 1346615838
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA
91945-1604
Phone: (619) 515-2338
Fax: (619) 702-8536
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515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):

Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM
CABREJOS, CLAUDIO, MD
Provider Gender: Male
License number: A71653
NPI: 1033133483
Provider English Spoken: Yes
Provider Language(s) Spoken:
Portuguese, Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA
91945-1604
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Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM
CARDENAS, ALONSO, MD
Provider Gender: Male
License number: A137940
NPI: 1811212145
Provider English Spoken: Yes

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J. Directorio de proveedores de salud mental

<p><i>Provider Language(s) Spoken:</i> <i>Phone:</i> (619) 515-2338 <i>Cultural Competency:</i> <i>Fax:</i> (619) 702-8536 FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p> <p>CARINO DIOKNO, RHODA, PSY <i>Provider Gender:</i> Female <i>License number:</i> 28073 <i>NPI:</i> 1629109483 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604</p>	<p><i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p> <p>CASTELLANOS, TERESITA D , CSW <i>Provider Gender:</i> Female <i>License number:</i> 82782 <i>NPI:</i> 1598165441 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p> <p>CHEN, ANGELA, MFT <i>Provider Gender:</i> Female <i>License number:</i> LMFT40923 <i>NPI:</i> 1811027956 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>
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J. Directorio de proveedores de salud mental

<p>CHRISTENSEN, MELISSA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 69616 <i>NPI:</i> 1922313394 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>7592 BROADWAY LEMON GROVE, CA 91945-1604 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p><i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>
<p>CROCKFORD, DANE, PSY <i>Provider Gender:</i> Male <i>License number:</i> 28313 <i>NPI:</i> 1780031831 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO</p>	<p>DALONSO, SANDRA L , CSW <i>Provider Gender:</i> Female <i>License number:</i> 82240 <i>NPI:</i> 1841797644 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes</p>	<p>DAN, WENDY L , CSW <i>Provider Gender:</i> Female <i>License number:</i> 26015 <i>NPI:</i> 1700224037 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes</p>

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J. Directorio de proveedores de salud mental

Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

DIAZ, LIZETH, CSW

Provider Gender: Female
License number: 97277
NPI: 1124457023

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA
91945-1604

Phone: (619) 515-2338
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American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

DOBOS, DAVID, MD

Provider Gender: Male
License number: G57276
NPI: 1548318348

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA
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Accepting New Patients: Yes

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Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

DRISCOLL, MICHAEL S , CSW

Provider Gender: Male

License number: 93951

NPI: 1659761880

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

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American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

DUNFORD, KATELYN C , MFT

Provider Gender: Female

License number: 126626

NPI: 1437517497

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

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J. Directorio de proveedores de salud mental

<p>Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p><i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604</p>	<p><i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com</p>
<p>DWYER, GEORGE, CSW <i>Provider Gender:</i> Male <i>License number:</i> 70988 <i>NPI:</i> 1437606126 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com</p>	<p><i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes</p>	<p><i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>
<p><i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>FAJARDO, JACQUELINE M , CSW <i>Provider Gender:</i> Female <i>License number:</i> 87322 <i>NPI:</i> 1215342118 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604</p>	<p>FEDEROFF, MONICA, MD <i>Provider Gender:</i> Female <i>License number:</i> A164677 <i>NPI:</i> 1912404492 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com</p>
<p>ERBE, EDWARD J , MD <i>Provider Gender:</i> Male <i>License number:</i> G76886 <i>NPI:</i> 1952318289 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i></p>	<p><i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian,</p>	<p><i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian,</p>

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J. Directorio de proveedores de salud mental

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

FLORES, MARY LUPE, CSW

Provider Gender: Female

License number: 19815

NPI: 1134147457

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

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Website:

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

FRANCO, RODRIGO, CSW

Provider Gender: Male

License number: 71548

NPI: 1952736043

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

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Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

FUKUI, TOMONORI, MD

Provider Gender: Male

License number: 75713

NPI: 1366519670

Provider English Spoken: Yes

Provider Language(s) Spoken:

Japanese, Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

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LEMON GROVE, CA

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

GALAPON, DIXIE L , PSY

Provider Gender: Female

License number: 16711

NPI: 1174646301

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

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91945-1604

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Site English Spoken: Yes

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J. Directorio de proveedores de salud mental

<p><i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p> <p>GAUD, KRISTINA G , MD <i>Provider Gender:</i> Female <i>License number:</i> 170667 <i>NPI:</i> 1508151598 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p><i>Accessibility information</i> <i>Hours:</i> M-F 8:30AM-5PM</p> <p>GLASSMAN, JAGA NATH, MD <i>Provider Gender:</i> Male <i>License number:</i> G55004 <i>NPI:</i> 1558409771 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p> <p>GLEASON, SHEILA, PSY <i>Provider Gender:</i> Female <i>License number:</i> 13685 <i>NPI:</i> 1366641813 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF</p>	<p>SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p> <p>GONZALES, JULIANA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 83254 <i>NPI:</i> 1821487406 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com</p>
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J. Directorio de proveedores de salud mental

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

GONZALEZ, ANDREA, CSW

Provider Gender: Female
License number: 97593
NPI: 1326346198
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 7592 BROADWAY
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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

GOTTUNG, CHRISTINA, CSW

Provider Gender: Female
License number: 87716
NPI: 1134597123
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 7592 BROADWAY
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 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No

Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

GUTIERREZ, APRIL P , CSW

Provider Gender: Female
License number: 86166
NPI: 1356749949
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 7592 BROADWAY
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 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No

Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

HARRIMAN, CORAL, PSY

Provider Gender: Female
License number: 26098
NPI: 1417373069
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 7592 BROADWAY
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J. Directorio de proveedores de salud mental

<p><i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p><i>Restrictions</i> <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p> <p>HEDMAN, TERI LEE, CSW <i>Provider Gender:</i> U <i>License number:</i> 74947 <i>NPI:</i> 1154811636 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p><i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>
<p>HAYDEN WADE, HELEN, PSY <i>Provider Gender:</i> Female <i>License number:</i> PSY19313 <i>NPI:</i> 1366951105 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender</p>	<p><i>Restrictions</i> <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p> <p>HORN BROOK, JESSICA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 26598 <i>NPI:</i> 1134401805</p>	<p>HUBER, REBECCA, MD <i>Provider Gender:</i> Female <i>License number:</i> A133711 <i>NPI:</i> 1174960686 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604</p>

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J. Directorio de proveedores de salud mental

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 Yes

Please contact provider for
 Accessibility information

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

HUDSON, KATE, CSW

Provider Gender: Female

License number: 83712

NPI: 1194159384

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
 SAN DIEGO

7592 BROADWAY

LEMON GROVE, CA

91945-1604

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American Sign Language, Farsi,
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Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 Yes

Please contact provider for
 Accessibility information

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

ISHIDA, YO, CSW

Provider Gender: Female

License number: 29526

NPI: 1225154081

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
 SAN DIEGO

7592 BROADWAY

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TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 Yes

Please contact provider for
 Accessibility information

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

JALAN, DEVESH, MD

Provider Gender: Male

License number: A167754

NPI: 1083092134

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
 SAN DIEGO

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American Sign Language, Farsi,
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 Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 Yes

Please contact provider for

Accessibility information

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

JAMES, CHRISTINE E , MD

Provider Gender: Female

License number: 20A13931

NPI: 1679834022

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
 SAN DIEGO

7592 BROADWAY

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J. Directorio de proveedores de salud mental

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TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

JASSO-RAMIREZ, MARTHA, CSW
Provider Gender: Female
License number: 26493
NPI: 1871772020
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
7592 BROADWAY
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Japanese, Portuguese, Russian,
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TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

JONES, ADELE, PSY
Provider Gender: Female
License number: 25311
NPI: 1558602490
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
7592 BROADWAY
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Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

JONES, ATAVIA L , CSW
Provider Gender: Female
License number: LCSW76796
NPI: 1952734899
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA
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Site Language(s) Spoken:
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Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

JONES, MICHAEL A , CSW
Provider Gender: Male
License number: LCS 22452
NPI: 1548205719
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

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J. Directorio de proveedores de salud mental

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Accepting New Patients: Yes

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American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

KEI, JUSTIN, MD

Provider Gender: Male

License number: A138266

NPI: 1396150041

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

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TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

KLOBERDANZ, KELSEY L , NPA

Provider Gender: Female

License number: 95005293

NPI: 1235672502

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

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TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

KNIGHT, MARK ANTHONY, MD

Provider Gender: Male

License number: A94460

NPI: 1851573554

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

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American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

KOH, STEVE H , MD

Provider Gender: Male

License number: A103468

NPI: 1467650473

Provider English Spoken: Yes

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J. Directorio de proveedores de salud mental

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Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

KYLE, MARCIE, CSW

Provider Gender: Female
License number: LCSW78555
NPI: 1174981500
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
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TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

LEBLANC, ASHLEY B , CSW

Provider Gender: Female
License number: 83136
NPI: 1275905622
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
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Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions

Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

LIDSTONE, PAVEN, MD

Provider Gender: Female
License number: 161149
NPI: 1942662093
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 7592 BROADWAY
 LEMON GROVE, CA
 91945-1604
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

LIM, SANDRA S , MD

Provider Gender: Female
License number: 20A13075
NPI: 1083963094

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J. Directorio de proveedores de salud mental

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 7592 BROADWAY
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Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

LIPPERT, HEATHER M , CSW
Provider Gender: Female
License number: 22526
NPI: 1093991663
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 7592 BROADWAY
 LEMON GROVE, CA
 91945-1604

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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

LOEB, CINDY, CSW
Provider Gender: Female
License number: 75333
NPI: 1619108511
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 7592 BROADWAY
 LEMON GROVE, CA
 91945-1604
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Website:
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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian,

Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

LYDIARD, JESSICA, MD
Provider Gender: Female
License number: A171775
NPI: 1841731296
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 7592 BROADWAY
 LEMON GROVE, CA
 91945-1604
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 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

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J. Directorio de proveedores de salud mental

LYONS, KEITH E , CSW

Provider Gender: Male
License number: 92724
NPI: 1538704002
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA
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515-2338
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Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

MACMASTER, LINDSAY, PSY

Provider Gender: Female
License number: 25570
NPI: 1659520179
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
7592 BROADWAY

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Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

MAHONEY, PATRICIA A , CSW

Provider Gender: Female
License number: 22296
NPI: 1700200888
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
7592 BROADWAY
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Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

MAIETTA, KATHLEEN H , CSW

Provider Gender: Female
License number: 88399
NPI: 1487128617
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
7592 BROADWAY
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Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information

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J. Directorio de proveedores de salud mental

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

MARTIR, MICHEL, CSW

Provider Gender: Female

License number: 73174

NPI: 1356528434

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

7592 BROADWAY

LEMON GROVE, CA

91945-1604

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Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

MCADAMS, HILDA, NPA

Provider Gender: Female

License number: 14201

NPI: 1396838082

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

7592 BROADWAY

LEMON GROVE, CA

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515-2338

Website:

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

MCHENRY, KELLY, CSW

Provider Gender: Female

License number: 29689

NPI: 1851544340

Provider English Spoken: Yes

Provider Language(s) Spoken:

American Sign Language

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

7592 BROADWAY

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515-2338

Website:

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

MEJIA, RITA I, MFT

Provider Gender: Female

License number: 99697

NPI: 1952741506

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

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J. Directorio de proveedores de salud mental

Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	<i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	<i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM
MENDEZ, ANDRES G , PSY <i>Provider Gender:</i> Male <i>License number:</i> 28907 <i>NPI:</i> 1841482692 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	MILLICAN, RUTH, PSY <i>Provider Gender:</i> Female <i>License number:</i> 25354 <i>NPI:</i> 1346472305 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604	MODAD, ALBERT, PSY <i>Provider Gender:</i> Female <i>License number:</i> 29697 <i>NPI:</i> 1629453691 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian,
MERRILL, SARAH M , CSW <i>Provider Gender:</i> Female <i>License number:</i> 79014 <i>NPI:</i> 1639403884		

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J. Directorio de proveedores de salud mental

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

MORALES MORENO, MINERVA, CSW

Provider Gender: Female

License number: 63550

NPI: 1841337565

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

7592 BROADWAY

LEMON GROVE, CA

91945-1604

Phone: (619) 515-2338

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After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

MORRISON, TYLER E , MD

Provider Gender: Male

License number: A144917

NPI: 1912391814

Provider English Spoken: Yes

Provider Language(s) Spoken:

Japanese

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

7592 BROADWAY

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

NADEAU MANNING, JULIE, CSW

Provider Gender: Female

License number: 25094

NPI: 1275609760

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

7592 BROADWAY

LEMON GROVE, CA

91945-1604

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American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

NAZARIO, JACOBETH, PSY

Provider Gender: Female

License number: PSY32092

NPI: 1326648684

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

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J. Directorio de proveedores de salud mental

<p><i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p><i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>
<p>NOUHI, NUSHA, PSY <i>Provider Gender:</i> Female <i>License number:</i> 27670 <i>NPI:</i> 1942433917 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i></p>	<p>NWANGANGA, OKECHUKU R , CSW <i>Provider Gender:</i> Male <i>License number:</i> 27072 <i>NPI:</i> 1285984450 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>OLIVER, ELIZABETH, CSW <i>Provider Gender:</i> Female <i>License number:</i> 66862 <i>NPI:</i> 1326296351 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338</p>
<p><i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>OBRYAN, KELLY, PSY <i>Provider Gender:</i> Female <i>License number:</i> 24966 <i>NPI:</i> 1093882698 <i>Provider English Spoken:</i> Yes</p>	

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J. Directorio de proveedores de salud mental

<p><i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p><i>Restrictions</i> <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p><i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>
<p>OMORODIN, AISHA, MD <i>Provider Gender:</i> Female <i>License number:</i> A169651 <i>NPI:</i> 1629500301 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions</p>	<p>PINEDO, YANELI, CSW <i>Provider Gender:</i> Male <i>License number:</i> 91103 <i>NPI:</i> 1710361712 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>PROCTOR, MELISSA S , CSW <i>Provider Gender:</i> Female <i>License number:</i> 62650 <i>NPI:</i> 1336188655 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604</p>
<p>PRASEK, LAUREN, NPA <i>Provider Gender:</i> Female <i>License number:</i> 95004145 <i>NPI:</i> 1932566031</p>	<p><i>Restrictions</i> <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	

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J. Directorio de proveedores de salud mental

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 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

PROOSASELTS, YULIYA, MD
 Provider Gender: Female
 License number: A133675
 NPI: 1952747875
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Russian
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 7592 BROADWAY
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 American Sign Language, Farsi,

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 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

RAMOS, ELIZABETH, CSW
 Provider Gender: Female
 License number: 73374
 NPI: 1992046890
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
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 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information

Hours: M-F 8:30AM-5PM
RODRIGUEZ, CHRISTINE, PSY
 Provider Gender: Female
 License number: 30472
 NPI: 1568656619
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
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 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM
ROSENFARB, BARBARA, CSW
 Provider Gender: Female
 License number: 28590
 NPI: 1447477781
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
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American Sign Language, Farsi,
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Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

ROZELL, KATHY, CSW
Provider Gender: Female
License number: 25068
NPI: 1578603973
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
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Site Language(s) Spoken:
American Sign Language, Farsi,
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TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

SACHS, MELISSA R , CSW
Provider Gender: Female
License number: 76968
NPI: 1649760356
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
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TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for

Accessibility information
Hours: M-F 8:30AM-5PM
SAMADI, ESTHER, MD
Provider Gender: Female
License number: A113657
NPI: 1396986204
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
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American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM
SEPULVEDA, JOE, MD
Provider Gender: Male
License number: A113283
NPI: 1306165402
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:

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J. Directorio de proveedores de salud mental

<p>FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com</p> <p>Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p> <p>SIPIN, ELVIRA P , CSW Provider Gender: Female License number: LCS15308 NPI: 1477759892 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com</p> <p>Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p> <p>STEWART, ANDREA M , MFT Provider Gender: U License number: 45174 NPI: 1508993122 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com</p> <p>Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>
<p>SIMPSON, JENNIFER, CSW Provider Gender: Female License number: 82678 NPI: 1740765866 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com</p>	<p>Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p> <p>TAHBAZ, ASH, MFT Provider Gender: U License number: 87601 NPI: 1205294543 Provider English Spoken: Yes Provider Language(s) Spoken:</p>	<p>Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>

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J. Directorio de proveedores de salud mental

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 American Sign Language, Farsi,
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 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

**THICKSTUN, MARY SUSAN,
 CSW**
Provider Gender: Female
License number: 21573
NPI: 1437354875
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
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TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

THIESSEN, BRUCE L , PSY
Provider Gender: U
License number: 14259
NPI: 1841541984
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
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 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender

Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

TONG, GARRICK, MD
Provider Gender: Male
License number: A102192
NPI: 1831361278
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish, Yue Chinese
Cultural Competency:
 FAMILY HEALTH CENTERS OF
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TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
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Hours: M-F 8:30AM-5PM

TORRES, LAURA, CSW
Provider Gender: Female
License number: 65059

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J. Directorio de proveedores de salud mental

NPI: 1568612943
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
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 SAN DIEGO
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 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

TRIANA, JENNIFER, CSW

Provider Gender: Female
 License number: 88589
 NPI: 1073844460
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
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 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
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 Hours: M-F 8:30AM-5PM

TROYER, EMILY, PSY

Provider Gender: Female
 License number: A149101
 NPI: 1326484437
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
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 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

WAUGH, BRANDON, CSW

Provider Gender: Male
 License number: 83457
 NPI: 1619459187
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
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J. Directorio de proveedores de salud mental

<p>WEAVER, JHOSMARA A , CSW <i>Provider Gender:</i> Female <i>License number:</i> 77233 <i>NPI:</i> 1982848594 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>LEMON GROVE, CA 91945-1604 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>
<p>WEBSTER, KRISTIN K , CSW <i>Provider Gender:</i> Female <i>License number:</i> LCSW16118 <i>NPI:</i> 1902336837 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY</p>	<p>WITT, ANNETTE, CSW <i>Provider Gender:</i> Female <i>License number:</i> 15770 <i>NPI:</i> 1912263468 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i></p>	<p>WOLF, CELIA C , NPA <i>Provider Gender:</i> Female <i>License number:</i> 95001899 <i>NPI:</i> 1245635564 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

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

WOOD, KEEGAN, NPA

Provider Gender: Male

License number: NP95006887

NPI: 1417471459

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

7592 BROADWAY

LEMON GROVE, CA

91945-1604

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

YALYSHAVA, VOLHA, CSW

Provider Gender: Female

License number: LCSW69810

NPI: 1821392002

Provider English Spoken: Yes

Provider Language(s) Spoken:

Russian

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

7592 BROADWAY

LEMON GROVE, CA

91945-1604

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

ZAYAS, GILBERTO, MD

Provider Gender: Male

License number: A136760

NPI: 1508174970

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

7592 BROADWAY

LEMON GROVE, CA

91945-1604

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

NATIONAL CITY

BAHENA, SANDRA, PSY

Provider Gender: Female

License number: 29792

NPI: 1073742268

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

LA MAESTRA COMMUNITY

HEALTH CENTERS

217 HIGHLAND AVE

NATIONAL CITY, CA

91950-1518

Phone: (619) 434-7308

Fax: (619) 434-7308

After Hours Phone: (619)

434-7308

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

TDD: No

Min/Max Age: 0/64

Gender Restriction: No Gender
Restrictions

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-6PM

BARI, MOHAMMED A , MD

Provider Gender: Male
License number: A46396
NPI: 1679588370
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi
Cultural Competency: PACIFIC HEALTH SYSTEMS LP
1908 SWEETWATER RD
NATIONAL CITY, CA
91950-7628
Phone: (619) 327-0146
Fax: (619) 327-0150
After Hours Phone: (619) 327-0146
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Panjabi, Punjabi
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 9AM-5PM

BARI, MOHAMMED A , MD

Provider Gender: Male
License number: A46396
NPI: 1679588370
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi

Cultural Competency: PACIFIC HEALTH SYSTEMS LP
610 EUCLID AVE STE 200
NATIONAL CITY, CA
91950-2951
Phone: (619) 267-9257
Fax: (619) 267-9273
After Hours Phone: (619) 267-9257
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

BARTHOLOMEW, SARAH C , CSW

Provider Gender: Female
License number: 86542
NPI: 1720339708
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
1000 EUCLID AVE
NATIONAL CITY, CA
91950-3856
Phone: (619) 515-2399
Fax: (619) 269-0199
After Hours Phone: (619) 515-2399
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken: Portuguese, Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

BHATIA, PRAKASH K , MD

Provider Gender: Male
License number: A74848
NPI: 1164464137
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: PACIFIC HEALTH SYSTEMS LP
1908 SWEETWATER RD
NATIONAL CITY, CA
91950-7628
Phone: (619) 327-0146
Fax: (619) 327-0150
After Hours Phone: (619) 327-0146
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Panjabi, Punjabi
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 9AM-5PM

BHATIA, PRAKASH K , MD

Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: A74848
NPI: 1164464137
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
PACIFIC HEALTH SYSTEMS LP
610 EUCLID AVE STE 200
NATIONAL CITY, CA
91950-2951
Phone: (619) 267-9257
Fax: (619) 267-9273
After Hours Phone: (619)
267-9257
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

BHATIA, PRAKASH K , MD

Provider Gender: Male
License number: A74848
NPI: 1164464137
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
BHATIA HEALTH SERVICES A
MEDICAL CORPORATION
2345 E 8TH ST STE 111
NATIONAL CITY, CA
91950-2861
Phone: (619) 267-9108
Fax: (619) 267-9273
After Hours Phone: (619)
267-9108

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours:

BINDAL, ANKUR, MD

Provider Gender: Male
License number: A 132533
NPI: 1588820880
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi, Panjabi, Punjabi
Cultural Competency:
PACIFIC HEALTH SYSTEMS LP
1908 SWEETWATER RD
NATIONAL CITY, CA
91950-7628
Phone: (619) 327-0146
Fax: (619) 327-0150
After Hours Phone: (619)
327-0146
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Panjabi, Punjabi
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information

Hours: M-F 9AM-5PM

BOBO, JERRY C , MD

Provider Gender: Male
License number: G84025
NPI: 1194836429
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
PACIFIC HEALTH SYSTEMS LP
610 EUCLID AVE STE 200
NATIONAL CITY, CA
91950-2951
Phone: (619) 267-9257
Fax: (619) 267-9273
After Hours Phone: (619)
267-9257
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

CABREJOS, CLAUDIO, MD

Provider Gender: Male
License number: A71653
NPI: 1033133483
Provider English Spoken: Yes
Provider Language(s) Spoken:
Portuguese, Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1000 EUCLID AVE
NATIONAL CITY, CA
91950-3856

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2399
Fax: (619) 269-0199
After Hours Phone: (619) 515-2399
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Portuguese, Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

CARBONELL, SONIA, PSY

Provider Gender: Female
License number: 19752
NPI: 1902976343
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
LA MAESTRA COMMUNITY
HEALTH CENTERS
217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518
Phone: (619) 434-7308
Fax: (619) 434-7308
After Hours Phone: (619)
434-7308
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
TDD: No
Min/Max Age: 0/64

Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-6PM

CARINO DIOKNO, RHODA, PSY

Provider Gender: Female
License number: 28073
NPI: 1629109483
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1000 EUCLID AVE
NATIONAL CITY, CA
91950-3856
Phone: (619) 515-2399
Fax: (619) 269-0199
After Hours Phone: (619)
515-2399
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Portuguese, Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

CHAUDHRI, YASHWANT, MD

Provider Gender: Male
License number: A67679
NPI: 1043258429

Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi, Urdu
Cultural Competency:
YASHWANT CHAUDRI MD A
PROF CORP
3035 E 8TH ST
NATIONAL CITY, CA
91950-3026
Phone: (619) 596-9890
Fax: (619) 596-9893
After Hours Phone: (619)
596-9890
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Urdu
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M,TH 8AM-4PM

CHAUDHRI, YASHWANT, MD

Provider Gender: Male
License number: A67679
NPI: 1043258429
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi, Urdu
Cultural Competency:
OPERATION SAMAHAN
2743 HIGHLAND AVE
NATIONAL CITY, CA
91950-7410
Phone: (844) 200-2426
Fax: (858) 695-9074
After Hours Phone: (844)
200-2426

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Urdu <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M,TU,TH,F 8:30AM-5:30PM, W 10AM-7PM</p>	<p>Accessibility information <i>Hours:</i> M,TU,TH,F 8:30AM-5:30PM, W 10AM-7PM</p>	<p>1000 EUCLID AVE NATIONAL CITY, CA 91950-3856 <i>Phone:</i> (619) 515-2399 <i>Fax:</i> (619) 269-0199 <i>After Hours Phone:</i> (619) 515-2399 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Portuguese, Spanish <i>TDD:</i> No <i>Min/Max Age:</i> 19/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>
<p>CHAUHAN, SMIT S , MD <i>Provider Gender:</i> Male <i>License number:</i> A123312 <i>NPI:</i> 1700083391 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: OPERATION SAMAHAN 2743 HIGHLAND AVE NATIONAL CITY, CA 91950-7410 <i>Phone:</i> (844) 200-2426 <i>Fax:</i> (858) 695-9074 <i>After Hours Phone:</i> (844) 200-2426 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Urdu <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for</p>	<p>CUELLAR, BETHANY, MFT <i>Provider Gender:</i> Female <i>License number:</i> 79616 <i>NPI:</i> 1720388374 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: LA MAESTRA COMMUNITY HEALTH CENTERS 217 HIGHLAND AVE NATIONAL CITY, CA 91950-1518 <i>Phone:</i> (619) 434-7308 <i>Fax:</i> (619) 434-7308 <i>After Hours Phone:</i> (619) 434-7308 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish <i>TDD:</i> No <i>Min/Max Age:</i> 0/64 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-6PM</p>	<p>DOLNAK, DOUGLAS R , MD <i>Provider Gender:</i> Male <i>License number:</i> 20A6059 <i>NPI:</i> 1316147085 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: PACIFIC HEALTH SYSTEMS LP 502 EUCLID AVE STE 302 NATIONAL CITY, CA 91950-2995 <i>Phone:</i> (619) 327-0146 <i>Fax:</i> (619) 327-0150 <i>After Hours Phone:</i> (619) 327-0146 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> TDD: No <i>Min/Max Age:</i></p>
<p>DIAZ, LIZETH, CSW <i>Provider Gender:</i> Female <i>License number:</i> 97277 <i>NPI:</i> 1124457023 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO</p>	<p><i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO</p>	<p><i>Min/Max Age:</i></p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 9AM-5PM

DUNFORD, KATELYN C , MFT

Provider Gender: Female
License number: 126626
NPI: 1437517497
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
1000 EUCLID AVE
NATIONAL CITY, CA
91950-3856
Phone: (619) 515-2399
Fax: (619) 269-0199
After Hours Phone: (619) 515-2399
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Portuguese, Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

FEDEROFF, MONICA, MD

Provider Gender: Female
License number: A164677
NPI: 1912404492
Provider English Spoken: Yes

Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
1000 EUCLID AVE
NATIONAL CITY, CA
91950-3856
Phone: (619) 515-2399
Fax: (619) 269-0199
After Hours Phone: (619) 515-2399
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Portuguese, Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

GAUD, KRISTINA G , MD

Provider Gender: Female
License number: 170667
NPI: 1508151598
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
1000 EUCLID AVE
NATIONAL CITY, CA
91950-3856
Phone: (619) 515-2399
Fax: (619) 269-0199
After Hours Phone: (619) 515-2399
Website: www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Portuguese, Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

GLASSMAN, JAGA NATH, MD

Provider Gender: Male
License number: G55004
NPI: 1558409771
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
1000 EUCLID AVE
NATIONAL CITY, CA
91950-3856
Phone: (619) 515-2399
Fax: (619) 269-0199
After Hours Phone: (619) 515-2399
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Portuguese, Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

GONZALEZ, ANDREA, CSW

Provider Gender: Female
License number: 97593
NPI: 1326346198
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
1000 EUCLID AVE
NATIONAL CITY, CA
91950-3856
Phone: (619) 515-2399
Fax: (619) 269-0199
After Hours Phone: (619) 515-2399
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Portuguese, Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

GRAHAM, DEBRA JEANNE, NPA

Provider Gender: Female
License number: NP15657
NPI: 1790757623
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
OPERATION SAMAHAN
2743 HIGHLAND AVE

NATIONAL CITY, CA
91950-7410
Phone: (844) 200-2426
Fax: (858) 695-9074
After Hours Phone: (844) 200-2426
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Urdu
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M,TU,TH,F 8:30AM-5:30PM, W 10AM-7PM

HODGE, ROGER G , PSY

Provider Gender: Male
License number: 26148
NPI: 1306096714
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
OPERATION SAMAHAN
2743 HIGHLAND AVE
NATIONAL CITY, CA
91950-7410
Phone: (844) 200-2426
Fax: (858) 695-9074
After Hours Phone: (844) 200-2426
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Urdu
TDD: No

Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M,TU,TH,F 8:30AM-5:30PM, W 10AM-7PM

KUGEL, SAMUEL, MD

Provider Gender: Male
License number: A54412
NPI: 1497813968
Provider English Spoken: Yes
Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency:
KUGEL, SAMUEL
502 EUCLID AVE STE 305
NATIONAL CITY, CA
91950-8901
Phone: (619) 472-2600
Fax: (619) 472-5700
After Hours Phone: (619) 472-2600
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Portuguese, Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M,TU,F 9:30AM-5:30PM, W,TH 9AM-5:30PM

LIDSTONE, PAVEN, MD

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>License number: 161149 NPI: 1942662093 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1000 EUCLID AVE NATIONAL CITY, CA 91950-3856 Phone: (619) 515-2399 Fax: (619) 269-0199 After Hours Phone: (619) 515-2399 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Portuguese, Spanish TDD: No Min/Max Age: 19/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>Phone: (619) 515-2399 Fax: (619) 269-0199 After Hours Phone: (619) 515-2399 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Portuguese, Spanish TDD: No Min/Max Age: 19/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>No Please contact provider for Accessibility information Hours: M-F 8AM-5PM</p>
<p>LYDIARD, JESSICA, MD Provider Gender: Female License number: A171775 NPI: 1841731296 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1000 EUCLID AVE NATIONAL CITY, CA 91950-3856</p>	<p>MAPLES, RANDI C , PSY Provider Gender: Female License number: 22630 NPI: 1023037561 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: PACIFIC HEALTH SYSTEMS LP 610 EUCLID AVE STE 200 NATIONAL CITY, CA 91950-2951 Phone: (619) 267-9257 Fax: (619) 267-9273 After Hours Phone: (619) 267-9257 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Hindi TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL):</p>	<p>MCADAMS, HILDA, NPA Provider Gender: Female License number: 14201 NPI: 1396838082 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1000 EUCLID AVE NATIONAL CITY, CA 91950-3856 Phone: (619) 515-2399 Fax: (619) 269-0199 After Hours Phone: (619) 515-2399 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Portuguese, Spanish TDD: No Min/Max Age: 19/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>
		<p>MEJIAS, JUAN C , PSY Provider Gender: Male License number: 26953 NPI: 1558560730 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish</p>

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J. Directorio de proveedores de salud mental

Cultural Competency:
 LA MAESTRA COMMUNITY
 HEALTH CENTERS
 217 HIGHLAND AVE
 NATIONAL CITY, CA
 91950-1518
Phone: (619) 434-7308
Fax: (619) 434-7308
After Hours Phone: (619)
 434-7308
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish
TDD: No
Min/Max Age: 0/64
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-6PM

MIRANDA, CYNTHIA, PSY

Provider Gender: Female
License number: 21188
NPI: 1023186970
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 LA MAESTRA COMMUNITY
 HEALTH CENTERS
 217 HIGHLAND AVE
 NATIONAL CITY, CA
 91950-1518
Phone: (619) 434-7308
Fax: (619) 434-7308
After Hours Phone: (619)
 434-7308
Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish
TDD: No
Min/Max Age: 0/64
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-6PM

NIDAY, TAKESHIA C , MD

Provider Gender: Female
License number: A113548
NPI: 1932429289
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 TAKESHIA NIDAY
 2345 E 8TH ST STE 111
 NATIONAL CITY, CA
 91950-2861
Phone: (619) 267-9257
Fax:
After Hours Phone: (619)
 267-9257
Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours:

REID, EMILY, NPA

Provider Gender: Female
License number: 95002766
NPI: 1083081467
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 LA MAESTRA COMMUNITY
 HEALTH CENTERS
 217 HIGHLAND AVE
 NATIONAL CITY, CA
 91950-1518
Phone: (619) 434-7308
Fax: (619) 434-7308
After Hours Phone: (619)
 434-7308
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish
TDD: No
Min/Max Age: 0/64
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-6PM

SALGUERO GALLAND, MARIO L , MD

Provider Gender: Male
License number: A122101
NPI: 1487947826
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 LA MAESTRA COMMUNITY
 HEALTH CENTERS
 217 HIGHLAND AVE
 NATIONAL CITY, CA
 91950-1518

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J. Directorio de proveedores de salud mental

Phone: (619) 434-7308
Fax: (619) 434-7308
After Hours Phone: (619) 434-7308
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
TDD: No
Min/Max Age: 0/64
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
No
Please contact provider for Accessibility information
Hours: M-F 8AM-6PM

SEMENIUK, CHARMAINE I, MD

Provider Gender: Female
License number: C50442
NPI: 1215012836
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
PACIFIC HEALTH SYSTEMS LP
610 EUCLID AVE STE 200
NATIONAL CITY, CA
91950-2951
Phone: (619) 267-9257
Fax: (619) 267-9273
After Hours Phone: (619) 267-9257
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions

American Sign Language (ASL):
No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

SWEENEY, ZSA ZSA, NPA

Provider Gender: Female
License number: 95007730
NPI: 1003159344
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
LA MAESTRA COMMUNITY HEALTH CENTERS
217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518
Phone: (619) 434-7308
Fax: (619) 434-7308
After Hours Phone: (619) 434-7308

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
TDD: No
Min/Max Age: 0/64
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
No
Please contact provider for Accessibility information
Hours: M-F 8AM-6PM

TRIANA, JENNIFER, CSW

Provider Gender: Female
License number: 88589
NPI: 1073844460
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish

Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
1000 EUCLID AVE
NATIONAL CITY, CA
91950-3856

Phone: (619) 515-2399
Fax: (619) 269-0199
After Hours Phone: (619) 515-2399
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Portuguese, Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions

American Sign Language (ASL):
No
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

TUCKER, MEGAN, PSY

Provider Gender: Female
License number: 27333
NPI: 1861877516
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
LA MAESTRA COMMUNITY HEALTH CENTERS
217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518
Phone: (619) 434-7308
Fax: (619) 434-7308
After Hours Phone: (619) 434-7308
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

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J. Directorio de proveedores de salud mental

Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
TDD: No
Min/Max Age: 0/64
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-6PM

OCEANSIDE

ALTAMIRANO, LEON, PSY
Provider Gender: Male
License number: 23734
NPI: 1619271517
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
3220 MISSION AVE STE 1
OCEANSIDE, CA 92058-1354
Phone: (760) 736-6767
Fax: (760) 471-8946
After Hours Phone: (760)
736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM
ALTAMIRANO, LEON, PSY
Provider Gender: Male
License number: 23734
NPI: 1619271517
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
619 CROUCH ST STE 100
OCEANSIDE, CA 92054-4460
Phone: (760) 736-6767
Fax: (760) 566-1501
After Hours Phone: (760)
736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 7:30AM-6:30PM

ALTAMIRANO, LEON, PSY
Provider Gender: Male
License number: 23734
NPI: 1619271517
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
605 CROUCH ST

OCEANSIDE, CA 92054-4415
Phone: (760) 736-6767
Fax: (760) 757-3004
After Hours Phone: (760)
736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-W 8AM-7PM, TH-SA
8AM-5PM

ALTAMIRANO, LEON, PSY
Provider Gender: Male
License number: 23734
NPI: 1619271517
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
2210 MESA DR STE 300
OCEANSIDE, CA 92054-3701
Phone: (760) 966-3306
Fax: (760) 966-3340
After Hours Phone: (760)
966-3306
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 7:30AM-8PM, SA 8AM-4:30PM

BRAILOW, ANTHONY G , PSY

Provider Gender: Male
License number: 12521
NPI: 1154356608
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
BRAILOW, ANTHONY
2181 S EL CAMINO REAL STE 101
OCEANSIDE, CA 92054-6267
Phone: (760) 622-9662
Fax: (760) 650-7363
After Hours Phone: (760) 622-9662
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age: 0/64
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: TU-SA 9:30AM-7:30PM

BURCIAGA, HENRY, MFT

Provider Gender: Male
License number: MFT19940
NPI: 1487785705
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH SERVICES
619 CROUCH ST STE 100
OCEANSIDE, CA 92054-4460
Phone: (760) 736-6767
Fax: (760) 566-1501
After Hours Phone: (760) 736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-TH 7:30AM-6:30PM

BURCIAGA, HENRY, MFT

Provider Gender: Male
License number: MFT19940
NPI: 1487785705
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH SERVICES
2210 MESA DR STE 300
OCEANSIDE, CA 92054-3701
Phone: (760) 966-3306
Fax: (760) 966-3340
After Hours Phone: (760) 966-3306
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 7:30AM-8PM, SA 8AM-4:30PM

BURCIAGA, HENRY, MFT

Provider Gender: Male
License number: MFT19940
NPI: 1487785705
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH SERVICES
3220 MISSION AVE STE 1
OCEANSIDE, CA 92058-1354
Phone: (760) 736-6767
Fax: (760) 471-8946
After Hours Phone: (760) 736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CAI, SHEILA X , MD

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J. Directorio de proveedores de salud mental

Provider Gender: Female
License number: C149845
NPI: 1780625012
Provider English Spoken: Yes
Provider Language(s) Spoken: Chinese
Cultural Competency:
NORTH COUNTY HEALTH SERVICES
3220 MISSION AVE STE 1
OCEANSIDE, CA 92058-1354
Phone: (760) 736-6767
Fax: (760) 471-8946
After Hours Phone: (760) 736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CAI, SHEILA X , MD

Provider Gender: Female
License number: C149845
NPI: 1780625012
Provider English Spoken: Yes
Provider Language(s) Spoken: Chinese
Cultural Competency:
NORTH COUNTY HEALTH SERVICES
2210 MESA DR STE 300
OCEANSIDE, CA 92054-3701

Phone: (760) 966-3306
Fax: (760) 966-3340
After Hours Phone: (760) 966-3306
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 7:30AM-8PM, SA 8AM-4:30PM

CAI, SHEILA X , MD

Provider Gender: Female
License number: C149845
NPI: 1780625012
Provider English Spoken: Yes
Provider Language(s) Spoken: Chinese
Cultural Competency:
NORTH COUNTY HEALTH SERVICES
605 CROUCH ST
OCEANSIDE, CA 92054-4415
Phone: (760) 736-6767
Fax: (760) 757-3004
After Hours Phone: (760) 736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age:

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-W 8AM-7PM, TH-SA 8AM-5PM

CAI, SHEILA X , MD

Provider Gender: Female
License number: C149845
NPI: 1780625012
Provider English Spoken: Yes
Provider Language(s) Spoken: Chinese
Cultural Competency:
NORTH COUNTY HEALTH SERVICES
619 CROUCH ST STE 100
OCEANSIDE, CA 92054-4460
Phone: (760) 736-6767
Fax: (760) 566-1501
After Hours Phone: (760) 736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-TH 7:30AM-6:30PM

CHALMERS, VIRGINIA, CSW

Provider Gender: Female
License number: 28053
NPI: 1265613715

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J. Directorio de proveedores de salud mental

Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 NORTH COUNTY HEALTH
 SERVICES
 619 CROUCH ST STE 100
 OCEANSIDE, CA 92054-4460
Phone: (760) 736-6767
Fax: (760) 566-1501
After Hours Phone: (760)
 736-6767
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-TH 7:30AM-6:30PM

CHALMERS, VIRGINIA, CSW
Provider Gender: Female
License number: 28053
NPI: 1265613715
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 NORTH COUNTY HEALTH
 SERVICES
 2210 MESA DR STE 300
 OCEANSIDE, CA 92054-3701
Phone: (760) 966-3306
Fax: (760) 966-3340
After Hours Phone: (760)
 966-3306

Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 7:30AM-8PM, SA
 8AM-4:30PM

CHALMERS, VIRGINIA, CSW
Provider Gender: Female
License number: 28053
NPI: 1265613715
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 NORTH COUNTY HEALTH
 SERVICES
 605 CROUCH ST
 OCEANSIDE, CA 92054-4415
Phone: (760) 736-6767
Fax: (760) 757-3004
After Hours Phone: (760)
 736-6767
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No

Please contact provider for
 Accessibility information
Hours: M-W 8AM-7PM, TH-SA
 8AM-5PM

CHALMERS, VIRGINIA, CSW
Provider Gender: Female
License number: 28053
NPI: 1265613715
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 NORTH COUNTY HEALTH
 SERVICES
 3220 MISSION AVE STE 1
 OCEANSIDE, CA 92058-1354
Phone: (760) 736-6767
Fax: (760) 471-8946
After Hours Phone: (760)
 736-6767
Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

CHAUDHRI, YASHWANT, MD
Provider Gender: Male
License number: A67679
NPI: 1043258429
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Hindi, Urdu
Cultural Competency:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

**YASHWANT CHAUDRI MD A
PROF CORP**
520 N COAST HWY STE 103
OCEANSIDE, CA 92054-2184
Phone: (619) 596-9890
Fax: (619) 596-9893
After Hours Phone: (619)
596-9890
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Urdu
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M,TH 8AM-4PM

CHAUDHRI, YASHWANT, MD
Provider Gender: Male
License number: A67679
NPI: 1043258429
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi, Urdu
Cultural Competency:
VISTA COMMUNITY CLINIC
517 N HORNE ST
OCEANSIDE, CA 92054-2518
Phone: (760) 631-5009
Fax: (760) 414-3892
After Hours Phone: (760)
631-5009
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,

Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

CHAUDHRI, YASHWANT, MD
Provider Gender: Male
License number: A67679
NPI: 1043258429
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi, Urdu
Cultural Competency:
VISTA COMMUNITY CLINIC
818 PIER VIEW WAY
OCEANSIDE, CA 92054-2803
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F

8AM-5PM

CHAUDHRI, YASHWANT, MD
Provider Gender: Male
License number: A67679
NPI: 1043258429
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi, Urdu
Cultural Competency:
VISTA COMMUNITY CLINIC
4700 N RIVER RD
OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

CHENG, JIM, NPA
Provider Gender: Male
License number: 22852
NPI: 1790122638
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

2210 MESA DR STE 300
OCEANSIDE, CA 92054-3701
Phone: (760) 966-3306
Fax: (760) 966-3340
After Hours Phone: (760)
966-3306
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 7:30AM-8PM, SA
8AM-4:30PM

CHENG, JIM, NPA

Provider Gender: Male
License number: 22852
NPI: 1790122638
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
605 CROUCH ST
OCEANSIDE, CA 92054-4415
Phone: (760) 736-6767
Fax: (760) 757-3004
After Hours Phone: (760)
736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No

Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-W 8AM-7PM, TH-SA
8AM-5PM

CHENG, JIM, NPA

Provider Gender: Male
License number: 22852
NPI: 1790122638
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
619 CROUCH ST STE 100
OCEANSIDE, CA 92054-4460
Phone: (760) 736-6767
Fax: (760) 566-1501
After Hours Phone: (760)
736-6767
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 7:30AM-6:30PM

CHENG, JIM, NPA

Provider Gender: Male
License number: 22852
NPI: 1790122638

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
3220 MISSION AVE STE 1
OCEANSIDE, CA 92058-1354
Phone: (760) 736-6767
Fax: (760) 471-8946
After Hours Phone: (760)
736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

CHRISTIANSON II, WARREN R , MD

Provider Gender: Male
License number: 20A9664
NPI: 1932359445
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
VISTA COMMUNITY CLINIC
818 PIER VIEW WAY
OCEANSIDE, CA 92054-2803
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-TH 8AM-7PM, F
8AM-5PM

CHRISTIANSON II, WARREN R , MD

Provider Gender: Male

License number: 20A9664

NPI: 1932359445

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

VISTA COMMUNITY CLINIC
4700 N RIVER RD
OCEANSIDE, CA 92057-6043

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

CHRISTIANSON II, WARREN R , MD

Provider Gender: Male

License number: 20A9664

NPI: 1932359445

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

VISTA COMMUNITY CLINIC
517 N HORNE ST
OCEANSIDE, CA 92054-2518

Phone: (760) 631-5009

Fax: (760) 414-3892

After Hours Phone: (760)
631-5009

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-TH 8AM-7PM, F
8AM-5PM

COOK, SHERYL G , PSY

Provider Gender: Female

License number: 15449

NPI: 1750420816

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NORTH COUNTY HEALTH
SERVICES

619 CROUCH ST STE 100
OCEANSIDE, CA 92054-4460

Phone: (760) 736-6767

Fax: (760) 566-1501

After Hours Phone: (760)
736-6767

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-TH 7:30AM-6:30PM

CORNER, EMILY, MFT

Provider Gender: Female

License number: 102353

NPI: 1093225823

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NORTH COUNTY HEALTH
SERVICES

2210 MESA DR STE 300

OCEANSIDE, CA 92054-3701

Phone: (760) 966-3306

Fax: (760) 966-3340

After Hours Phone: (760)
966-3306

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Spanish, Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 7:30AM-8PM, SA
 8AM-4:30PM

CORNER, EMILY, MFT

Provider Gender: Female
 License number: 102353
 NPI: 1093225823
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 NORTH COUNTY HEALTH
 SERVICES
 619 CROUCH ST STE 100
 OCEANSIDE, CA 92054-4460
 Phone: (760) 736-6767
 Fax: (760) 566-1501
 After Hours Phone: (760)
 736-6767
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish, Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-TH 7:30AM-6:30PM

CORNER, EMILY, MFT
 Provider Gender: Female

License number: 102353
 NPI: 1093225823
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 NORTH COUNTY HEALTH
 SERVICES
 3220 MISSION AVE STE 1
 OCEANSIDE, CA 92058-1354
 Phone: (760) 736-6767
 Fax: (760) 471-8946
 After Hours Phone: (760)
 736-6767
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish, Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

CORNER, EMILY, MFT

Provider Gender: Female
 License number: 102353
 NPI: 1093225823
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 NORTH COUNTY HEALTH
 SERVICES
 605 CROUCH ST
 OCEANSIDE, CA 92054-4415
 Phone: (760) 736-6767
 Fax: (760) 757-3004
 After Hours Phone: (760)
 736-6767

Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish, Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-W 8AM-7PM, TH-SA
 8AM-5PM

CORTIZO, ROSA, PSY

Provider Gender: Female
 License number: 22278
 NPI: 1952316648
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 NORTH COUNTY HEALTH
 SERVICES
 619 CROUCH ST STE 100
 OCEANSIDE, CA 92054-4460
 Phone: (760) 736-6767
 Fax: (760) 566-1501
 After Hours Phone: (760)
 736-6767
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish, Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Please contact provider for
Accessibility information
Hours: M-TH 7:30AM-6:30PM

CORTIZO, ROSA, PSY

Provider Gender: Female
License number: 22278
NPI: 1952316648
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
605 CROUCH ST
OCEANSIDE, CA 92054-4415
Phone: (760) 736-6767
Fax: (760) 757-3004
After Hours Phone: (760)
736-6767
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No

Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No

Please contact provider for
Accessibility information
Hours: M-W 8AM-7PM, TH-SA
8AM-5PM

CORTIZO, ROSA, PSY

Provider Gender: Female
License number: 22278
NPI: 1952316648
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:

NORTH COUNTY HEALTH
SERVICES
3220 MISSION AVE STE 1
OCEANSIDE, CA 92058-1354
Phone: (760) 736-6767
Fax: (760) 471-8946
After Hours Phone: (760)
736-6767
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No

Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No

Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

CORTIZO, ROSA, PSY

Provider Gender: Female
License number: 22278
NPI: 1952316648
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
2210 MESA DR STE 300
OCEANSIDE, CA 92054-3701
Phone: (760) 966-3306
Fax: (760) 966-3340
After Hours Phone: (760)
966-3306
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 7:30AM-8PM, SA
8AM-4:30PM

CRUZ, VANESSA, CSW

Provider Gender: Female
License number: 87166
NPI: 1285170662
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
VISTA COMMUNITY CLINIC
4700 N RIVER RD
OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No

Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

CRUZ, VANESSA, CSW

Provider Gender: Female

License number: 87166

NPI: 1285170662

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

VISTA COMMUNITY CLINIC

517 N HORNE ST

OCEANSIDE, CA 92054-2518

Phone: (760) 631-5009

Fax: (760) 414-3892

After Hours Phone: (760)

631-5009

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Mandarin, Hindi, Khmer,

Spanish, Tamil, Telugu, Urdu,

Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL):

No

Please contact provider for Accessibility information

Hours: M-TH 8AM-7PM, F

8AM-5PM

CRUZ, VANESSA, CSW

Provider Gender: Female

License number: 87166

NPI: 1285170662

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

VISTA COMMUNITY CLINIC

818 PIER VIEW WAY

OCEANSIDE, CA 92054-2803

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)

631-5000

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Mandarin, Hindi, Khmer,

Spanish, Tamil, Telugu, Urdu,

Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL):

No

Please contact provider for Accessibility information

Hours: M-TH 8AM-7PM, F

8AM-5PM

DEMALLIE, DIANE A , MD

Provider Gender: Female

License number: 55982

NPI: 1437162898

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

VISTA COMMUNITY CLINIC

4700 N RIVER RD

OCEANSIDE, CA 92057-6043

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)

631-5000

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Mandarin, Hindi, Khmer,

Spanish, Tamil, Telugu, Urdu,

Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL):

No

Please contact provider for Accessibility information

Hours: M-TH 8AM-7PM, F

8AM-5PM

DEMALLIE, DIANE A , MD

Provider Gender: Female

License number: 55982

NPI: 1437162898

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

VISTA COMMUNITY CLINIC

818 PIER VIEW WAY

OCEANSIDE, CA 92054-2803

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)

631-5000

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Mandarin, Hindi, Khmer,

Spanish, Tamil, Telugu, Urdu,

Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL):

No

Please contact provider for Accessibility information

Hours: M-TH 8AM-7PM, F

8AM-5PM

DEMALLIE, DIANE A , MD

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Gender: Female
License number: 55982
NPI: 1437162898
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 VISTA COMMUNITY CLINIC
 517 N HORNE ST
 OCEANSIDE, CA 92054-2518
Phone: (760) 631-5009
Fax: (760) 414-3892
After Hours Phone: (760)
 631-5009
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Mandarin, Hindi, Khmer,
 Spanish, Tamil, Telugu, Urdu,
 Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-TH 8AM-7PM, F
 8AM-5PM

DESOCIO, KAREN, CSW

Provider Gender: Female
License number: 18451
NPI: 1497727820
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 VISTA COMMUNITY CLINIC
 818 PIER VIEW WAY
 OCEANSIDE, CA 92054-2803

Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
 631-5000
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Mandarin, Hindi, Khmer,
 Spanish, Tamil, Telugu, Urdu,
 Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-TH 8AM-7PM, F
 8AM-5PM

DESOCIO, KAREN, CSW

Provider Gender: Female
License number: 18451
NPI: 1497727820
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 VISTA COMMUNITY CLINIC
 4700 N RIVER RD
 OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
 631-5000
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Mandarin, Hindi, Khmer,
 Spanish, Tamil, Telugu, Urdu,

Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-TH 8AM-7PM, F
 8AM-5PM

DESOCIO, KAREN, CSW

Provider Gender: Female
License number: 18451
NPI: 1497727820
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 VISTA COMMUNITY CLINIC
 517 N HORNE ST
 OCEANSIDE, CA 92054-2518
Phone: (760) 631-5009
Fax: (760) 414-3892
After Hours Phone: (760)
 631-5009
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Mandarin, Hindi, Khmer,
 Spanish, Tamil, Telugu, Urdu,
 Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-TH 8AM-7PM, F
 8AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

DOUGHERTY, CHRISTINE, CSW

Provider Gender: Female
License number: 26686
NPI: 1003194960
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
VISTA COMMUNITY CLINIC
4700 N RIVER RD
OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

DOUGHERTY, CHRISTINE, CSW

Provider Gender: Female
License number: 26686
NPI: 1003194960
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
VISTA COMMUNITY CLINIC
517 N HORNE ST

OCEANSIDE, CA 92054-2518
Phone: (760) 631-5009
Fax: (760) 414-3892
After Hours Phone: (760)
631-5009
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

DOUGHERTY, CHRISTINE, CSW

Provider Gender: Female
License number: 26686
NPI: 1003194960
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
VISTA COMMUNITY CLINIC
818 PIER VIEW WAY
OCEANSIDE, CA 92054-2803
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,

Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

FLYNN (NEWMAN), DANIELLE I, PSY

Provider Gender: U
License number: 26184
NPI: 1477785137
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
3220 MISSION AVE STE 1
OCEANSIDE, CA 92058-1354
Phone: (760) 736-6767
Fax: (760) 471-8946
After Hours Phone: (760)
736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

FLYNN (NEWMAN), DANIELLE I, PSY

Provider Gender: U
License number: 26184
NPI: 1477785137
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 619 CROUCH ST STE 100
 OCEANSIDE, CA 92054-4460
Phone: (760) 736-6767
Fax: (760) 566-1501
After Hours Phone: (760) 736-6767
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-TH 7:30AM-6:30PM

FLYNN (NEWMAN), DANIELLE I, PSY

Provider Gender: U
License number: 26184
NPI: 1477785137
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 2210 MESA DR STE 300
 OCEANSIDE, CA 92054-3701

Phone: (760) 966-3306
Fax: (760) 966-3340
After Hours Phone: (760) 966-3306
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 7:30AM-8PM, SA 8AM-4:30PM

FLYNN (NEWMAN), DANIELLE I, PSY

Provider Gender: U
License number: 26184
NPI: 1477785137
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 605 CROUCH ST
 OCEANSIDE, CA 92054-4415
Phone: (760) 736-6767
Fax: (760) 757-3004
After Hours Phone: (760) 736-6767
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Chinese
TDD: No
Min/Max Age:

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-W 8AM-7PM, TH-SA 8AM-5PM

FREEMAN, WANDA, NPA

Provider Gender: Female
License number: 95003903
NPI: 1659504264
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 619 CROUCH ST STE 100
 OCEANSIDE, CA 92054-4460
Phone: (760) 736-6767
Fax: (760) 566-1501

After Hours Phone: (760) 736-6767
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-TH 7:30AM-6:30PM

FREEMAN, WANDA, NPA

Provider Gender: Female
License number: 95003903
NPI: 1659504264
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Language(s) Spoken: NORTH COUNTY HEALTH SERVICES
 2210 MESA DR STE 300
 OCEANSIDE, CA 92054-3701
Phone: (760) 966-3306
Fax: (760) 966-3340
After Hours Phone: (760) 966-3306
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 7:30AM-8PM, SA 8AM-4:30PM

FREEMAN, WANDA, NPA
Provider Gender: Female
License number: 95003903
NPI: 1659504264
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Chinese
 NORTH COUNTY HEALTH SERVICES
 605 CROUCH ST
 OCEANSIDE, CA 92054-4415
Phone: (760) 736-6767
Fax: (760) 757-3004
After Hours Phone: (760) 736-6767
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-W 8AM-7PM, TH-SA 8AM-5PM

FREEMAN, WANDA, NPA
Provider Gender: Female
License number: 95003903
NPI: 1659504264
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Chinese
 NORTH COUNTY HEALTH SERVICES
 3220 MISSION AVE STE 1
 OCEANSIDE, CA 92058-1354
Phone: (760) 736-6767
Fax: (760) 471-8946
After Hours Phone: (760) 736-6767
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

GARCIA, JANET A , CSW
Provider Gender: Female
License number: 91462
NPI: 1790144756
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Chinese
 NORTH COUNTY HEALTH SERVICES
 2210 MESA DR STE 300
 OCEANSIDE, CA 92054-3701
Phone: (760) 966-3306
Fax: (760) 966-3340
After Hours Phone: (760) 966-3306
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 7:30AM-8PM, SA 8AM-4:30PM

GARCIA, JANET A , CSW
Provider Gender: Female
License number: 91462
NPI: 1790144756
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Chinese
 NORTH COUNTY HEALTH SERVICES
 619 CROUCH ST STE 100
 OCEANSIDE, CA 92054-4460

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (760) 736-6767
Fax: (760) 566-1501
After Hours Phone: (760) 736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
No
Please contact provider for Accessibility information
Hours: M-TH 7:30AM-6:30PM

GARCIA, JANET A , CSW

Provider Gender: Female
License number: 91462
NPI: 1790144756
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH SERVICES
3220 MISSION AVE STE 1
OCEANSIDE, CA 92058-1354
Phone: (760) 736-6767
Fax: (760) 471-8946
After Hours Phone: (760) 736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions

American Sign Language (ASL):
No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

GEORGIEV, MARY JO C , PSY

Provider Gender: Female
License number: 17954
NPI: 1518996875
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH SERVICES
619 CROUCH ST STE 100
OCEANSIDE, CA 92054-4460
Phone: (760) 736-6767
Fax: (760) 566-1501
After Hours Phone: (760) 736-6767
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
No
Please contact provider for Accessibility information
Hours: M-TH 7:30AM-6:30PM

GEORGIEV, MARY JO C , PSY

Provider Gender: Female
License number: 17954
NPI: 1518996875
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH

SERVICES
2210 MESA DR STE 300
OCEANSIDE, CA 92054-3701
Phone: (760) 966-3306
Fax: (760) 966-3340
After Hours Phone: (760) 966-3306
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
No
Please contact provider for Accessibility information
Hours: M-F 7:30AM-8PM, SA 8AM-4:30PM

GEORGIEV, MARY JO C , PSY

Provider Gender: Female
License number: 17954
NPI: 1518996875
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH SERVICES
605 CROUCH ST
OCEANSIDE, CA 92054-4415
Phone: (760) 736-6767
Fax: (760) 757-3004
After Hours Phone: (760) 736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-W 8AM-7PM, TH-SA 8AM-5PM

GEORGIEV, MARY JO C , PSY

Provider Gender: Female
 License number: 17954
 NPI: 1518996875
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 3220 MISSION AVE STE 1
 OCEANSIDE, CA 92058-1354
 Phone: (760) 736-6767
 Fax: (760) 471-8946
 After Hours Phone: (760) 736-6767
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish, Chinese
 TDD: No

Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

GEORGIEV, MARY JO C , PSY

Provider Gender: Female
 License number: 17954

NPI: 1518996875
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 COGNITIVE HEALTH SOLUTIONS INC
 2131 S EL CAMINO REAL STE 102
 OCEANSIDE, CA 92054-6217
 Phone: (858) 227-0887
 Fax: (858) 430-9611

After Hours Phone: (858) 227-0887
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi
 TDD: No

Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 9AM-6PM

GERAUGHTY (OLEARY), PAMELA J , CSW

Provider Gender: Female
 License number: 25138
 NPI: 1063800217
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 3220 MISSION AVE STE 1
 OCEANSIDE, CA 92058-1354
 Phone: (760) 736-6767
 Fax: (760) 471-8946
 After Hours Phone: (760) 736-6767

Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish, Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

GERAUGHTY (OLEARY), PAMELA J , CSW

Provider Gender: Female
 License number: 25138
 NPI: 1063800217
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 619 CROUCH ST STE 100
 OCEANSIDE, CA 92054-4460
 Phone: (760) 736-6767
 Fax: (760) 566-1501
 After Hours Phone: (760) 736-6767
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish, Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accessibility information
Hours: M-TH 7:30AM-6:30PM

**GERAUGHTY (OLEARY),
PAMELA J , CSW**

Provider Gender: Female
License number: 25138
NPI: 1063800217
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
2210 MESA DR STE 300
OCEANSIDE, CA 92054-3701
Phone: (760) 966-3306
Fax: (760) 966-3340
After Hours Phone: (760)
966-3306
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 7:30AM-8PM, SA
8AM-4:30PM

GIORGIO, CHRISTINA, CSW

Provider Gender: Female
License number: 101690
NPI: 1457786774
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
VISTA COMMUNITY CLINIC
818 PIER VIEW WAY

OCEANSIDE, CA 92054-2803
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

GIORGIO, CHRISTINA, CSW

Provider Gender: Female
License number: 101690
NPI: 1457786774
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
VISTA COMMUNITY CLINIC
4700 N RIVER RD
OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,

Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

GIORGIO, CHRISTINA, CSW

Provider Gender: Female
License number: 101690
NPI: 1457786774
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
VISTA COMMUNITY CLINIC
517 N HORNE ST
OCEANSIDE, CA 92054-2518
Phone: (760) 631-5009
Fax: (760) 414-3892
After Hours Phone: (760)
631-5009
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

GODINEZ, BRENDA, CSW

Provider Gender: Female
License number: 88306
NPI: 1568918647
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 VISTA COMMUNITY CLINIC
 4700 N RIVER RD
 OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-TH 8AM-7PM, F 8AM-5PM

GODINEZ, BRENDA, CSW

Provider Gender: Female
License number: 88306
NPI: 1568918647
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 VISTA COMMUNITY CLINIC
 517 N HORNE ST

OCEANSIDE, CA 92054-2518
Phone: (760) 631-5009
Fax: (760) 414-3892
After Hours Phone: (760) 631-5009
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-TH 8AM-7PM, F 8AM-5PM

GODINEZ, BRENDA, CSW

Provider Gender: Female
License number: 88306
NPI: 1568918647
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 VISTA COMMUNITY CLINIC
 818 PIER VIEW WAY
 OCEANSIDE, CA 92054-2803
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Mandarin, Hindi, Khmer,

Spanish, Tamil, Telugu, Urdu, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-TH 8AM-7PM, F 8AM-5PM

GONZALEZ, JOSE, CSW

Provider Gender: Male
License number: 80920
NPI: 1689844847
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Chinese
Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 3220 MISSION AVE STE 1
 OCEANSIDE, CA 92058-1354
Phone: (760) 736-6767
Fax: (760) 471-8946
After Hours Phone: (760) 736-6767
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

GONZALEZ, JOSE, CSW

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Gender: Male
License number: 80920
NPI: 1689844847
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH SERVICES
2210 MESA DR STE 300
OCEANSIDE, CA 92054-3701
Phone: (760) 966-3306
Fax: (760) 966-3340
After Hours Phone: (760) 966-3306
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
No
Please contact provider for Accessibility information
Hours: M-F 7:30AM-8PM, SA 8AM-4:30PM

GONZALEZ, JOSE, CSW

Provider Gender: Male
License number: 80920
NPI: 1689844847
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH SERVICES
619 CROUCH ST STE 100
OCEANSIDE, CA 92054-4460

Phone: (760) 736-6767
Fax: (760) 566-1501
After Hours Phone: (760) 736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
No
Please contact provider for Accessibility information
Hours: M-TH 7:30AM-6:30PM

GUERRERO, ADRIANA J , CSW

Provider Gender: Female
License number: LCSW86435
NPI: 1356777361
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
VISTA COMMUNITY CLINIC
4700 N RIVER RD
OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
TDD: No

Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
No
Please contact provider for Accessibility information
Hours: M-TH 8AM-7PM, F 8AM-5PM

GUERRERO, ADRIANA J , CSW

Provider Gender: Female
License number: LCSW86435
NPI: 1356777361
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
VISTA COMMUNITY CLINIC
818 PIER VIEW WAY
OCEANSIDE, CA 92054-2803
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
No
Please contact provider for Accessibility information
Hours: M-TH 8AM-7PM, F 8AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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J. Directorio de proveedores de salud mental

**GUERRERO, ADRIANA J ,
CSW**

Provider Gender: Female
License number: LCSW86435
NPI: 1356777361
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: VISTA COMMUNITY CLINIC
517 N HORNE ST
OCEANSIDE, CA 92054-2518
Phone: (760) 631-5009
Fax: (760) 414-3892
After Hours Phone: (760) 631-5009
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-TH 8AM-7PM, F 8AM-5PM

**GUEVARA LEHMAN, NATALIE,
CSW**

Provider Gender: Female
License number: 63746
NPI: 1578835757
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:

NORTH COUNTY HEALTH SERVICES
3220 MISSION AVE STE 1
OCEANSIDE, CA 92058-1354
Phone: (760) 736-6767
Fax: (760) 471-8946
After Hours Phone: (760) 736-6767
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

**GUEVARA LEHMAN, NATALIE,
CSW**

Provider Gender: Female
License number: 63746
NPI: 1578835757
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NORTH COUNTY HEALTH SERVICES
2210 MESA DR STE 300
OCEANSIDE, CA 92054-3701
Phone: (760) 966-3306
Fax: (760) 966-3340
After Hours Phone: (760) 966-3306
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 7:30AM-8PM, SA 8AM-4:30PM

**GUEVARA LEHMAN, NATALIE,
CSW**

Provider Gender: Female
License number: 63746
NPI: 1578835757
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NORTH COUNTY HEALTH SERVICES
619 CROUCH ST STE 100
OCEANSIDE, CA 92054-4460
Phone: (760) 736-6767
Fax: (760) 566-1501
After Hours Phone: (760) 736-6767
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-TH 7:30AM-6:30PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

HALGEDAHL, YI TING, NPA

Provider Gender: Female
License number: 95006826
NPI: 1619246907
Provider English Spoken: Yes
Provider Language(s) Spoken: Mandarin, Chinese
Cultural Competency:
VISTA COMMUNITY CLINIC
517 N HORNE ST
OCEANSIDE, CA 92054-2518
Phone: (760) 631-5009
Fax: (760) 414-3892
After Hours Phone: (760) 631-5009
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-TH 8AM-7PM, F 8AM-5PM

HALGEDAHL, YI TING, NPA

Provider Gender: Female
License number: 95006826
NPI: 1619246907
Provider English Spoken: Yes
Provider Language(s) Spoken: Mandarin, Chinese
Cultural Competency:
VISTA COMMUNITY CLINIC
818 PIER VIEW WAY

OCEANSIDE, CA 92054-2803
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-TH 8AM-7PM, F 8AM-5PM

HALGEDAHL, YI TING, NPA

Provider Gender: Female
License number: 95006826
NPI: 1619246907
Provider English Spoken: Yes
Provider Language(s) Spoken: Mandarin, Chinese
Cultural Competency:
VISTA COMMUNITY CLINIC
4700 N RIVER RD
OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Mandarin, Hindi, Khmer,

Spanish, Tamil, Telugu, Urdu, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-TH 8AM-7PM, F 8AM-5PM

HARDIN INGRAM, ANDREA, CSW

Provider Gender: Female
License number: 28677
NPI: 1801947692
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
COGNITIVE HEALTH SOLUTIONS INC
2131 S EL CAMINO REAL STE 102
OCEANSIDE, CA 92054-6217
Phone: (858) 227-0887
Fax: (858) 430-9611
After Hours Phone: (858) 227-0887
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 9AM-6PM

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J. Directorio de proveedores de salud mental

ISACESCU, VALENTIN, MD

Provider Gender: Male
License number: A68103
NPI: 1972602720
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Romanian
Cultural Competency: ISACESCU, VALENTIN
 2122 S EL CAMINO REAL STE 100
 OCEANSIDE, CA 92054-6209
Phone: (760) 726-6464
Fax: (760) 726-6483
After Hours Phone: (760) 726-6464
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: French, Romanian
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-TH 11AM-4PM

JAGANNATH, NIRMALA, CSW

Provider Gender: Female
License number: 23183
NPI: 1639687726
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Tamil, Telugu
Cultural Competency: VISTA COMMUNITY CLINIC
 818 PIER VIEW WAY
 OCEANSIDE, CA 92054-2803

Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-TH 8AM-7PM, F 8AM-5PM

JAGANNATH, NIRMALA, CSW

Provider Gender: Female
License number: 23183
NPI: 1639687726
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Tamil, Telugu
Cultural Competency: VISTA COMMUNITY CLINIC
 517 N HORNE ST
 OCEANSIDE, CA 92054-2518
Phone: (760) 631-5009
Fax: (760) 414-3892
After Hours Phone: (760) 631-5009
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu,

Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-TH 8AM-7PM, F 8AM-5PM

JAGANNATH, NIRMALA, CSW

Provider Gender: Female
License number: 23183
NPI: 1639687726
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Tamil, Telugu
Cultural Competency: VISTA COMMUNITY CLINIC
 4700 N RIVER RD
 OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-TH 8AM-7PM, F 8AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

JENSEN, BRIAN M , PSY

Provider Gender: Male
License number: 26041
NPI: 1518138049
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH SERVICES
2210 MESA DR STE 300
OCEANSIDE, CA 92054-3701
Phone: (760) 966-3306
Fax: (760) 966-3340
After Hours Phone: (760) 966-3306
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
No
Please contact provider for Accessibility information
Hours: M-F 7:30AM-8PM, SA 8AM-4:30PM

JENSEN, BRIAN M , PSY

Provider Gender: Male
License number: 26041
NPI: 1518138049
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH SERVICES
3220 MISSION AVE STE 1
OCEANSIDE, CA 92058-1354

Phone: (760) 736-6767
Fax: (760) 471-8946
After Hours Phone: (760) 736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

JENSEN, BRIAN M , PSY

Provider Gender: Male
License number: 26041
NPI: 1518138049
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH SERVICES
619 CROUCH ST STE 100
OCEANSIDE, CA 92054-4460
Phone: (760) 736-6767
Fax: (760) 566-1501
After Hours Phone: (760) 736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions

American Sign Language (ASL):
No
Please contact provider for Accessibility information
Hours: M-TH 7:30AM-6:30PM

JENSEN, BRIAN M , PSY

Provider Gender: Male
License number: 26041
NPI: 1518138049
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH SERVICES
605 CROUCH ST
OCEANSIDE, CA 92054-4415
Phone: (760) 736-6767
Fax: (760) 757-3004
After Hours Phone: (760) 736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
No
Please contact provider for Accessibility information
Hours: M-W 8AM-7PM, TH-SA 8AM-5PM

KISTLER, JONATHAN, MD

Provider Gender: Male
License number: A73938
NPI: 1033161740
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

COMMUNITY RESEARCH
FOUNDATION INC
1738 S TREMONT ST
OCEANSIDE, CA 92054-5309
Phone: (760) 439-2800
Fax: (760) 433-5031
After Hours Phone: (760)
439-2800

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours:

KONG, DARREN, CSW

Provider Gender: Male
License number: 88493
NPI: 1447685078
Provider English Spoken: Yes
Provider Language(s) Spoken:
Khmer
Cultural Competency:
VISTA COMMUNITY CLINIC
517 N HORNE ST
OCEANSIDE, CA 92054-2518
Phone: (760) 631-5009
Fax: (760) 414-3892
After Hours Phone: (760)
631-5009
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,

Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

KONG, DARREN, CSW

Provider Gender: Male
License number: 88493
NPI: 1447685078
Provider English Spoken: Yes
Provider Language(s) Spoken:
Khmer
Cultural Competency:
VISTA COMMUNITY CLINIC
4700 N RIVER RD
OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

KONG, DARREN, CSW

Provider Gender: Male
License number: 88493
NPI: 1447685078
Provider English Spoken: Yes
Provider Language(s) Spoken:
Khmer
Cultural Competency:
VISTA COMMUNITY CLINIC
818 PIER VIEW WAY
OCEANSIDE, CA 92054-2803
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

KRAPES, MICHAEL B , PSY

Provider Gender: Male
License number: 25077
NPI: 1215233028
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
2210 MESA DR STE 300

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

OCEANSIDE, CA 92054-3701
Phone: (760) 966-3306
Fax: (760) 966-3340
After Hours Phone: (760) 966-3306
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 7:30AM-8PM, SA
8AM-4:30PM

KRAPES, MICHAEL B , PSY
Provider Gender: Male
License number: 25077
NPI: 1215233028
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
619 CROUCH ST STE 100
OCEANSIDE, CA 92054-4460
Phone: (760) 736-6767
Fax: (760) 566-1501
After Hours Phone: (760)
736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 7:30AM-6:30PM

KRAPES, MICHAEL B , PSY
Provider Gender: Male
License number: 25077
NPI: 1215233028
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
605 CROUCH ST
OCEANSIDE, CA 92054-4415
Phone: (760) 736-6767
Fax: (760) 757-3004
After Hours Phone: (760)
736-6767
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-W 8AM-7PM, TH-SA
8AM-5PM

KRAPES, MICHAEL B , PSY
Provider Gender: Male
License number: 25077
NPI: 1215233028
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
3220 MISSION AVE STE 1
OCEANSIDE, CA 92058-1354
Phone: (760) 736-6767
Fax: (760) 471-8946
After Hours Phone: (760)
736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

MAUHILI, KENNA, PSY
Provider Gender: Female
License number: 23713
NPI: 1386949360
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
COGNITIVE HEALTH
SOLUTIONS INC
2131 S EL CAMINO REAL STE
102
OCEANSIDE, CA 92054-6217
Phone: (858) 227-0887
Fax: (858) 430-9611
After Hours Phone: (858)
227-0887
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Site English Spoken: Yes

Site Language(s) Spoken: Hindi

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: M-F 9AM-6PM

MEYERHOF, GRETA, MFT

Provider Gender: Female

License number: 32299

NPI: 1487196333

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

VISTA COMMUNITY CLINIC

517 N HORNE ST

OCEANSIDE, CA 92054-2518

Phone: (760) 631-5009

Fax: (760) 414-3892

After Hours Phone: (760)

631-5009

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Mandarin, Hindi, Khmer,

Spanish, Tamil, Telugu, Urdu,

Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-TH 8AM-7PM, F

8AM-5PM

MEYERHOF, GRETA, MFT

Provider Gender: Female

License number: 32299

NPI: 1487196333

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

VISTA COMMUNITY CLINIC

4700 N RIVER RD

OCEANSIDE, CA 92057-6043

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)

631-5000

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Mandarin, Hindi, Khmer,

Spanish, Tamil, Telugu, Urdu,

Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-TH 8AM-7PM, F

8AM-5PM

MEYERHOF, GRETA, MFT

Provider Gender: Female

License number: 32299

NPI: 1487196333

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

VISTA COMMUNITY CLINIC

818 PIER VIEW WAY

OCEANSIDE, CA 92054-2803

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)

631-5000

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Mandarin, Hindi, Khmer,

Spanish, Tamil, Telugu, Urdu,

Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-TH 8AM-7PM, F

8AM-5PM

MONTEZ, REBECCA, CSW

Provider Gender: Female

License number: 26869

NPI: 1396047809

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

NORTH COUNTY HEALTH

SERVICES

605 CROUCH ST

OCEANSIDE, CA 92054-4415

Phone: (760) 736-6767

Fax: (760) 757-3004

After Hours Phone: (760)

736-6767

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-W 8AM-7PM, TH-SA 8AM-5PM

MONTEZ, REBECCA, CSW

Provider Gender: Female
 License number: 26869
 NPI: 1396047809
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: NORTH COUNTY HEALTH SERVICES
 3220 MISSION AVE STE 1
 OCEANSIDE, CA 92058-1354
 Phone: (760) 736-6767
 Fax: (760) 471-8946
 After Hours Phone: (760) 736-6767
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish, Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

MONTEZ, REBECCA, CSW

Provider Gender: Female

License number: 26869
 NPI: 1396047809
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: NORTH COUNTY HEALTH SERVICES
 619 CROUCH ST STE 100
 OCEANSIDE, CA 92054-4460
 Phone: (760) 736-6767
 Fax: (760) 566-1501
 After Hours Phone: (760) 736-6767
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish, Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-TH 7:30AM-6:30PM

MONTEZ, REBECCA, CSW

Provider Gender: Female
 License number: 26869
 NPI: 1396047809
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: NORTH COUNTY HEALTH SERVICES
 2210 MESA DR STE 300
 OCEANSIDE, CA 92054-3701

Phone: (760) 966-3306
 Fax: (760) 966-3340
 After Hours Phone: (760) 966-3306
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish, Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 7:30AM-8PM, SA 8AM-4:30PM

NAVA, PETER B , NPA

Provider Gender: Male
 License number: 95016584
 NPI: 1689251571
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: VISTA COMMUNITY CLINIC
 818 PIER VIEW WAY
 OCEANSIDE, CA 92054-2803
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
 TDD: No
 Min/Max Age:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-TH 8AM-7PM, F 8AM-5PM

NAVA, PETER B , NPA

Provider Gender: Male
License number: 95016584
NPI: 1689251571
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 VISTA COMMUNITY CLINIC
 517 N HORNE ST
 OCEANSIDE, CA 92054-2518
Phone: (760) 631-5009
Fax: (760) 414-3892
After Hours Phone: (760) 631-5009
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-TH 8AM-7PM, F 8AM-5PM

NAVA, PETER B , NPA

Provider Gender: Male
License number: 95016584

NPI: 1689251571
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 VISTA COMMUNITY CLINIC
 4700 N RIVER RD
 OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-TH 8AM-7PM, F 8AM-5PM

NEVILLE, MARGARET, CSW

Provider Gender: Female
License number: 82407
NPI: 1073682407
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 VISTA COMMUNITY CLINIC
 818 PIER VIEW WAY
 OCEANSIDE, CA 92054-2803
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000

Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-TH 8AM-7PM, F 8AM-5PM

NEVILLE, MARGARET, CSW

Provider Gender: Female
License number: 82407
NPI: 1073682407
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 VISTA COMMUNITY CLINIC
 517 N HORNE ST
 OCEANSIDE, CA 92054-2518
Phone: (760) 631-5009
Fax: (760) 414-3892
After Hours Phone: (760) 631-5009
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-TH 8AM-7PM, F 8AM-5PM

NEVILLE, MARGARET, CSW

Provider Gender: Female
License number: 82407
NPI: 1073682407
Provider English Spoken: Yes
Provider Language(s) Spoken: *Cultural Competency:*
VISTA COMMUNITY CLINIC
4700 N RIVER RD
OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-TH 8AM-7PM, F 8AM-5PM

SANCHEZ, ADRIANA, CSW

Provider Gender: Female
License number: 97093
NPI: 1609450451
Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish
Cultural Competency:
VISTA COMMUNITY CLINIC
517 N HORNE ST
OCEANSIDE, CA 92054-2518
Phone: (760) 631-5009
Fax: (760) 414-3892
After Hours Phone: (760) 631-5009
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-TH 8AM-7PM, F 8AM-5PM

SANCHEZ, ADRIANA, CSW

Provider Gender: Female
License number: 97093
NPI: 1609450451
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
VISTA COMMUNITY CLINIC
4700 N RIVER RD
OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-TH 8AM-7PM, F 8AM-5PM

SANCHEZ, ADRIANA, CSW

Provider Gender: Female
License number: 97093
NPI: 1609450451
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
VISTA COMMUNITY CLINIC
818 PIER VIEW WAY
OCEANSIDE, CA 92054-2803
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-TH 8AM-7PM, F 8AM-5PM</p>	<p><i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> NORTH COUNTY HEALTH SERVICES 619 CROUCH ST STE 100 OCEANSIDE, CA 92054-4460 <i>Phone:</i> (760) 736-6767 <i>Fax:</i> (760) 566-1501 <i>After Hours Phone:</i> (760) 736-6767 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish, Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-TH 7:30AM-6:30PM</p>	<p><i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish, Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-W 8AM-7PM, TH-SA 8AM-5PM</p>
<p>SIMMONS, LILIANA C , NPA <i>Provider Gender:</i> Female <i>License number:</i> 177800 <i>NPI:</i> 1396113254 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> NORTH COUNTY HEALTH SERVICES 2210 MESA DR STE 300 OCEANSIDE, CA 92054-3701 <i>Phone:</i> (760) 966-3306 <i>Fax:</i> (760) 966-3340 <i>After Hours Phone:</i> (760) 966-3306 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish, Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 7:30AM-8PM, SA 8AM-4:30PM</p>	<p>SIMMONS, LILIANA C , NPA <i>Provider Gender:</i> Female <i>License number:</i> 177800 <i>NPI:</i> 1396113254 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> NORTH COUNTY HEALTH SERVICES 605 CROUCH ST OCEANSIDE, CA 92054-4415 <i>Phone:</i> (760) 736-6767 <i>Fax:</i> (760) 757-3004 <i>After Hours Phone:</i> (760) 736-6767</p>	<p>SIMMONS, LILIANA C , NPA <i>Provider Gender:</i> Female <i>License number:</i> 177800 <i>NPI:</i> 1396113254 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> NORTH COUNTY HEALTH SERVICES 3220 MISSION AVE STE 1 OCEANSIDE, CA 92058-1354 <i>Phone:</i> (760) 736-6767 <i>Fax:</i> (760) 471-8946 <i>After Hours Phone:</i> (760) 736-6767 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish, Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No</p>
<p>SIMMONS, LILIANA C , NPA <i>Provider Gender:</i> Female <i>License number:</i> 177800 <i>NPI:</i> 1396113254</p>	<p>SIMMONS, LILIANA C , NPA <i>Provider Gender:</i> Female <i>License number:</i> 177800 <i>NPI:</i> 1396113254 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> NORTH COUNTY HEALTH SERVICES 605 CROUCH ST OCEANSIDE, CA 92054-4415 <i>Phone:</i> (760) 736-6767 <i>Fax:</i> (760) 757-3004 <i>After Hours Phone:</i> (760) 736-6767</p>	<p>SIMMONS, LILIANA C , NPA <i>Provider Gender:</i> Female <i>License number:</i> 177800 <i>NPI:</i> 1396113254 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> NORTH COUNTY HEALTH SERVICES 3220 MISSION AVE STE 1 OCEANSIDE, CA 92058-1354 <i>Phone:</i> (760) 736-6767 <i>Fax:</i> (760) 471-8946 <i>After Hours Phone:</i> (760) 736-6767 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish, Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

SIMMONS, SUZANNE, NPA

Provider Gender: Female
License number: 95016129
NPI: 1245733450
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
619 CROUCH ST STE 100
OCEANSIDE, CA 92054-4460
Phone: (760) 736-6767
Fax: (760) 566-1501
After Hours Phone: (760)
736-6767
Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 7:30AM-6:30PM

SIMMONS, SUZANNE, NPA

Provider Gender: Female
License number: 95016129
NPI: 1245733450
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
3220 MISSION AVE STE 1

OCEANSIDE, CA 92058-1354
Phone: (760) 736-6767
Fax: (760) 471-8946
After Hours Phone: (760)
736-6767

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

SIMMONS, SUZANNE, NPA

Provider Gender: Female
License number: 95016129
NPI: 1245733450
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
2210 MESA DR STE 300
OCEANSIDE, CA 92054-3701
Phone: (760) 966-3306
Fax: (760) 966-3340
After Hours Phone: (760)
966-3306
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender

Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 7:30AM-8PM, SA
8AM-4:30PM

SIMMONS, SUZANNE, NPA

Provider Gender: Female
License number: 95016129
NPI: 1245733450
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
605 CROUCH ST
OCEANSIDE, CA 92054-4415
Phone: (760) 736-6767
Fax: (760) 757-3004
After Hours Phone: (760)
736-6767
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-W 8AM-7PM, TH-SA
8AM-5PM

SIMPSON, ERIC, PSY

Provider Gender: Male
License number: 28885
NPI: 1710110416
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Language(s) Spoken:
Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 2210 MESA DR STE 300
 OCEANSIDE, CA 92054-3701
Phone: (760) 966-3306
Fax: (760) 966-3340
After Hours Phone: (760) 966-3306
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Chinese
 TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
 No
 Please contact provider for Accessibility information
Hours: M-F 7:30AM-8PM, SA 8AM-4:30PM

SIMPSON, ERIC, PSY

Provider Gender: Male
License number: 28885
NPI: 1710110416
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 3220 MISSION AVE STE 1
 OCEANSIDE, CA 92058-1354
Phone: (760) 736-6767
Fax: (760) 471-8946
After Hours Phone: (760) 736-6767
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Chinese
 TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
 No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

SIMPSON, ERIC, PSY

Provider Gender: Male
License number: 28885
NPI: 1710110416
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 605 CROUCH ST
 OCEANSIDE, CA 92054-4415
Phone: (760) 736-6767
Fax: (760) 757-3004
After Hours Phone: (760) 736-6767
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Chinese
 TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
 No
 Please contact provider for Accessibility information
Hours: M-W 8AM-7PM, TH-SA 8AM-5PM

SIMPSON, ERIC, PSY

Provider Gender: Male
License number: 28885
NPI: 1710110416
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 619 CROUCH ST STE 100
 OCEANSIDE, CA 92054-4460
Phone: (760) 736-6767
Fax: (760) 566-1501
After Hours Phone: (760) 736-6767
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Chinese
 TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
 No
 Please contact provider for Accessibility information
Hours: M-TH 7:30AM-6:30PM

SMITH, SONYA L , CSW

Provider Gender: Female
License number: 82598
NPI: 1902070857
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 VISTA COMMUNITY CLINIC
 4700 N RIVER RD
 OCEANSIDE, CA 92057-6043

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

SMITH, SONYA L , CSW
Provider Gender: Female
License number: 82598
NPI: 1902070857
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
VISTA COMMUNITY CLINIC
818 PIER VIEW WAY
OCEANSIDE, CA 92054-2803
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

SMITH, SONYA L , CSW
Provider Gender: Female
License number: 82598
NPI: 1902070857
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
VISTA COMMUNITY CLINIC
517 N HORNE ST
OCEANSIDE, CA 92054-2518
Phone: (760) 631-5009
Fax: (760) 414-3892
After Hours Phone: (760)
631-5009
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

SUNDER, RAJAGOPAL K , MD

Provider Gender: Male
License number: 94223
NPI: 1972572824
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi
Cultural Competency:
COGNITIVE HEALTH
SOLUTIONS INC
2131 S EL CAMINO REAL STE
102
OCEANSIDE, CA 92054-6217
Phone: (858) 227-0887
Fax: (858) 430-9611
After Hours Phone: (858)
227-0887
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 9AM-6PM

SURRIDGE, ARILDA S , MFT
Provider Gender: Female
License number: 84629
NPI: 1326357328
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
SAN DIEGO PSYCHOTHERAPY
AND WELLNESS CENTER
705 PIER VIEW WAY STE A
OCEANSIDE, CA 92054-2848

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (442) 500-8200
 Fax: (442) 615-7422
 After Hours Phone: (442) 500-8200
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 7AM-7PM, SA 7AM-5PM

SWENSON, ING E , CSW

Provider Gender: Male
 License number: 28549
 NPI: 1063680650
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 VISTA COMMUNITY CLINIC
 517 N HORNE ST
 OCEANSIDE, CA 92054-2518
 Phone: (760) 631-5009
 Fax: (760) 414-3892
 After Hours Phone: (760) 631-5009
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
 TDD: No
 Min/Max Age:

Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-TH 8AM-7PM, F 8AM-5PM

SWENSON, ING E , CSW

Provider Gender: Male
 License number: 28549
 NPI: 1063680650
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 VISTA COMMUNITY CLINIC
 818 PIER VIEW WAY
 OCEANSIDE, CA 92054-2803
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-TH 8AM-7PM, F 8AM-5PM

SWENSON, ING E , CSW

Provider Gender: Male
 License number: 28549

NPI: 1063680650
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 VISTA COMMUNITY CLINIC
 4700 N RIVER RD
 OCEANSIDE, CA 92057-6043
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-TH 8AM-7PM, F 8AM-5PM

TAYLOR, CORRDERO A , CSW

Provider Gender: Male
 License number: 71284
 NPI: 1346501533
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 3220 MISSION AVE STE 1
 OCEANSIDE, CA 92058-1354
 Phone: (760) 736-6767
 Fax: (760) 471-8946
 After Hours Phone: (760) 736-6767

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish, Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p>	<p><i>Hours:</i> M-W 8AM-7PM, TH-SA 8AM-5PM</p> <p>TAYLOR, CORRDERO A , CSW <i>Provider Gender:</i> Male <i>License number:</i> 71284 <i>NPI:</i> 1346501533 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> NORTH COUNTY HEALTH SERVICES 2210 MESA DR STE 300 OCEANSIDE, CA 92054-3701 <i>Phone:</i> (760) 966-3306 <i>Fax:</i> (760) 966-3340 <i>After Hours Phone:</i> (760) 966-3306 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish, Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 7:30AM-8PM, SA 8AM-4:30PM</p>	<p>OCEANSIDE, CA 92054-4460 <i>Phone:</i> (760) 736-6767 <i>Fax:</i> (760) 566-1501 <i>After Hours Phone:</i> (760) 736-6767 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish, Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-TH 7:30AM-6:30PM</p>
<p>TAYLOR, CORRDERO A , CSW <i>Provider Gender:</i> Male <i>License number:</i> 71284 <i>NPI:</i> 1346501533 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> NORTH COUNTY HEALTH SERVICES 605 CROUCH ST OCEANSIDE, CA 92054-4415 <i>Phone:</i> (760) 736-6767 <i>Fax:</i> (760) 757-3004 <i>After Hours Phone:</i> (760) 736-6767 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish, Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information</p>	<p>TAYLOR, CORRDERO A , CSW <i>Provider Gender:</i> Male <i>License number:</i> 71284 <i>NPI:</i> 1346501533 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> NORTH COUNTY HEALTH SERVICES 619 CROUCH ST STE 100</p>	<p>TORRES, HECTOR M , PSY <i>Provider Gender:</i> Male <i>License number:</i> 13309 <i>NPI:</i> 1720265614 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> NORTH COUNTY HEALTH SERVICES 3220 MISSION AVE STE 1 OCEANSIDE, CA 92058-1354 <i>Phone:</i> (760) 736-6767 <i>Fax:</i> (760) 471-8946 <i>After Hours Phone:</i> (760) 736-6767 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish, Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

TORRES, HECTOR M , PSY

Provider Gender: Male

License number: 13309

NPI: 1720265614

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:
NORTH COUNTY HEALTH SERVICES

619 CROUCH ST STE 100
OCEANSIDE, CA 92054-4460

Phone: (760) 736-6767

Fax: (760) 566-1501

After Hours Phone: (760) 736-6767

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: M-TH 7:30AM-6:30PM

TORRES, HECTOR M , PSY

Provider Gender: Male

License number: 13309

NPI: 1720265614

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:
NORTH COUNTY HEALTH SERVICES

605 CROUCH ST
OCEANSIDE, CA 92054-4415

Phone: (760) 736-6767

Fax: (760) 757-3004

After Hours Phone: (760)

736-6767

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: M-W 8AM-7PM, TH-SA 8AM-5PM

TORRES, HECTOR M , PSY

Provider Gender: Male

License number: 13309

NPI: 1720265614

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:
NORTH COUNTY HEALTH SERVICES

2210 MESA DR STE 300
OCEANSIDE, CA 92054-3701

Phone: (760) 966-3306

Fax: (760) 966-3340

After Hours Phone: (760)

966-3306

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: M-F 7:30AM-8PM, SA 8AM-4:30PM

TOUSI, SARA, CSW

Provider Gender: Female

License number: 89177

NPI: 1508427899

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

VISTA COMMUNITY CLINIC

4700 N RIVER RD
OCEANSIDE, CA 92057-6043

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)

631-5000

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

TOUSI, SARA, CSW

Provider Gender: Female
License number: 89177
NPI: 1508427899
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
VISTA COMMUNITY CLINIC
517 N HORNE ST
OCEANSIDE, CA 92054-2518
Phone: (760) 631-5009
Fax: (760) 414-3892
After Hours Phone: (760)
631-5009
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

TOUSI, SARA, CSW

Provider Gender: Female
License number: 89177
NPI: 1508427899
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

VISTA COMMUNITY CLINIC
818 PIER VIEW WAY
OCEANSIDE, CA 92054-2803
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

VALENTI, MICHAEL, PSY

Provider Gender: Male
License number: 26224
NPI: 1922435817
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
VALENTI, MICHAEL
2170 S EL CAMINO REAL STE
217
OCEANSIDE, CA 92054-6203
Phone: (760) 331-8866
Fax: (951) 328-0722
After Hours Phone: (760)
331-8866
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken:
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-8PM

VETTER, JEAN L , CSW

Provider Gender: Female
License number: 93945
NPI: 1659898641
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
2210 MESA DR STE 300
OCEANSIDE, CA 92054-3701
Phone: (760) 966-3306
Fax: (760) 966-3340
After Hours Phone: (760)
966-3306
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 7:30AM-8PM, SA
8AM-4:30PM

VETTER, JEAN L , CSW

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 93945
NPI: 1659898641
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
3220 MISSION AVE STE 1
OCEANSIDE, CA 92058-1354
Phone: (760) 736-6767
Fax: (760) 471-8946
After Hours Phone: (760)
736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

VETTER, JEAN L , CSW
Provider Gender: Female
License number: 93945
NPI: 1659898641
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
619 CROUCH ST STE 100
OCEANSIDE, CA 92054-4460
Phone: (760) 736-6767
Fax: (760) 566-1501
After Hours Phone: (760)
736-6767

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 7:30AM-6:30PM

WALKER, SHAYNA T , MD
Provider Gender: Female
License number: A107393
NPI: 1760688295
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
2210 MESA DR STE 300
OCEANSIDE, CA 92054-3701
Phone: (760) 966-3306
Fax: (760) 966-3340
After Hours Phone: (760)
966-3306
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information

Hours: M-F 7:30AM-8PM, SA
8AM-4:30PM

WALKER, SHAYNA T , MD
Provider Gender: Female
License number: A107393
NPI: 1760688295
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
619 CROUCH ST STE 100
OCEANSIDE, CA 92054-4460
Phone: (760) 736-6767
Fax: (760) 566-1501
After Hours Phone: (760)
736-6767
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 7:30AM-6:30PM

WALKER, SHAYNA T , MD
Provider Gender: Female
License number: A107393
NPI: 1760688295
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
605 CROUCH ST
OCEANSIDE, CA 92054-4415

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (760) 736-6767
Fax: (760) 757-3004
After Hours Phone: (760) 736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-W 8AM-7PM, TH-SA
8AM-5PM

WALKER, SHAYNA T , MD

Provider Gender: Female
License number: A107393
NPI: 1760688295
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
3220 MISSION AVE STE 1
OCEANSIDE, CA 92058-1354
Phone: (760) 736-6767
Fax: (760) 471-8946
After Hours Phone: (760)
736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender

Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

WELCH, MEGAN, MFT

Provider Gender: Female
License number: 113763
NPI: 1689117400
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
619 CROUCH ST STE 100
OCEANSIDE, CA 92054-4460
Phone: (760) 736-6767
Fax: (760) 566-1501
After Hours Phone: (760)
736-6767
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 7:30AM-6:30PM

WELCH, MEGAN, MFT

Provider Gender: Female
License number: 113763
NPI: 1689117400
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

NORTH COUNTY HEALTH
SERVICES
2210 MESA DR STE 300
OCEANSIDE, CA 92054-3701
Phone: (760) 966-3306
Fax: (760) 966-3340
After Hours Phone: (760)
966-3306
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 7:30AM-8PM, SA
8AM-4:30PM

WELCH, MEGAN, MFT

Provider Gender: Female
License number: 113763
NPI: 1689117400
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
605 CROUCH ST
OCEANSIDE, CA 92054-4415
Phone: (760) 736-6767
Fax: (760) 757-3004
After Hours Phone: (760)
736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-W 8AM-7PM, TH-SA 8AM-5PM

WELCH, MEGAN, MFT

Provider Gender: Female
License number: 113763
NPI: 1689117400
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
NORTH COUNTY HEALTH SERVICES
3220 MISSION AVE STE 1
OCEANSIDE, CA 92058-1354
Phone: (760) 736-6767
Fax: (760) 471-8946
After Hours Phone: (760) 736-6767
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

WILFONG, EDWARD J , PSY

Provider Gender: Male

License number: 9970
NPI: 1215386248
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
VISTA COMMUNITY CLINIC
4700 N RIVER RD
OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-TH 8AM-7PM, F 8AM-5PM

WILFONG, EDWARD J , PSY

Provider Gender: Male
License number: 9970
NPI: 1215386248
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
VISTA COMMUNITY CLINIC
517 N HORNE ST
OCEANSIDE, CA 92054-2518
Phone: (760) 631-5009
Fax: (760) 414-3892
After Hours Phone: (760) 631-5009

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-TH 8AM-7PM, F 8AM-5PM

WILSON, CARLENE, CSW

Provider Gender: Female
License number: 74685
NPI: 1508327081
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
VISTA COMMUNITY CLINIC
818 PIER VIEW WAY
OCEANSIDE, CA 92054-2803
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-TH 8AM-7PM, F 8AM-5PM

WILSON, CARLENE, CSW

Provider Gender: Female
License number: 74685
NPI: 1508327081
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
VISTA COMMUNITY CLINIC
4700 N RIVER RD
OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-TH 8AM-7PM, F 8AM-5PM

WILSON, CARLENE, CSW

Provider Gender: Female
License number: 74685
NPI: 1508327081
Provider English Spoken: Yes

Provider Language(s) Spoken: Cultural Competency:
VISTA COMMUNITY CLINIC
517 N HORNE ST
OCEANSIDE, CA 92054-2518
Phone: (760) 631-5009
Fax: (760) 414-3892
After Hours Phone: (760) 631-5009

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-TH 8AM-7PM, F 8AM-5PM

WOODEN, FEEBY J , PSY

Provider Gender: Female
License number: PSY26436
NPI: 1013035252
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic
Cultural Competency:
WOODEN, FEEBY
3355 MISSION AVE STE 111
OCEANSIDE, CA 92058-1327
Phone: (760) 810-1440
Fax: (760) 444-3297
After Hours Phone: (760) 810-1440
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Arabic
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-TH 8AM-7PM, F 10AM-7PM, SA 10AM-2PM

ZAPPONE, ALIDA, CSW

Provider Gender: Female
License number: 26061
NPI: 1154705598
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
VISTA COMMUNITY CLINIC
4700 N RIVER RD
OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information

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J. Directorio de proveedores de salud mental

Hours: M-TH 8AM-7PM, F
8AM-5PM

ZAPPONE, ALIDA, CSW

Provider Gender: Female

License number: 26061

NPI: 1154705598

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

VISTA COMMUNITY CLINIC

517 N HORNE ST

OCEANSIDE, CA 92054-2518

Phone: (760) 631-5009

Fax: (760) 414-3892

After Hours Phone: (760)

631-5009

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

No

Please contact provider for
Accessibility information

Hours: M-TH 8AM-7PM, F

8AM-5PM

ZAPPONE, ALIDA, CSW

Provider Gender: Female

License number: 26061

NPI: 1154705598

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

VISTA COMMUNITY CLINIC

818 PIER VIEW WAY

OCEANSIDE, CA 92054-2803

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)

631-5000

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

No

Please contact provider for
Accessibility information

Hours: M-TH 8AM-7PM, F

8AM-5PM

POWAY

ANDERSEN, CLAIRE, MD

Provider Gender: Female

License number: 125942

NPI: 1831418664

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

13010 POWAY RD

POWAY, CA 920644520

Phone: (858) 218-3000

Fax: (858) 633-4688

After Hours Phone: (858)

218-3000

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,
Nepali (Individual Language),

Spanish

TDD: Yes

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

BELINSKY, MARIA T, CSW

Provider Gender: Female

License number: LCSW69175

NPI: 1760867824

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

13010 POWAY RD

POWAY, CA 920644520

Phone: (858) 218-3000

Fax: (858) 633-4688

After Hours Phone: (858)

218-3000

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Nepali (Individual Language),

Spanish

TDD: Yes

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

No

Please contact provider for

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accessibility information
Hours: M-F 8AM-5PM

BHAJU, JESHMIN, PSY

Provider Gender: Female
License number: 31625
NPI: 1497081566
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Nepali (Individual Language)
Cultural Competency: NEIGHBORHOOD HEALTHCARE
13010 POWAY RD
POWAY, CA 920644520
Phone: (858) 218-3000
Fax: (858) 633-4688
After Hours Phone: (858) 218-3000
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CALOCA, LAURA, PSY
Provider Gender: Female
License number: 29757
NPI: 1134364698
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:

NEIGHBORHOOD HEALTHCARE
13010 POWAY RD
POWAY, CA 920644520
Phone: (858) 218-3000
Fax: (858) 633-4688
After Hours Phone: (858) 218-3000
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CARLTON PENN, CORNELIA, PSY

Provider Gender: Female
License number: PSY14310
NPI: 1891720611
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
13010 POWAY RD
POWAY, CA 920644520
Phone: (858) 218-3000
Fax: (858) 633-4688
After Hours Phone: (858) 218-3000
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CELAYA, MARY, NPA

Provider Gender: Female
License number: 11425
NPI: 1710060231
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
13010 POWAY RD
POWAY, CA 920644520
Phone: (858) 218-3000
Fax: (858) 633-4688
After Hours Phone: (858) 218-3000
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

CHAO, BRIAN, PSY

Provider Gender: Male

License number: 28796

NPI: 1114196987

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

13010 POWAY RD

POWAY, CA 920644520

Phone: (858) 218-3000

Fax: (858) 633-4688

After Hours Phone: (858)

218-3000

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Nepali (Individual Language),

Spanish

TDD: Yes

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

CORVINI, NICOLAS, NPA

Provider Gender: Male

License number: 55107

NPI: 1194242461

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

13010 POWAY RD

POWAY, CA 920644520

Phone: (858) 218-3000

Fax: (858) 633-4688

After Hours Phone: (858)

218-3000

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Nepali (Individual Language),

Spanish

TDD: Yes

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

COSTELLO, JENNIFER R , CSW

Provider Gender: Female

License number: 84174

NPI: 1619506250

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

13010 POWAY RD

POWAY, CA 920644520

Phone: (858) 218-3000

Fax: (858) 633-4688

After Hours Phone: (858)

218-3000

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Nepali (Individual Language),

Spanish

TDD: Yes

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

EDE, KEKOA, MD

Provider Gender: Male

License number: A101211

NPI: 1134224843

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

13010 POWAY RD

POWAY, CA 920644520

Phone: (858) 218-3000

Fax: (858) 633-4688

After Hours Phone: (858)

218-3000

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Nepali (Individual Language),

Spanish

TDD: Yes

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

GOEHRING, KATHERINE R , NPA

Provider Gender: Female

License number: 95002763

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

NPI: 1972929404
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 13010 POWAY RD
 POWAY, CA 920644520
 Phone: (858) 218-3000
 Fax: (858) 633-4688
 After Hours Phone: (858) 218-3000
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
 TDD: Yes
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

GUARDADO SOTO, RAQUEL E , PSY
 Provider Gender: Female
 License number: 26883
 NPI: 1194999276
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 13010 POWAY RD
 POWAY, CA 920644520

Phone: (858) 218-3000
 Fax: (858) 633-4688
 After Hours Phone: (858) 218-3000
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
 TDD: Yes
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

HOLDEN, MATTHEW, PSY
 Provider Gender: Male
 License number: PSY11197
 NPI: 1740213487
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 13010 POWAY RD
 POWAY, CA 920644520
 Phone: (858) 218-3000
 Fax: (858) 633-4688
 After Hours Phone: (858) 218-3000
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
 TDD: Yes
 Min/Max Age:

Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

KLEAST, RUTH A , CSW
 Provider Gender: Female
 License number: LCSW28504
 NPI: 1326272378
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 13010 POWAY RD
 POWAY, CA 920644520
 Phone: (858) 218-3000
 Fax: (858) 633-4688
 After Hours Phone: (858) 218-3000
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
 TDD: Yes
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

LIU-BARBARO, DOROTHY, MD
 Provider Gender: Female
 License number: A115342
 NPI: 1851602270
 Provider English Spoken: Yes

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J. Directorio de proveedores de salud mental

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

13010 POWAY RD

POWAY, CA 920644520

Phone: (858) 218-3000

Fax: (858) 633-4688

After Hours Phone: (858)

218-3000

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Nepali (Individual Language),

Spanish

TDD: Yes

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

MACIAS, ZIRLEY, CSW

Provider Gender: Female

License number: 96997

NPI: 1245616887

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

13010 POWAY RD

POWAY, CA 920644520

Phone: (858) 218-3000

Fax: (858) 633-4688

After Hours Phone: (858)

218-3000

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Nepali (Individual Language),

Spanish

TDD: Yes

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

MAGOS, DANIEL, CSW

Provider Gender: Male

License number: 88270

NPI: 1578983664

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

13010 POWAY RD

POWAY, CA 920644520

Phone: (858) 218-3000

Fax: (858) 633-4688

After Hours Phone: (858)

218-3000

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Nepali (Individual Language),

Spanish

TDD: Yes

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

MEJIAS, JUAN C , PSY

Provider Gender: Male

License number: 26953

NPI: 1558560730

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

13010 POWAY RD

POWAY, CA 920644520

Phone: (858) 218-3000

Fax: (858) 633-4688

After Hours Phone: (858)

218-3000

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Nepali (Individual Language),

Spanish

TDD: Yes

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

PEDERSEN, SUESAN, MD

Provider Gender: Female

License number: A138369

NPI: 1558603837

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

13010 POWAY RD

POWAY, CA 920644520

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J. Directorio de proveedores de salud mental

Phone: (858) 218-3000
 Fax: (858) 633-4688
 After Hours Phone: (858) 218-3000
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
 TDD: Yes
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

POSTLETHWAITE, ALEJANDRA, MD

Provider Gender: Female
 License number: A88938
 NPI: 1750566915
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: NEIGHBORHOOD HEALTHCARE
 13010 POWAY RD
 POWAY, CA 920644520
 Phone: (858) 218-3000
 Fax: (858) 633-4688
 After Hours Phone: (858) 218-3000
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish

TDD: Yes
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

RODARTE, GABRIEL, MD

Provider Gender: Male
 License number: A87906
 NPI: 1184649212
 Provider English Spoken: Yes
 Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 13010 POWAY RD
 POWAY, CA 920644520
 Phone: (858) 218-3000
 Fax: (858) 633-4688
 After Hours Phone: (858) 218-3000

Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
 TDD: Yes
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

ROSS, ANNE T, NPA
 Provider Gender: Female
 License number: 53359

NPI: 1447334883
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 13010 POWAY RD
 POWAY, CA 920644520
 Phone: (858) 218-3000
 Fax: (858) 633-4688
 After Hours Phone: (858) 218-3000
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
 TDD: Yes
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

SINGH, PARDEEP, NPA

Provider Gender: Female
 License number: 95010750
 NPI: 1992279004
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 13010 POWAY RD
 POWAY, CA 920644520
 Phone: (858) 218-3000
 Fax: (858) 633-4688
 After Hours Phone: (858) 218-3000

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> Yes <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p> <p>STONE, CALVIN, MD <i>Provider Gender:</i> Male <i>License number:</i> 20A18127 <i>NPI:</i> 1275995870 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> NEIGHBORHOOD HEALTHCARE 13010 POWAY RD POWAY, CA 920644520 <i>Phone:</i> (858) 218-3000 <i>Fax:</i> (858) 633-4688 <i>After Hours Phone:</i> (858) 218-3000 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> Yes <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No</p>	<p>Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p> <p>SUOZZO, JOSEPH J , PSY <i>Provider Gender:</i> Male <i>License number:</i> 18393 <i>NPI:</i> 1821013228 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> NEIGHBORHOOD HEALTHCARE 13010 POWAY RD POWAY, CA 920644520 <i>Phone:</i> (858) 218-3000 <i>Fax:</i> (858) 633-4688 <i>After Hours Phone:</i> (858) 218-3000 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> Yes <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p> <p>TEETER-WITT, ALYSSA, PSY <i>Provider Gender:</i> U <i>License number:</i> 31075 <i>NPI:</i> 1932308442 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> NEIGHBORHOOD HEALTHCARE</p>	<p>13010 POWAY RD POWAY, CA 920644520 <i>Phone:</i> (858) 218-3000 <i>Fax:</i> (858) 633-4688 <i>After Hours Phone:</i> (858) 218-3000 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> Yes <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p> <p>THOMAS, PAULA M , CSW <i>Provider Gender:</i> Female <i>License number:</i> 29517 <i>NPI:</i> 1821389966 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> NEIGHBORHOOD HEALTHCARE 13010 POWAY RD POWAY, CA 920644520 <i>Phone:</i> (858) 218-3000 <i>Fax:</i> (858) 633-4688 <i>After Hours Phone:</i> (858) 218-3000 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish</p>
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J. Directorio de proveedores de salud mental

TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

THOMPSON, STEPHANIE G , CSW

Provider Gender: Female
License number: 75185
NPI: 1861938227
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
13010 POWAY RD
POWAY, CA 920644520
Phone: (858) 218-3000
Fax: (858) 633-4688
After Hours Phone: (858) 218-3000
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes

Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

VALLEZ BARLAM, ANDREA, PSY

Provider Gender: Female
License number: PSY9962
NPI: 1710902143
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NEIGHBORHOOD HEALTHCARE
13010 POWAY RD
POWAY, CA 920644520
Phone: (858) 218-3000
Fax: (858) 633-4688
After Hours Phone: (858) 218-3000
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes

Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

VAQUERO, JUANA, PSY

Provider Gender: Female
License number: PSY28364
NPI: 1023459708
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
13010 POWAY RD
POWAY, CA 920644520

Phone: (858) 218-3000
Fax: (858) 633-4688
After Hours Phone: (858) 218-3000
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

WILLIAMS, SHANTRICE M , NPA

Provider Gender: Female
License number: 19664
NPI: 1578865549
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NEIGHBORHOOD HEALTHCARE
13010 POWAY RD
POWAY, CA 920644520
Phone: (858) 218-3000
Fax: (858) 633-4688
After Hours Phone: (858) 218-3000
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish

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J. Directorio de proveedores de salud mental

TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

WOODWORTH, JENNIFER, PSY

Provider Gender: Female
License number: 26963
NPI: 1639362494
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
13010 POWAY RD
POWAY, CA 920644520
Phone: (858) 218-3000
Fax: (858) 633-4688
After Hours Phone: (858) 218-3000
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

POWAY

CHOR FREITAS, MIRIAM, CSW

Provider Gender: Female
License number: 72895
NPI: 1962955666
Provider English Spoken: Yes
Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency: CHOR FREITAS, MIRIAM
12929 POMERADO RD
POWAY, CA 92064-5325
Phone: (858) 842-0234
Fax: (858) 842-0234
After Hours Phone: (858) 842-0234
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Portuguese, Spanish
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M,TU,TH 9AM-7PM, W 10:30AM-7:30PM, F 10AM-5PM, SA 9AM-4PM

JACKSON, VIOLETTE A , CSW

Provider Gender: Female
License number: 15995
NPI: 1275640195
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic
Cultural Competency: VIOLETTE JACKSON
15525 POMERADO RD STE E4
POWAY, CA 92064-2427

Phone: (858) 674-5958
Fax: (858) 451-1104
After Hours Phone: (858) 674-5958
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Arabic
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: TU 9AM-7:30PM, W 9AM-6PM, TH 9AM-8PM

RAMONA

ALTAMIRANO, LEON, PSY

Provider Gender: Male
License number: 23734
NPI: 1619271517
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NORTH COUNTY HEALTH SERVICES
217 EARLHAM ST
RAMONA, CA 92065-1589
Phone: (760) 789-1223
Fax: (760) 789-5946
After Hours Phone: (760) 789-1223
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
TDD: No

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J. Directorio de proveedores de salud mental

Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM, SA 8AM-12PM

ARANGO, MONICA, PSY

Provider Gender: Female
License number: 28316
NPI: 1225090616
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
NORTH COUNTY HEALTH SERVICES
217 EARLHAM ST
RAMONA, CA 92065-1589
Phone: (760) 789-1223
Fax: (760) 789-5946
After Hours Phone: (760) 789-1223
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
TDD: No

Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM, SA 8AM-12PM

CHALMERS, VIRGINIA, CSW

Provider Gender: Female
License number: 28053

NPI: 1265613715
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NORTH COUNTY HEALTH SERVICES
217 EARLHAM ST
RAMONA, CA 92065-1589
Phone: (760) 789-1223
Fax: (760) 789-5946
After Hours Phone: (760) 789-1223
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM, SA 8AM-12PM

CHENG, JIM, NPA

Provider Gender: Male
License number: 22852
NPI: 1790122638
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
NORTH COUNTY HEALTH SERVICES
217 EARLHAM ST
RAMONA, CA 92065-1589
Phone: (760) 789-1223
Fax: (760) 789-5946
After Hours Phone: (760) 789-1223

Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM, SA 8AM-12PM

CORNER, EMILY, MFT

Provider Gender: Female
License number: 102353
NPI: 1093225823
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
NORTH COUNTY HEALTH SERVICES
217 EARLHAM ST
RAMONA, CA 92065-1589
Phone: (760) 789-1223
Fax: (760) 789-5946
After Hours Phone: (760) 789-1223
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for

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J. Directorio de proveedores de salud mental

Accessibility information
Hours: M-F 8AM-5PM, SA
8AM-12PM

CORTIZO, ROSA, PSY

Provider Gender: Female
License number: 22278
NPI: 1952316648

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

Cultural Competency:
NORTH COUNTY HEALTH
SERVICES

217 EARLHAM ST
RAMONA, CA 92065-1589

Phone: (760) 789-1223

Fax: (760) 789-5946

After Hours Phone: (760)

789-1223

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

No

Please contact provider for
Accessibility information

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

8AM-12PM

FLYNN (NEWMAN), DANIELLE I, PSY

Provider Gender: U

License number: 26184

NPI: 1477785137

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NORTH COUNTY HEALTH
SERVICES

217 EARLHAM ST

RAMONA, CA 92065-1589

Phone: (760) 789-1223

Fax: (760) 789-5946

After Hours Phone: (760)

789-1223

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

No

Please contact provider for
Accessibility information

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

8AM-12PM

FREEMAN, WANDA, NPA

Provider Gender: Female

License number: 95003903

NPI: 1659504264

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NORTH COUNTY HEALTH
SERVICES

217 EARLHAM ST

RAMONA, CA 92065-1589

Phone: (760) 789-1223

Fax: (760) 789-5946

After Hours Phone: (760)

789-1223

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

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

8AM-12PM

GEORGIEV, MARY JO C, PSY

Provider Gender: Female

License number: 17954

NPI: 1518996875

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NORTH COUNTY HEALTH
SERVICES

217 EARLHAM ST

RAMONA, CA 92065-1589

Phone: (760) 789-1223

Fax: (760) 789-5946

After Hours Phone: (760)

789-1223

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

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

8AM-12PM

GERAUGHTY (OLEARY),

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J. Directorio de proveedores de salud mental

PAMELA J , CSW

Provider Gender: Female
License number: 25138
NPI: 1063800217
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH SERVICES
217 EARLHAM ST
RAMONA, CA 92065-1589
Phone: (760) 789-1223
Fax: (760) 789-5946
After Hours Phone: (760) 789-1223
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM, SA 8AM-12PM

GUEVARA LEHMAN, NATALIE, CSW

Provider Gender: Female
License number: 63746
NPI: 1578835757
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NORTH COUNTY HEALTH SERVICES
217 EARLHAM ST
RAMONA, CA 92065-1589

Phone: (760) 789-1223
Fax: (760) 789-5946
After Hours Phone: (760) 789-1223
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM, SA 8AM-12PM

GUTIERREZ, VERONICA, PSY

Provider Gender: Female
License number: 21413
NPI: 1467674176
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NORTH COUNTY HEALTH SERVICES
217 EARLHAM ST
RAMONA, CA 92065-1589
Phone: (760) 789-1223
Fax: (760) 789-5946
After Hours Phone: (760) 789-1223
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
TDD: No
Min/Max Age:

Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM, SA 8AM-12PM

JENSEN, BRIAN M , PSY

Provider Gender: Male
License number: 26041
NPI: 1518138049
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH SERVICES
217 EARLHAM ST
RAMONA, CA 92065-1589
Phone: (760) 789-1223
Fax: (760) 789-5946
After Hours Phone: (760) 789-1223
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM, SA 8AM-12PM

KRAPES, MICHAEL B , PSY

Provider Gender: Male
License number: 25077
NPI: 1215233028

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J. Directorio de proveedores de salud mental

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
217 EARLHAM ST
RAMONA, CA 92065-1589
Phone: (760) 789-1223
Fax: (760) 789-5946
After Hours Phone: (760)
789-1223
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM, SA
8AM-12PM

MONTEZ, REBECCA, CSW

Provider Gender: Female
License number: 26869
NPI: 1396047809
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
217 EARLHAM ST
RAMONA, CA 92065-1589
Phone: (760) 789-1223
Fax: (760) 789-5946
After Hours Phone: (760)
789-1223

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM, SA
8AM-12PM

SIMMONS, SUZANNE, NPA

Provider Gender: Female
License number: 95016129
NPI: 1245733450
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
217 EARLHAM ST
RAMONA, CA 92065-1589
Phone: (760) 789-1223
Fax: (760) 789-5946
After Hours Phone: (760)
789-1223
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for

Accessibility information
Hours: M-F 8AM-5PM, SA
8AM-12PM

SIMPSON, ERIC, PSY

Provider Gender: Male
License number: 28885
NPI: 1710110416
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
217 EARLHAM ST
RAMONA, CA 92065-1589
Phone: (760) 789-1223
Fax: (760) 789-5946
After Hours Phone: (760)
789-1223
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM, SA
8AM-12PM

SINNAPPAN, CHRISTOPHER A , MD

Provider Gender: Male
License number: G85649
NPI: 1588740252
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

SERVICES

217 EARLHAM ST
RAMONA, CA 92065-1589
Phone: (760) 789-1223
Fax: (760) 789-5946
After Hours Phone: (760)
789-1223
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

No

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM, SA
8AM-12PM

TAYLOR, CORRDERO A , CSW

Provider Gender: Male

License number: 71284

NPI: 1346501533

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NORTH COUNTY HEALTH
SERVICES

217 EARLHAM ST

RAMONA, CA 92065-1589

Phone: (760) 789-1223

Fax: (760) 789-5946

After Hours Phone: (760)

789-1223

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

No

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM, SA
8AM-12PM

TORRES, HECTOR M , PSY

Provider Gender: Male

License number: 13309

NPI: 1720265614

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

NORTH COUNTY HEALTH
SERVICES

217 EARLHAM ST

RAMONA, CA 92065-1589

Phone: (760) 789-1223

Fax: (760) 789-5946

After Hours Phone: (760)

789-1223

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

No

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM, SA
8AM-12PM

WALKER, SHAYNA T , MD

Provider Gender: Female

License number: A107393

NPI: 1760688295

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NORTH COUNTY HEALTH
SERVICES

217 EARLHAM ST

RAMONA, CA 92065-1589

Phone: (760) 789-1223

Fax: (760) 789-5946

After Hours Phone: (760)

789-1223

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

No

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM, SA
8AM-12PM

SANTA YSABEL

GERNANDT, DEBRA J , MFT

Provider Gender: Female

License number: 50395

NPI: 1538292115

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

GERNANDT, DEBRA

30240 HIGHWAY 78

SANTA YSABEL, CA 920700231

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (760) 765-3578
Fax: (760) 765-2810
After Hours Phone: (760) 765-3578
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M,TU 9AM-7PM, W,F 9AM-6PM, SA 10AM-5PM

HAWTHORNE, KAREN, MFT

Provider Gender: Female
License number: 16894
NPI: 1750449625
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
HAWTHORNE, KAREN
30240 HIGHWAY 78
SANTA YSABEL, CA 920700035
Phone: (760) 765-3578
Fax: (760) 765-2810
After Hours Phone: (760) 765-3578
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No

Please contact provider for Accessibility information
Hours: M 1PM-6PM, TU 10AM-6PM, W,TH 9AM-7PM, F 10AM-4PM, SA 12:30PM-3:30PM

SAN DIEGO

ABDULLAH, KERI, PSY

Provider Gender: Female
License number: 29990
NPI: 1699840587
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619) 515-2424
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

ABDULLAH, KERI, PSY

Provider Gender: Female
License number: 29990

NPI: 1699840587
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-TH 8:30AM-5PM

ABDULLAH, KERI, PSY

Provider Gender: Female
License number: 29990
NPI: 1699840587
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-W,F 8:30AM-5PM</p> <p>ABDULLAH, KERI, PSY <i>Provider Gender:</i> Female <i>License number:</i> 29990 <i>NPI:</i> 1699840587 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST SAN DIEGO, CA 92102-4715 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions</p>	<p><i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p> <p>ABDULLAH, KERI, PSY <i>Provider Gender:</i> Female <i>License number:</i> 29990 <i>NPI:</i> 1699840587 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 2204 NATIONAL AVE SAN DIEGO, CA 92113-3615 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p> <p>ABDULLAH, KERI, PSY <i>Provider Gender:</i> Female <i>License number:</i> 29990 <i>NPI:</i> 1699840587 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes</p>	<p><i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 140 ELM ST SAN DIEGO, CA 92101-2602 <i>Phone:</i> (619) 515-2520 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2520 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p> <p>ABDULLAH, KERI, PSY <i>Provider Gender:</i> Female <i>License number:</i> 29990 <i>NPI:</i> 1699840587 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes</p>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p> <p>ABDULLAH, KERI, PSY <i>Provider Gender:</i> Female <i>License number:</i> 29990 <i>NPI:</i> 1699840587 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1250 6TH AVE STE 100 SAN DIEGO, CA 92101-4368 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p> <p>ABDULLAH, KERI, PSY <i>Provider Gender:</i> Female <i>License number:</i> 29990 <i>NPI:</i> 1699840587 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for</p>	<p>Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p> <p>ABDULLAH, KERI, PSY <i>Provider Gender:</i> Female <i>License number:</i> 29990 <i>NPI:</i> 1699840587 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1250 6TH AVE STE 100 SAN DIEGO, CA 92101-4368 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p> <p>ABDULLAH, KERI, PSY <i>Provider Gender:</i> Female <i>License number:</i> 29990 <i>NPI:</i> 1699840587 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4065 3RD AVE SAN DIEGO, CA 92103-2184 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi,</p>	<p>4874 POLK AVE SAN DIEGO, CA 92105-2026 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p> <p>ABDULLAH, KERI, PSY <i>Provider Gender:</i> Female <i>License number:</i> 29990 <i>NPI:</i> 1699840587 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4065 3RD AVE SAN DIEGO, CA 92103-2184 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi,</p>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

ABDULLAH, KERI, PSY

Provider Gender: Female
License number: 29990
NPI: 1699840587
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

ABERCROMBIE, SHERI L , PSY

Provider Gender: Female
License number: 18536
NPI: 1932292422
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
SAN DIEGO FAMILY CARE
7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858)
810-8700
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Farsi, Spanish,
Vietnamese, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM, SA
8AM-2PM

ABERCROMBIE, SHERI L , PSY

Provider Gender: Female
License number: 18536
NPI: 1932292422
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
SAN DIEGO FAMILY CARE

6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342
Phone: (858) 810-8787
Fax: (858) 279-0377
After Hours Phone: (858)
810-8787
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Spanish, Vietnamese,
Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM, SA
8AM-1PM

AGUILAR, DIANA, CSW

Provider Gender: Female
License number: 83063
NPI: 1194065813
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
SAN YSIDRO HEALTH CENTER
950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
662-4100
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Arabic, Farsi, Hindi, Kannada,
Maithili, Sinhala, Sinhalese,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Spanish, Urdu TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours:	<i>Provider Gender:</i> Female <i>License number:</i> 74440 <i>NPI:</i> 1306151998 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8535 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM	<i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM
AGUIRRE, LEAH B , CSW <i>Provider Gender:</i> Female <i>License number:</i> 74440 <i>NPI:</i> 1306151998 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120 <i>Phone:</i> (619) 515-2424 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2424 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM	AGUIRRE, LEAH B , CSW <i>Provider Gender:</i> Female <i>License number:</i> 74440 <i>NPI:</i> 1306151998 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST SAN DIEGO, CA 92102-4715	AGUIRRE, LEAH B , CSW <i>Provider Gender:</i> Female <i>License number:</i> 74440 <i>NPI:</i> 1306151998 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4065 3RD AVE SAN DIEGO, CA 92103-2184 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
AGUIRRE, LEAH B , CSW		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours:</p>	<p>License number: 74440 NPI: 1306151998 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 140 ELM ST SAN DIEGO, CA 92101-2602 Phone: (619) 515-2520 Fax: After Hours Phone: (619) 515-2520 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>
<p>AGUIRRE, LEAH B , CSW Provider Gender: Female License number: 74440 NPI: 1306151998 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 2204 NATIONAL AVE SAN DIEGO, CA 92113-3615 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>AGUIRRE, LEAH B , CSW Provider Gender: Female License number: 74440 NPI: 1306151998 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143</p>	<p>AGUIRRE, LEAH B , CSW Provider Gender: Female License number: 74440 NPI: 1306151998 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese</p>
<p>AGUIRRE, LEAH B , CSW Provider Gender: Female</p>		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

AGUIRRE, LEAH B , CSW

Provider Gender: Female
 License number: 74440
 NPI: 1306151998
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No

Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

AGUIRRE, LEAH B , CSW

Provider Gender: Female

License number: 74440
 NPI: 1306151998
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No

Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-W,F 8:30AM-5PM

AGUIRRE, LEAH B , CSW

Provider Gender: Female
 License number: 74440
 NPI: 1306151998
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:

Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

AGUIRRE, LEAH B , CSW

Provider Gender: Female
 License number: 74440
 NPI: 1306151998
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

AGUIRRE, WENDY, CSW

Provider Gender: Female
 License number: 74219
 NPI: 1205946282
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

AGUIRRE, WENDY, CSW

Provider Gender: Female
 License number: 74219
 NPI: 1205946282
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

AGUIRRE, WENDY, CSW

Provider Gender: Female
 License number: 74219
 NPI: 1205946282
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-TH 8:30AM-5PM

AGUIRRE, WENDY, CSW

Provider Gender: Female
 License number: 74219
 NPI: 1205946282
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

AGUIRRE, WENDY, CSW

Provider Gender: Female

License number: 74219

NPI: 1205946282

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

AGUIRRE, WENDY, CSW

Provider Gender: Female

License number: 74219

NPI: 1205946282

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax: (619) 702-8536

After Hours Phone: (619)

515-2424

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

AGUIRRE, WENDY, CSW

Provider Gender: Female

License number: 74219

NPI: 1205946282

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

AGUIRRE, WENDY, CSW

Provider Gender: Female

License number: 74219

NPI: 1205946282

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1250 6TH AVE STE 100

SAN DIEGO, CA 92101-4368

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

AGUIRRE, WENDY, CSW

Provider Gender: Female

License number: 74219

NPI: 1205946282

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4874 POLK AVE

SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

AGUIRRE, WENDY, CSW

Provider Gender: Female

License number: 74219

NPI: 1205946282

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

2204 NATIONAL AVE

SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

Yes

Please contact provider for
Accessibility information

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

AGUIRRE, WENDY, CSW

Provider Gender: Female

License number: 74219

NPI: 1205946282

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

140 ELM ST

SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520

Fax:

After Hours Phone: (619)

515-2520

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

ALAVI, ALI S , MD

Provider Gender: Male

License number: A163793

NPI: 1356856694

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

ALFARO, AMY, CSW

Provider Gender: Female

License number: 72874

NPI: 1609326859

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

ALTERS, DENNIS, MD

Provider Gender: Male

License number: G36206

NPI: 1457371635

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

2204 NATIONAL AVE

SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

ALTERS, DENNIS, MD

Provider Gender: Male

License number: G36206

NPI: 1457371635

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

ALTERS, DENNIS, MD

Provider Gender: Male

License number: G36206

NPI: 1457371635

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

ALTERS, DENNIS, MD

Provider Gender: Male
 License number: G36206
 NPI: 1457371635
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2424
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

ALTERS, DENNIS, MD

Provider Gender: Male
 License number: G36206
 NPI: 1457371635
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
 Phone: (619) 515-2338
 Fax: (619) 702-8535
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-TH 8:30AM-5PM

ALTERS, DENNIS, MD

Provider Gender: Male
 License number: G36206
 NPI: 1457371635
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

ALTERS, DENNIS, MD

Provider Gender: Male
 License number: G36206
 NPI: 1457371635
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-W,F 8:30AM-5PM

ALTERS, DENNIS, MD

Provider Gender: Male
License number: G36206
NPI: 1457371635
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

ALTERS, DENNIS, MD

Provider Gender: Male

License number: G36206
NPI: 1457371635
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
4065 3RD AVE
SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:

After Hours Phone: (619) 515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours:

ALTERS, DENNIS, MD

Provider Gender: Male
License number: G36206
NPI: 1457371635
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

ALTERS, DENNIS, MD

Provider Gender: Male
License number: G36206
NPI: 1457371635
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
140 ELM ST
SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619) 515-2520
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM</p> <p>ALTERS, DENNIS, MD Provider Gender: Male License number: G36206 NPI: 1457371635 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: LA MAESTRA COMMUNITY HEALTH CENTERS 4157 FAIRMOUNT AVE SAN DIEGO, CA 92105-1609 Phone: (619) 285-7097 Fax: (619) 564-8140 After Hours Phone: (619) 285-7097 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Spanish TDD: No Min/Max Age: 19/64 Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M-F 8AM-5:30PM</p> <p>ALVAREZ, DIANA P , CSW Provider Gender: Female License number: 81025 NPI: 1013200617 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: LA MAESTRA COMMUNITY HEALTH CENTERS 4060 FAIRMOUNT AVE SAN DIEGO, CA 92105-1608</p>	<p>Phone: (619) 280-4213 Fax: (619) 281-6738 After Hours Phone: (619) 280-4213 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Spanish TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M-F 8AM-5:30PM</p> <p>ALVAREZ, DIANA P , CSW Provider Gender: Female License number: 81025 NPI: 1013200617 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4065 3RD AVE SAN DIEGO, CA 92103-2184 Phone: (619) 515-2300 Fax: 515-2300 After Hours Phone: (619) 515-2300 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No</p>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<i>Min/Max Age:</i>	<i>NPI:</i> 1679766380	<i>Website:</i>
<i>Gender Restriction:</i> No Gender Restrictions	<i>Provider English Spoken:</i> Yes	www.beaconhealthoptions.com
<i>American Sign Language (ASL):</i> Yes	<i>Provider Language(s) Spoken:</i> Cultural Competency:	<i>Accepting New Patients:</i> Yes
Please contact provider for Accessibility information	FAMILY HEALTH CENTERS OF SAN DIEGO	<i>Site English Spoken:</i> Yes
<i>Hours:</i>	4065 3RD AVE	<i>Site Language(s) Spoken:</i> TDD: No
	SAN DIEGO, CA 92103-2184	<i>Min/Max Age:</i>
	<i>Phone:</i> (619) 515-2300	<i>Gender Restriction:</i> No Gender Restrictions
	<i>Fax:</i>	<i>American Sign Language (ASL):</i> No
ANDERSON, NICOLE M , CSW	<i>After Hours Phone:</i> (619) 515-2300	Please contact provider for Accessibility information
<i>Provider Gender:</i> Female	<i>Website:</i>	<i>Hours:</i> W 5PM-9PM
<i>License number:</i> LCSW28443	www.beaconhealthoptions.com	
<i>NPI:</i> 1679766380	<i>Accepting New Patients:</i> Yes	
<i>Provider English Spoken:</i> Yes	<i>Site English Spoken:</i> Yes	ANDREWS GEYMAN, JOY A , PSY
<i>Provider Language(s) Spoken:</i> Cultural Competency:	<i>Site Language(s) Spoken:</i>	<i>Provider Gender:</i> Female
FAMILY HEALTH CENTERS OF SAN DIEGO	American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese	<i>License number:</i> PSY15492
3705 MISSION BLVD	TDD: No	<i>NPI:</i> 1336243013
SAN DIEGO, CA 92109-7104	<i>Min/Max Age:</i>	<i>Provider English Spoken:</i> Yes
<i>Phone:</i> (619) 515-2338	<i>Gender Restriction:</i> No Gender Restrictions	<i>Provider Language(s) Spoken:</i> Cultural Competency:
<i>Fax:</i> (619) 702-8536	<i>American Sign Language (ASL):</i> Yes	ACCESS PSYCHOLOGY SERVICES, PC
<i>After Hours Phone:</i> (619) 515-2338	Please contact provider for Accessibility information	750 B ST STE 2870
<i>Website:</i>	<i>Hours:</i>	SAN DIEGO, CA 92101-8132
www.beaconhealthoptions.com		<i>Phone:</i> (619) 722-0014
<i>Accepting New Patients:</i> Yes	ANDERSON, NICOLE M , CSW	<i>Fax:</i> (619) 327-4174
<i>Site English Spoken:</i> Yes	<i>Provider Gender:</i> Female	<i>After Hours Phone:</i> (619) 722-0014
<i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese	<i>License number:</i> LCSW28443	<i>Website:</i>
TDD: No	<i>NPI:</i> 1679766380	www.beaconhealthoptions.com
<i>Min/Max Age:</i> 0/99	<i>Provider English Spoken:</i> Yes	<i>Accepting New Patients:</i> Yes
<i>Gender Restriction:</i> No Gender Restrictions	<i>Provider Language(s) Spoken:</i> Cultural Competency:	<i>Site English Spoken:</i> Yes
<i>American Sign Language (ASL):</i> Yes	ANDERSON, NICOLE	<i>Site Language(s) Spoken:</i> Spanish
Please contact provider for Accessibility information	6136 MISSION GORGE RD STE 106	TDD: No
<i>Hours:</i> M-W,F 8:30AM-5PM	SAN DIEGO, CA 92120-3413	<i>Min/Max Age:</i>
	<i>Phone:</i> (619) 786-1351	<i>Gender Restriction:</i> No Gender Restrictions
	<i>Fax:</i>	<i>American Sign Language (ASL):</i> No
ANDERSON, NICOLE M , CSW	<i>After Hours Phone:</i> (619) 786-1351	Please contact provider for Accessibility information
<i>Provider Gender:</i> Female		
<i>License number:</i> LCSW28443		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Hours: M-F 9AM-5PM

ANGER, ALEXANDRA C , NPA

Provider Gender: Female
 License number: 95007806
 NPI: 1780042002
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619)
 662-4100
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Arabic, Farsi, Hindi, Kannada,
 Maithili, Sinhala, Sinhalese,
 Spanish, Urdu
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours:

ARAGON, DARINKA M , MD

Provider Gender: Female
 License number: A139241
 NPI: 1114347291
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520

Fax:

After Hours Phone: (619)
 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

ARAGON, DARINKA M , MD

Provider Gender: Female
 License number: A139241
 NPI: 1114347291
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

ARAGON, DARINKA M , MD

Provider Gender: Female
 License number: A139241
 NPI: 1114347291
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

ARAGON, DARINKA M , MD

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: A139241
NPI: 1114347291
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

ARAGON, DARINKA M , MD
Provider Gender: Female
License number: A139241
NPI: 1114347291
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2424
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

ARAGON, DARINKA M , MD
Provider Gender: Female
License number: A139241
NPI: 1114347291
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

ARAGON, DARINKA M , MD
Provider Gender: Female
License number: A139241
NPI: 1114347291
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

ARAGON, DARINKA M , MD
Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: A139241
 NPI: 1114347291
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
 Phone: (619) 515-2338
 Fax: (619) 702-8535
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

ARAGON, DARINKA M , MD
 Provider Gender: Female
 License number: A139241
 NPI: 1114347291
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

ARAGON, DARINKA M , MD
 Provider Gender: Female
 License number: A139241
 NPI: 1114347291
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-W,F 8:30AM-5PM

ARAGON, DARINKA M , MD
 Provider Gender: Female
 License number: A139241
 NPI: 1114347291
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

ARIELLA, LYNDA R , PSY
 Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 19450
 NPI: 1073518965
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:
 After Hours Phone: (619)
 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

ARIELLA, LYNDA R , PSY

Provider Gender: Female
 License number: 19450
 NPI: 1073518965
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

ARIELLA, LYNDA R , PSY

Provider Gender: Female
 License number: 19450
 NPI: 1073518965
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

ARIELLA, LYNDA R , PSY

Provider Gender: Female
 License number: 19450
 NPI: 1073518965
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2424
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

ARIELLA, LYNDA R , PSY

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 19450
NPI: 1073518965
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

ARIELLA, LYNDA R , PSY
Provider Gender: Female
License number: 19450
NPI: 1073518965
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713

Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

ARIELLA, LYNDA R , PSY
Provider Gender: Female
License number: 19450
NPI: 1073518965
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

ARIELLA, LYNDA R , PSY
Provider Gender: Female
License number: 19450
NPI: 1073518965
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4065 3RD AVE
SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:

After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

ARIELLA, LYNDA R , PSY
Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 19450
NPI: 1073518965
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM

ARIELLA, LYNDA R , PSY
Provider Gender: Female
License number: 19450
NPI: 1073518965
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

ARIELLA, LYNDA R , PSY
Provider Gender: Female
License number: 19450
NPI: 1073518965
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

ARIELLA, LYNDA R , PSY
Provider Gender: Female
License number: 19450
NPI: 1073518965
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
2204 NATIONAL AVE
SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

ARONLEE, TRACY S , CSW
Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 83778
NPI: 1619304748
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
SAN DIEGO FAMILY CARE
7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858)
810-8700
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Farsi, Spanish,
Vietnamese, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM, SA
8AM-2PM

ARONLEE, TRACY S , CSW

Provider Gender: Female
License number: 83778
NPI: 1619304748
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
SAN DIEGO FAMILY CARE
6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342
Phone: (858) 810-8787
Fax: (858) 279-0377
After Hours Phone: (858)
810-8787

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Spanish, Vietnamese,
Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM, SA
8AM-1PM

ARSENAULT, DARIN J , PSY

Provider Gender: Male
License number: 24775
NPI: 1528243821
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
SAN YSIDRO HEALTH CENTER
950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
662-4100

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Arabic, Farsi, Hindi, Kannada,
Maithili, Sinhala, Sinhalese,
Spanish, Urdu
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours:

ASH, VIVIAN, CSW

Provider Gender: Female
License number: 14619
NPI: 1033623293
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

ASH, VIVIAN, CSW

Provider Gender: Female
License number: 14619
NPI: 1033623293
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM

ASH, VIVIAN, CSW

Provider Gender: Female
License number: 14619
NPI: 1033623293
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
 515-2520
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

ASH, VIVIAN, CSW

Provider Gender: Female
License number: 14619
NPI: 1033623293
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for

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

Accessibility information
Hours: M-F 8AM-5PM

ASH, VIVIAN, CSW

Provider Gender: Female
License number: 14619
NPI: 1033623293
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

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

ASH, VIVIAN, CSW

Provider Gender: Female
License number: 14619
NPI: 1033623293
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

ASH, VIVIAN, CSW

Provider Gender: Female
License number: 14619
NPI: 1033623293
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4065 3RD AVE
SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,

Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

ASH, VIVIAN, CSW

Provider Gender: Female
License number: 14619
NPI: 1033623293
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
2204 NATIONAL AVE
SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

ASH, VIVIAN, CSW

Provider Gender: Female
License number: 14619
NPI: 1033623293
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

ASH, VIVIAN, CSW

Provider Gender: Female
License number: 14619
NPI: 1033623293
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM

ASH, VIVIAN, CSW

Provider Gender: Female
License number: 14619
NPI: 1033623293
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
515-2424
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

ASH, VIVIAN, CSW

Provider Gender: Female
License number: 14619
NPI: 1033623293
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

ASUNCION, JENNIFER, CSW

Provider Gender: Male

License number: LCSW75956
NPI: 1083056279
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

ASUNCION, JENNIFER, CSW

Provider Gender: Male
License number: LCSW75956
NPI: 1083056279
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
140 ELM ST
SAN DIEGO, CA 92101-2602

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2520

Fax:

After Hours Phone: (619)
515-2520

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

ASUNCION, JENNIFER, CSW

Provider Gender: Male

License number: LCSW75956

NPI: 1083056279

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4874 POLK AVE

SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

ASUNCION, JENNIFER, CSW

Provider Gender: Male

License number: LCSW75956

NPI: 1083056279

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

ASUNCION, JENNIFER, CSW

Provider Gender: Male

License number: LCSW75956

NPI: 1083056279

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax: (619) 702-8536

After Hours Phone: (619)

515-2424

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

ASUNCION, JENNIFER, CSW

Provider Gender: Male

License number: LCSW75956

NPI: 1083056279

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1550 BROADWAY STE 2

SAN DIEGO, CA 92101-5713

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

ASUNCION, JENNIFER, CSW
Provider Gender: Male
License number: LCSW75956
NPI: 1083056279
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM

ASUNCION, JENNIFER, CSW
Provider Gender: Male
License number: LCSW75956
NPI: 1083056279
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

ASUNCION, JENNIFER, CSW
Provider Gender: Male

License number: LCSW75956
NPI: 1083056279
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4065 3RD AVE
SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

ASUNCION, JENNIFER, CSW
Provider Gender: Male
License number: LCSW75956
NPI: 1083056279
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

ASUNCION, JENNIFER, CSW
Provider Gender: Male
License number: LCSW75956
NPI: 1083056279
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

ASUNCION, JENNIFER, CSW
Provider Gender: Male
License number: LCSW75956
NPI: 1083056279
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
2204 NATIONAL AVE
SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

ATALLAH, HANI M , MD
Provider Gender: Male

License number: 132530
NPI: 1104169655
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4065 3RD AVE
SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

AUCOIN, DOUGLAS, CSW
Provider Gender: Male
License number: 24707
NPI: 1699007609
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

AUCOIN, DOUGLAS, CSW

Provider Gender: Male
License number: 24707
NPI: 1699007609
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

AUCOIN, DOUGLAS, CSW

Provider Gender: Male
License number: 24707
NPI: 1699007609
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

AUCOIN, DOUGLAS, CSW

Provider Gender: Male

License number: 24707
NPI: 1699007609
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
140 ELM ST
SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
515-2520
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

AUCOIN, DOUGLAS, CSW

Provider Gender: Male
License number: 24707
NPI: 1699007609
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105-2026

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

AUCOIN, DOUGLAS, CSW

Provider Gender: Male
License number: 24707
NPI: 1699007609
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
515-2424
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

AUCOIN, DOUGLAS, CSW

Provider Gender: Male
License number: 24707
NPI: 1699007609
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4065 3RD AVE
SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

AUCOIN, DOUGLAS, CSW

Provider Gender: Male

License number: 24707
NPI: 1699007609
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

AUCOIN, DOUGLAS, CSW

Provider Gender: Male
License number: 24707
NPI: 1699007609
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
2204 NATIONAL AVE
SAN DIEGO, CA 92113-3615

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

AUCOIN, DOUGLAS, CSW

Provider Gender: Male
 License number: 24707
 NPI: 1699007609
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

AUCOIN, DOUGLAS, CSW

Provider Gender: Male
 License number: 24707
 NPI: 1699007609
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

AUCOIN, DOUGLAS, CSW

Provider Gender: Male

License number: 24707
 NPI: 1699007609
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-W,F 8:30AM-5PM

AVILA, RADOMIR M , CSW

Provider Gender: Male
 License number: 75520
 NPI: 1487937330
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Portuguese, Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-W,F 8:30AM-5PM

AVILA, RADOMIR M , CSW
 Provider Gender: Male
 License number: 75520
 NPI: 1487937330
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Portuguese, Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,

Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

AVILA, RADOMIR M , CSW
 Provider Gender: Male
 License number: 75520
 NPI: 1487937330
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Portuguese, Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:
 After Hours Phone: (619)
 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

AVILA, RADOMIR M , CSW
 Provider Gender: Male
 License number: 75520
 NPI: 1487937330
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Portuguese, Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619)
 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours:

AVILA, RADOMIR M , CSW
 Provider Gender: Male
 License number: 75520
 NPI: 1487937330
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Portuguese, Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

AVILA, RADOMIR M , CSW
 Provider Gender: Male
 License number: 75520
 NPI: 1487937330
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Portuguese, Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2424
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:

American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

AVILA, RADOMIR M , CSW
 Provider Gender: Male
 License number: 75520
 NPI: 1487937330
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Portuguese, Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
 Phone: (619) 515-2338
 Fax: (619) 702-8535
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information

Hours: M-TH 8:30AM-5PM
AVILA, RADOMIR M , CSW
 Provider Gender: Male
 License number: 75520
 NPI: 1487937330
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Portuguese, Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM
AVILA, RADOMIR M , CSW
 Provider Gender: Male
 License number: 75520
 NPI: 1487937330
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Portuguese, Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

SAN DIEGO
1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

AVILA, RADOMIR M , CSW
Provider Gender: Male
License number: 75520
NPI: 1487937330
Provider English Spoken: Yes
Provider Language(s) Spoken:
Portuguese, Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

AVILA, RADOMIR M , CSW
Provider Gender: Male
License number: 75520
NPI: 1487937330
Provider English Spoken: Yes
Provider Language(s) Spoken:
Portuguese, Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for

Accessibility information
Hours: M-F 8:30AM-5PM
AVILA, RADOMIR M , CSW
Provider Gender: Male
License number: 75520
NPI: 1487937330
Provider English Spoken: Yes
Provider Language(s) Spoken:
Portuguese, Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM
BABBITT, CLAIRE M , MFT
Provider Gender: Female
License number: 88233
NPI: 1306219936
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
BABBITT, CLAIRE

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J. Directorio de proveedores de salud mental

16870 W BERNARDO DR STE
400
SAN DIEGO, CA 92127-1678
Phone: (858) 449-7547

Fax:

After Hours Phone: (858)
449-7547

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

TDD: Yes

Min/Max Age: 13/64

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-SA 6:30AM-7PM

BAHENA, SANDRA, PSY

Provider Gender: Female

License number: 29792

NPI: 1073742268

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

LA MAESTRA COMMUNITY

HEALTH CENTERS

4157 FAIRMOUNT AVE

SAN DIEGO, CA 92105-1609

Phone: (619) 285-7097

Fax: (619) 564-8140

After Hours Phone: (619)

285-7097

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

TDD: No

Min/Max Age: 19/64

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours:

BAHENA, SANDRA, PSY

Provider Gender: Female

License number: 29792

NPI: 1073742268

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

LA MAESTRA COMMUNITY

HEALTH CENTERS

4060 FAIRMOUNT AVE

SAN DIEGO, CA 92105-1608

Phone: (619) 280-4213

Fax: (619) 281-6738

After Hours Phone: (619)

280-4213

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

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

BALINGIT, KATRINA T , NPA

Provider Gender: Female

License number: NP95012642

NPI: 1538790605

Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency:

SAN YSIDRO HEALTH CENTER
950 S EUCLID AVE

SAN DIEGO, CA 92114-6201

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Arabic, Farsi, Hindi, Kannada,
Maithili, Sinhala, Sinhalese,
Spanish, Urdu

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours:

BANZON, CHARLES, MFT

Provider Gender: Male

License number: 49126

NPI: 1457422966

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

2204 NATIONAL AVE

SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

BANZON, CHARLES, MFT

Provider Gender: Male
License number: 49126
NPI: 1457422966
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM

BARCELOS ANTONIO, TIAGO, CSW

Provider Gender: Male
License number: 90529
NPI: 1194159871
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

BARCELOS ANTONIO, TIAGO, CSW

Provider Gender: Male
License number: 90529
NPI: 1194159871
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
140 ELM ST
SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
515-2520
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

BARCELOS ANTONIO, TIAGO, CSW

Provider Gender: Male
License number: 90529
NPI: 1194159871
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM

BARCELOS ANTONIO, TIAGO, CSW

Provider Gender: Male
License number: 90529
NPI: 1194159871
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):

Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

BARCELOS ANTONIO, TIAGO, CSW

Provider Gender: Male
License number: 90529
NPI: 1194159871
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

BARCELOS ANTONIO, TIAGO, CSW

Provider Gender: Male
License number: 90529
NPI: 1194159871
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2424
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

BARCELOS ANTONIO, TIAGO, CSW

Provider Gender: Male
License number: 90529
NPI: 1194159871
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p><i>Restrictions</i> <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i></p>	<p><i>NPI:</i> 1194159871 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p>
<p>BARCELOS ANTONIO, TIAGO, CSW <i>Provider Gender:</i> Male <i>License number:</i> 90529 <i>NPI:</i> 1194159871 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4065 3RD AVE SAN DIEGO, CA 92103-2184 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender</p>	<p>BARCELOS ANTONIO, TIAGO, CSW <i>Provider Gender:</i> Male <i>License number:</i> 90529 <i>NPI:</i> 1194159871 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-W,F 8:30AM-5PM</p>	<p>BARCELOS ANTONIO, TIAGO, CSW <i>Provider Gender:</i> Male <i>License number:</i> 90529 <i>NPI:</i> 1194159871 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 2204 NATIONAL AVE SAN DIEGO, CA 92113-3615</p>
<p>BARCELOS ANTONIO, TIAGO, CSW <i>Provider Gender:</i> Male <i>License number:</i> 90529 <i>NPI:</i> 1194159871 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4065 3RD AVE SAN DIEGO, CA 92103-2184 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender</p>	<p>BARCELOS ANTONIO, TIAGO, CSW <i>Provider Gender:</i> Male <i>License number:</i> 90529 <i>NPI:</i> 1194159871 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-W,F 8:30AM-5PM</p>	<p>BARCELOS ANTONIO, TIAGO, CSW <i>Provider Gender:</i> Male <i>License number:</i> 90529 <i>NPI:</i> 1194159871 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 2204 NATIONAL AVE SAN DIEGO, CA 92113-3615</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>License number: 24998 NPI: 1235408972 Provider English Spoken: Yes Provider Language(s) Spoken: Armenian Cultural Competency: MOUNTAIN HEALTH AND COMMUNITY SERVICES INC 316 25TH ST SAN DIEGO, CA 92102-3016 Phone: (619) 445-6200 Fax: (619) 238-5551 After Hours Phone: (619) 445-6200 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Armenian TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M-F 8AM-5PM</p>
<p>BARCELOS ANTONIO, TIAGO, CSW Provider Gender: Male License number: 90529 NPI: 1194159871 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian,</p>	<p>BARMAK, SHANT, PSY Provider Gender: Male License number: 24998 NPI: 1235408972 Provider English Spoken: Yes Provider Language(s) Spoken: Armenian Cultural Competency: MOUNTAIN HEALTH AND COMMUNITY SERVICES INC 4690 EL CAJON BLVD SAN DIEGO, CA 92115-4403 Phone: (619) 445-6200 Fax: (619) 824-9076 After Hours Phone: (619) 445-6200 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Armenian TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M-F 8AM-5PM</p>	<p>BARRATT, REBEKAH A , PSY Provider Gender: Female License number: 23471 NPI: 1609060276 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: SAN DIEGO AMERICAN INDIAN HEALTH CENTER 2630 1ST AVE SAN DIEGO, CA 92103-6599 Phone: (619) 234-2158 Fax: (619) 234-1979 After Hours Phone: (619) 234-2158</p>
<p>BARMAK, SHANT, PSY Provider Gender: Male</p>	<p>BARMAK, SHANT, PSY Provider Gender: Male</p>	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> TDD: No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p> <p>BARTHOLOMEW, SARAH C , CSW <i>Provider Gender:</i> Female <i>License number:</i> 86542 <i>NPI:</i> 1720339708 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8535 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p>	<p>Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM</p> <p>BARTHOLOMEW, SARAH C , CSW <i>Provider Gender:</i> Female <i>License number:</i> 86542 <i>NPI:</i> 1720339708 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST SAN DIEGO, CA 92102-4715 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p> <p>BARTHOLOMEW, SARAH C , CSW <i>Provider Gender:</i> Female <i>License number:</i> 86542 <i>NPI:</i> 1720339708 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 140 ELM ST SAN DIEGO, CA 92101-2602 <i>Phone:</i> (619) 515-2520 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2520 <i>Website:</i> www.beaconhealthoptions.com</p>	<p><i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p> <p>BARTHOLOMEW, SARAH C , CSW <i>Provider Gender:</i> Female <i>License number:</i> 86542 <i>NPI:</i> 1720339708 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 140 ELM ST SAN DIEGO, CA 92101-2602 <i>Phone:</i> (619) 515-2520 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2520 <i>Website:</i> www.beaconhealthoptions.com</p>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

BARTHOLOMEW, SARAH C , CSW

Provider Gender: Female
License number: 86542
NPI: 1720339708
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):

Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM
**BARTHOLOMEW, SARAH C ,
CSW**
Provider Gender: Female
License number: 86542
NPI: 1720339708
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2424
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

BARTHOLOMEW, SARAH C , CSW

Provider Gender: Female
License number: 86542
NPI: 1720339708
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-W,F 8:30AM-5PM

BARTHOLOMEW, SARAH C , CSW

Provider Gender: Female
License number: 86542
NPI: 1720339708
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p><i>Restrictions</i> <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p><i>NPI:</i> 1720339708 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4065 3RD AVE SAN DIEGO, CA 92103-2184 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i></p>
<p>BARTHOLOMEW, SARAH C , CSW <i>Provider Gender:</i> Female <i>License number:</i> 86542 <i>NPI:</i> 1720339708 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>BARTHOLOMEW, SARAH C , CSW <i>Provider Gender:</i> Female <i>License number:</i> 86542 <i>NPI:</i> 1720339708 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i></p>	<p>BARTHOLOMEW, SARAH C , CSW <i>Provider Gender:</i> Female <i>License number:</i> 86542 <i>NPI:</i> 1720339708 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

BASS, GURGIANA, PSY

Provider Gender: Female

License number: 24750

NPI: 1639325277

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

SAN DIEGO FAMILY CARE

6973 LINDA VISTA RD

SAN DIEGO, CA 92111-6342

Phone: (858) 810-8787

Fax: (858) 279-0377

After Hours Phone: (858)

810-8787

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Mandarin, Spanish, Vietnamese,
Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for

Accessibility information

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

8AM-1PM

BASS, GURGIANA, PSY

Provider Gender: Female

License number: 24750

NPI: 1639325277

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

SAN DIEGO FAMILY CARE

7011 LINDA VISTA RD

SAN DIEGO, CA 92111-6307

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858)

810-8700

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Mandarin, Farsi, Spanish,

Vietnamese, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

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

8AM-2PM

BAYLON, ALDO, PSY

Provider Gender: Male

License number: PSY29904

NPI: 1649429150

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

SAN YSIDRO HEALTH CENTER

950 S EUCLID AVE

SAN DIEGO, CA 92114-6201

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Arabic, Farsi, Hindi, Kannada,

Maithili, Sinhala, Sinhalese,

Spanish, Urdu

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours:

BAZZETTA, JAMES J , PSY

Provider Gender: Male

License number: 24443

NPI: 1619162609

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

INTEGRATED HEALTH

PARTNERS - ST VINCENT DE

PAUL VILLAGE INC

1501 IMPERIAL AVE

SAN DIEGO, CA 92101-7638

Phone: (619) 233-8500

Fax: (619) 687-1067

After Hours Phone: (619)

233-8500

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> TDD: No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-W,F 8:30AM-5PM, TH 8:30AM-9PM</p> <p>BENNETT, RACHEL Q , CSW <i>Provider Gender:</i> Female <i>License number:</i> 76466 <i>NPI:</i> 1558659797 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1250 6TH AVE STE 100 SAN DIEGO, CA 92101-4368 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM</p>	<p>Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p> <p>BENNETT, RACHEL Q , CSW <i>Provider Gender:</i> Female <i>License number:</i> 76466 <i>NPI:</i> 1558659797 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p> <p>BENNETT, RACHEL Q , CSW <i>Provider Gender:</i> Female <i>License number:</i> 76466 <i>NPI:</i> 1558659797 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST SAN DIEGO, CA 92102-4715 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i></p>	<p>SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM</p> <p>BENNETT, RACHEL Q , CSW <i>Provider Gender:</i> Female <i>License number:</i> 76466 <i>NPI:</i> 1558659797 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST SAN DIEGO, CA 92102-4715 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i></p>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

BENNETT, RACHEL Q , CSW

Provider Gender: Female

License number: 76466

NPI: 1558659797

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for

Accessibility information

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

BENNETT, RACHEL Q , CSW

Provider Gender: Female

License number: 76466

NPI: 1558659797

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for

Accessibility information

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

BENNETT, RACHEL Q , CSW

Provider Gender: Female

License number: 76466

NPI: 1558659797

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax: (619) 702-8536

After Hours Phone: (619)

515-2424

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for

Accessibility information

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

BENNETT, RACHEL Q , CSW

Provider Gender: Female

License number: 76466

NPI: 1558659797

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>License number: 76466 NPI: 1558659797 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4065 3RD AVE SAN DIEGO, CA 92103-2184 Phone: (619) 515-2300 Fax: After Hours Phone: (619) 515-2300 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>
<p>BENNETT, RACHEL Q , CSW Provider Gender: Female License number: 76466 NPI: 1558659797 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM</p>	<p>BENNETT, RACHEL Q , CSW Provider Gender: Female License number: 76466 NPI: 1558659797 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 2204 NATIONAL AVE SAN DIEGO, CA 92113-3615</p>	<p>BENNETT, RACHEL Q , CSW Provider Gender: Female License number: 76466 NPI: 1558659797 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 140 ELM ST SAN DIEGO, CA 92101-2602 Phone: (619) 515-2520 Fax: After Hours Phone: (619) 515-2520 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese</p>
<p>BENNETT, RACHEL Q , CSW Provider Gender: Female</p>		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

BENZL, JERRY F , MD

Provider Gender: Male
 License number: A154471
 NPI: 1487032082
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-W,F 8:30AM-5PM

BERGER, CAROLYN E , PSY

Provider Gender: Female

License number: 10038
 NPI: 1902181175
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 BERGER, CAROLYN
 3344 4TH AVE
 SAN DIEGO, CA 92103-5704
 Phone: (619) 289-7484
 Fax:

After Hours Phone: (619) 289-7484
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M,TH 8AM-10PM

BERKSON, BARRIE, CSW

Provider Gender: Female
 License number: 63313
 NPI: 1922305465
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes

Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

BERKSON, BARRIE, CSW

Provider Gender: Female
 License number: 63313
 NPI: 1922305465
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2424
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

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

BERKSON, BARRIE, CSW

Provider Gender: Female
License number: 63313
NPI: 1922305465
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

BERKSON, BARRIE, CSW

Provider Gender: Female
License number: 63313
NPI: 1922305465
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO

2204 NATIONAL AVE
SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

BERKSON, BARRIE, CSW

Provider Gender: Female
License number: 63313
NPI: 1922305465
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,

Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

BERKSON, BARRIE, CSW

Provider Gender: Female
License number: 63313
NPI: 1922305465
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4065 3RD AVE
SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

BERKSON, BARRIE, CSW

Provider Gender: Female
License number: 63313
NPI: 1922305465
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

BERKSON, BARRIE, CSW

Provider Gender: Female
License number: 63313
NPI: 1922305465
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

BERKSON, BARRIE, CSW

Provider Gender: Female
License number: 63313
NPI: 1922305465
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
 515-2520
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

BERKSON, BARRIE, CSW

Provider Gender: Female
License number: 63313
NPI: 1922305465
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-W,F 8:30AM-5PM

BERKSON, BARRIE, CSW

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 63313
NPI: 1922305465
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

BERKSON, BARRIE, CSW
Provider Gender: Female
License number: 63313
NPI: 1922305465
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

BESTERFIELD, LYDIA, NPA
Provider Gender: Female
License number: 95013060
NPI: 1265929442
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
SAN DIEGO FAMILY CARE
7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858)
810-8700
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Farsi, Spanish,
Vietnamese, Yue Chinese
TDD: No
Min/Max Age:

Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM, SA
8AM-2PM

BHATIA, PRAKASH K , MD
Provider Gender: Male
License number: A74848
NPI: 1164464137
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
PACIFIC HEALTH SYSTEMS LP
6655 ALVARADO RD
SAN DIEGO, CA 92120-5208
Phone: (619) 287-3270
Fax: (619) 267-9273
After Hours Phone: (619)
287-3270
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours:

BIRNBAUM, DEBORAH, MD
Provider Gender: Female
License number: 20A11387
NPI: 1639308265
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

FAMILY HEALTH CENTERS OF
SAN DIEGO
140 ELM ST
SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520

Fax:

After Hours Phone: (619)
515-2520

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

BIRNBAUM, DEBORAH, MD

Provider Gender: Female

License number: 20A11387

NPI: 1639308265

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4874 POLK AVE

SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

BIRNBAUM, DEBORAH, MD

Provider Gender: Female

License number: 20A11387

NPI: 1639308265

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

2204 NATIONAL AVE

SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

BIRNBAUM, DEBORAH, MD

Provider Gender: Female

License number: 20A11387

NPI: 1639308265

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

BIRNBAUM, DEBORAH, MD

Provider Gender: Female

License number: 20A11387

NPI: 1639308265

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1250 6TH AVE STE 100

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

BIRNBAUM, DEBORAH, MD
Provider Gender: Female
License number: 20A11387
NPI: 1639308265
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian,

Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours:

BIRNBAUM, DEBORAH, MD
Provider Gender: Female
License number: 20A11387
NPI: 1639308265
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

BIRNBAUM, DEBORAH, MD

Provider Gender: Female
License number: 20A11387
NPI: 1639308265
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

BIRNBAUM, DEBORAH, MD
Provider Gender: Female
License number: 20A11387
NPI: 1639308265
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

BIRNBAUM, DEBORAH, MD
 Provider Gender: Female
 License number: 20A11387
 NPI: 1639308265
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2424
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

BIRNBAUM, DEBORAH, MD
 Provider Gender: Female
 License number: 20A11387
 NPI: 1639308265
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-W,F 8:30AM-5PM

BIRNBAUM, DEBORAH, MD
 Provider Gender: Female

License number: 20A11387
 NPI: 1639308265
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
 Phone: (619) 515-2338
 Fax: (619) 702-8535
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

BONDELL, JAMES A , PSY
 Provider Gender: Male
 License number: PSY4842
 NPI: 1558456046
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 BONDELL, JAMES
 2477 CONGRESS ST
 SAN DIEGO, CA 92110-2820
 Phone: (760) 729-4931
 Fax: (760) 729-3846
 After Hours Phone: (760)
 729-4931

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: TU,TH 9AM-7:30PM

BOND, ALAN, PSY

Provider Gender: Male
License number: PSY25805
NPI: 1881927184
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for

Accessibility information
Hours: M-TH 8:30AM-5PM

BOND, ALAN, PSY

Provider Gender: Male
License number: PSY25805
NPI: 1881927184
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

BOND, ALAN, PSY

Provider Gender: Male
License number: PSY25805
NPI: 1881927184
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

4874 POLK AVE
 SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

BOND, ALAN, PSY

Provider Gender: Male
License number: PSY25805
NPI: 1881927184
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

BOND, ALAN, PSY

Provider Gender: Male

License number: PSY25805

NPI: 1881927184

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

BOND, ALAN, PSY

Provider Gender: Male

License number: PSY25805

NPI: 1881927184

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

BOND, ALAN, PSY

Provider Gender: Male

License number: PSY25805

NPI: 1881927184

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax: (619) 702-8536

After Hours Phone: (619)
515-2424

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

BOND, ALAN, PSY

Provider Gender: Male

License number: PSY25805

NPI: 1881927184

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

BOND, ALAN, PSY

Provider Gender: Male
 License number: PSY25805
 NPI: 1881927184
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No

Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

BOND, ALAN, PSY

Provider Gender: Male

License number: PSY25805
 NPI: 1881927184
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No

Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

BOND, ALAN, PSY

Provider Gender: Male
 License number: PSY25805
 NPI: 1881927184
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184

Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours:

BORREGO, DIANA E , NPA

Provider Gender: Female
 License number: 95005019
 NPI: 1184012866
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:
 After Hours Phone: (619) 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

BORREGO, DIANA E , NPA

Provider Gender: Female
 License number: 95005019
 NPI: 1184012866
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2424
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

BORREGO, DIANA E , NPA

Provider Gender: Female

License number: 95005019
 NPI: 1184012866
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
 Phone: (619) 515-2300
 Fax:

After Hours Phone: (619)
 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours:

BORREGO, DIANA E , NPA

Provider Gender: Female
 License number: 95005019
 NPI: 1184012866
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713

Phone: (619) 515-2338
 Fax: (619) 702-8535
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

BORREGO, DIANA E , NPA

Provider Gender: Female
 License number: 95005019
 NPI: 1184012866
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

BORREGO, DIANA E , NPA

Provider Gender: Female
 License number: 95005019
 NPI: 1184012866
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No

Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-W,F 8:30AM-5PM

BORREGO, DIANA E , NPA

Provider Gender: Female

License number: 95005019
 NPI: 1184012866
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No

Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

BORREGO, DIANA E , NPA

Provider Gender: Female
 License number: 95005019
 NPI: 1184012866
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No

Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

BORREGO, DIANA E , NPA

Provider Gender: Female
 License number: 95005019
 NPI: 1184012866
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

BORREGO, DIANA E , NPA

Provider Gender: Female
 License number: 95005019
 NPI: 1184012866
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

BORREGO, DIANA E , NPA

Provider Gender: Female

License number: 95005019
 NPI: 1184012866
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

BORREGO, DIANA E , NPA

Provider Gender: Female
 License number: 95005019
 NPI: 1184012866
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

BOUCHER, DAVID A , PSY

Provider Gender: Male
 License number: 14085
 NPI: 1518966340
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 BOUCHER, DAVID
 3760 CONVOY ST STE 118
 SAN DIEGO, CA 92111-3743
 Phone: (619) 296-8097
 Fax: (619) 260-1036
 After Hours Phone: (619)
 296-8097
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender
 Restrictions

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: W,TH 8AM-7PM

BOULES, FADY S , NPA

Provider Gender: Male
License number: NP95003306
NPI: 1639541022

Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic

Cultural Competency: SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100

Fax:
After Hours Phone: (619) 662-4100
Website: www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu
TDD: No

Min/Max Age:
Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours:

BOWEN, JOHN DAVID, PSY

Provider Gender: Male
License number: PSY30271
NPI: 1861949190

Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100
Fax:

After Hours Phone: (619) 662-4100
Website: www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu
TDD: No

Min/Max Age:
Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours:

BRADDOCK, ADAM, MD

Provider Gender: Male
License number: A114671
NPI: 1013163542

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100
Fax:

After Hours Phone: (619) 662-4100
Website: www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu
TDD: No

Min/Max Age:
Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours:

BRANTMAN, ANNE E , NPA

Provider Gender: Female
License number: 12343
NPI: 1689621633

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

Cultural Competency: SENIOR MEDICAL ASSOCIATES INC
 2810 CAMINO DEL RIO S STE 102

SAN DIEGO, CA 92108-3819
Phone: (619) 299-1419
Fax: (858) 461-6008

After Hours Phone: (619) 299-1419
Website: www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

Spanish
TDD: No
Min/Max Age: 13/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

BROLASKI, GEORGE, MD

Provider Gender: Male
License number: A20748
NPI: 1568502573
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
SAN YSIDRO HEALTH CENTER
950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
662-4100
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Arabic, Farsi, Hindi, Kannada,
Maithili, Sinhala, Sinhalese,
Spanish, Urdu
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours:

BROMLEY, BRIAN, MD

Provider Gender: Male
License number: 20A5363
NPI: 1306049564
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

BUBY, MYRA, CSW

Provider Gender: Female
License number: 23172
NPI: 1093747511
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

BUBY, MYRA, CSW

Provider Gender: Female
License number: 23172
NPI: 1093747511
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

BUBY, MYRA, CSW

Provider Gender: Female

License number: 23172

NPI: 1093747511

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

2204 NATIONAL AVE

SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

BUBY, MYRA, CSW

Provider Gender: Female

License number: 23172

NPI: 1093747511

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

BUBY, MYRA, CSW

Provider Gender: Female

License number: 23172

NPI: 1093747511

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

140 ELM ST

SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520

Fax:

After Hours Phone: (619)

515-2520

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

BUBY, MYRA, CSW

Provider Gender: Female

License number: 23172

NPI: 1093747511

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4874 POLK AVE

SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Hours: M-F 8AM-5PM

BUBY, MYRA, CSW

Provider Gender: Female

License number: 23172

NPI: 1093747511

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1250 6TH AVE STE 100

SAN DIEGO, CA 92101-4368

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

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

BUBY, MYRA, CSW

Provider Gender: Female

License number: 23172

NPI: 1093747511

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

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

BUBY, MYRA, CSW

Provider Gender: Female

License number: 23172

NPI: 1093747511

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax: (619) 702-8536

After Hours Phone: (619)

515-2424

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

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

BUBY, MYRA, CSW

Provider Gender: Female

License number: 23172

NPI: 1093747511

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1550 BROADWAY STE 2

SAN DIEGO, CA 92101-5713

Phone: (619) 515-2338

Fax: (619) 702-8535

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accessibility information
Hours: M-TH 8:30AM-5PM

BUBY, MYRA, CSW

Provider Gender: Female
License number: 23172
NPI: 1093747511
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
4065 3RD AVE
SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours:

BUBY, MYRA, CSW

Provider Gender: Female
License number: 23172
NPI: 1093747511
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

BURGOS, EDNA, CSW

Provider Gender: Female
License number: 85597
NPI: 1134591167
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
4065 3RD AVE
SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours:

BURGOS, EDNA, CSW

Provider Gender: Female
License number: 85597
NPI: 1134591167
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

BURGOS, EDNA, CSW

Provider Gender: Female
License number: 85597
NPI: 1134591167
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

BURGOS, EDNA, CSW

Provider Gender: Female
License number: 85597
NPI: 1134591167
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish

Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
2204 NATIONAL AVE
SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

BURGOS, EDNA, CSW

Provider Gender: Female
License number: 85597
NPI: 1134591167
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM

BURGOS, EDNA, CSW

Provider Gender: Female
License number: 85597
NPI: 1134591167
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
140 ELM ST
SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
515-2520
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM</p>	<p>Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO</p>	<p><i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i></p>
<p>BURGOS, EDNA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 85597 <i>NPI:</i> 1134591167 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120 <i>Phone:</i> (619) 515-2424 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2424 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>
<p>BURGOS, EDNA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 85597 <i>NPI:</i> 1134591167 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i></p>	<p>BURGOS, EDNA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 85597 <i>NPI:</i> 1134591167 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338</p>	<p>BURGOS, EDNA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 85597 <i>NPI:</i> 1134591167 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p> <p>BURGOS, EDNA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 85597 <i>NPI:</i> 1134591167 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8535 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM</p> <p>BURGOS, EDNA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 85597 <i>NPI:</i> 1134591167</p>	<p><i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1250 6TH AVE STE 100 SAN DIEGO, CA 92101-4368 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p> <p>BURNS, PETER B , MD <i>Provider Gender:</i> Male <i>License number:</i> G145142 <i>NPI:</i> 1891727533 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338</p>	<p><i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-W,F 8:30AM-5PM</p> <p>BUTERBAUGH, KRISTY L , CSW <i>Provider Gender:</i> Female <i>License number:</i> 65477 <i>NPI:</i> 1346615838 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender</p>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM	<i>NPI:</i> 1346615838 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST SAN DIEGO, CA 92102-4715 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM	<i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM
BUTERBAUGH, KRISTY L , CSW <i>Provider Gender:</i> Female <i>License number:</i> 65477 <i>NPI:</i> 1346615838 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8535 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM	BUTERBAUGH, KRISTY L , CSW <i>Provider Gender:</i> Female <i>License number:</i> 65477 <i>NPI:</i> 1346615838 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026	BUTERBAUGH, KRISTY L , CSW <i>Provider Gender:</i> Female <i>License number:</i> 65477 <i>NPI:</i> 1346615838 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120 <i>Phone:</i> (619) 515-2424 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2424 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian,

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J. Directorio de proveedores de salud mental

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

BUTERBAUGH, KRISTY L , CSW

Provider Gender: Female

License number: 65477

NPI: 1346615838

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1250 6TH AVE STE 100

SAN DIEGO, CA 92101-4368

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

BUTERBAUGH, KRISTY L , CSW

Provider Gender: Female

License number: 65477

NPI: 1346615838

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

BUTERBAUGH, KRISTY L , CSW

Provider Gender: Female

License number: 65477

NPI: 1346615838

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

2204 NATIONAL AVE

SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

BUTERBAUGH, KRISTY L , CSW

Provider Gender: Female

License number: 65477

NPI: 1346615838

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

BUTERBAUGH, KRISTY L , CSW

Provider Gender: Female

License number: 65477

NPI: 1346615838

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

BUTERBAUGH, KRISTY L , CSW

Provider Gender: Female

License number: 65477

NPI: 1346615838

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

140 ELM ST

SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520

Fax:

After Hours Phone: (619)

515-2520

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

CABREJOS, CLAUDIO, MD

Provider Gender: Male

License number: A71653

NPI: 1033133483

Provider English Spoken: Yes

Provider Language(s) Spoken:

Portuguese, Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

140 ELM ST

SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520

Fax:

After Hours Phone: (619)

515-2520

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

CABREJOS, CLAUDIO, MD

Provider Gender: Male

License number: A71653

NPI: 1033133483

Provider English Spoken: Yes

Provider Language(s) Spoken:

Portuguese, Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4065 3RD AVE

SAN DIEGO, CA 92103-2184

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i></p>	<p>Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p> <p>CABREJOS, CLAUDIO, MD <i>Provider Gender:</i> Male <i>License number:</i> A71653 <i>NPI:</i> 1033133483 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Portuguese, Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8535 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM</p>	<p>FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>
<p>CABREJOS, CLAUDIO, MD <i>Provider Gender:</i> Male <i>License number:</i> A71653 <i>NPI:</i> 1033133483 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Portuguese, Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1250 6TH AVE STE 100 SAN DIEGO, CA 92101-4368 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for</p>	<p>CABREJOS, CLAUDIO, MD <i>Provider Gender:</i> Male <i>License number:</i> A71653 <i>NPI:</i> 1033133483 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Portuguese, Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 2204 NATIONAL AVE SAN DIEGO, CA 92113-3615 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes</p>	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

CABREJOS, CLAUDIO, MD
Provider Gender: Male
License number: A71653
NPI: 1033133483
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Portuguese, Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes

Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM
CABREJOS, CLAUDIO, MD
Provider Gender: Male
License number: A71653
NPI: 1033133483
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Portuguese, Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM
CABREJOS, CLAUDIO, MD
Provider Gender: Male
License number: A71653
NPI: 1033133483
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Portuguese, Spanish

Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-W,F 8:30AM-5PM
CABREJOS, CLAUDIO, MD
Provider Gender: Male
License number: A71653
NPI: 1033133483
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Portuguese, Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

CABREJOS, CLAUDIO, MD
Provider Gender: Male
License number: A71653
NPI: 1033133483
Provider English Spoken: Yes
Provider Language(s) Spoken:
Portuguese, Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
515-2424
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):

Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM
CABREJOS, CLAUDIO, MD
Provider Gender: Male
License number: A71653
NPI: 1033133483
Provider English Spoken: Yes
Provider Language(s) Spoken:
Portuguese, Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM
CANN, RONALD, MD
Provider Gender: Male
License number: G83523
NPI: 1285941401
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency:
COMMUNITY RESEARCH
FOUNDATION INC
1465 30TH ST STE K
SAN DIEGO, CA 92154-3497
Phone: (619) 275-0822
Fax: (619) 696-9573
After Hours Phone: (619)
275-0822
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M,W 9AM-8PM, TU,TH,F
9AM-5PM
CANN, RONALD, MD
Provider Gender: Male
License number: G83523
NPI: 1285941401
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
COMMUNITY RESEARCH
FOUNDATION INC
545 LAUREL ST
SAN DIEGO, CA 92101-1634
Phone: (619) 433-4399
Fax: (619) 233-0453
After Hours Phone: (619)
433-4399
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Site Language(s) Spoken:
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours:

CARBONELL, SONIA, PSY

Provider Gender: Female
License number: 19752
NPI: 1902976343
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: LA MAESTRA COMMUNITY HEALTH CENTERS
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608
Phone: (619) 280-4213
Fax: (619) 281-6738
After Hours Phone: (619) 280-4213
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5:30PM

CARBONELL, SONIA, PSY

Provider Gender: Female

License number: 19752
NPI: 1902976343
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: LA MAESTRA COMMUNITY HEALTH CENTERS
4157 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1609
Phone: (619) 285-7097
Fax: (619) 564-8140
After Hours Phone: (619) 285-7097
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
TDD: No
Min/Max Age: 19/64
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours:

CARDENAS, ALONSO, MD

Provider Gender: Male
License number: A137940
NPI: 1811212145
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
2204 NATIONAL AVE
SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338

Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

CARDENAS, ALONSO, MD

Provider Gender: Male
License number: A137940
NPI: 1811212145
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619) 515-2424
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

CARDENAS, ALONSO, MD

Provider Gender: Male
License number: A137940
NPI: 1811212145
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

CARDENAS, ALONSO, MD

Provider Gender: Male
License number: A137940
NPI: 1811212145
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619) 515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-TH 8:30AM-5PM

CARDENAS, ALONSO, MD

Provider Gender: Male
License number: A137940
NPI: 1811212145
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

CARDENAS, ALONSO, MD

Provider Gender: Male
License number: A137940
NPI: 1811212145
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for

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J. Directorio de proveedores de salud mental

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

CARDENAS, ALONSO, MD

Provider Gender: Male
License number: A137940
NPI: 1811212145
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)
515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

Yes

Please contact provider for
Accessibility information

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

CARDENAS, ALONSO, MD

Provider Gender: Male
License number: A137940
NPI: 1811212145

Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

Yes

Please contact provider for
Accessibility information

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

CARDENAS, ALONSO, MD

Provider Gender: Male
License number: A137940
NPI: 1811212145

Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

Yes

Please contact provider for
Accessibility information

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

CARDENAS, ALONSO, MD

Provider Gender: Male
License number: A137940
NPI: 1811212145

Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4874 POLK AVE

SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

CARDENAS, ALONSO, MD

Provider Gender: Male
License number: A137940
NPI: 1811212145
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
140 ELM ST
SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
515-2520
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

CARILLO, KRISTAL I, CSW

Provider Gender: Female
License number: 80068
NPI: 1871906735
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4065 3RD AVE
SAN DIEGO, CA 92103-2184

Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

CARINO DIOKNO, RHODA, PSY

Provider Gender: Female
License number: 28073
NPI: 1629109483
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,

Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

CARINO DIOKNO, RHODA, PSY

Provider Gender: Female
License number: 28073
NPI: 1629109483
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

CARINO DIOKNO, RHODA, PSY

Provider Gender: Female

License number: 28073

NPI: 1629109483

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

2204 NATIONAL AVE

SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

CARINO DIOKNO, RHODA, PSY

Provider Gender: Female

License number: 28073

NPI: 1629109483

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4065 3RD AVE

SAN DIEGO, CA 92103-2184

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours:

CARINO DIOKNO, RHODA, PSY

Provider Gender: Female

License number: 28073

NPI: 1629109483

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

140 ELM ST

SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520

Fax:

After Hours Phone: (619)

515-2520

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

CARINO DIOKNO, RHODA, PSY

Provider Gender: Female

License number: 28073

NPI: 1629109483

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

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

**CARINO DIOKNO, RHODA,
PSY**

Provider Gender: Female

License number: 28073

NPI: 1629109483

Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

**CARINO DIOKNO, RHODA,
PSY**

Provider Gender: Female

License number: 28073

NPI: 1629109483

Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax: (619) 702-8536

After Hours Phone: (619)

515-2424

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

**CARINO DIOKNO, RHODA,
PSY**

Provider Gender: Female

License number: 28073

NPI: 1629109483

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

**CARINO DIOKNO, RHODA,
PSY**

Provider Gender: Female

License number: 28073

NPI: 1629109483

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1250 6TH AVE STE 100

SAN DIEGO, CA 92101-4368

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

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

CARINO DIOKNO, RHODA, PSY

Provider Gender: Female
License number: 28073
NPI: 1629109483
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-TH 8:30AM-5PM

CARINO DIOKNO, RHODA, PSY

Provider Gender: Female
License number: 28073
NPI: 1629109483
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-W,F 8:30AM-5PM

CARLISH, MICHAEL A , PSY

Provider Gender: Male
License number: 24938
NPI: 1063771863
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
SENIOR MEDICAL ASSOCIATES INC
2810 CAMINO DEL RIO S STE 102
SAN DIEGO, CA 92108-3819
Phone: (619) 299-1419
Fax: (858) 461-6008
After Hours Phone: (619) 299-1419
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CARLTON, SHARMILA G , MD

Provider Gender: Female
License number: A91362
NPI: 1558442566
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
COMMUNITY RESEARCH FOUNDATION INC
743 10TH AVE
SAN DIEGO, CA 92101-6673
Phone: (619) 239-4663
Fax: (619) 239-3045
After Hours Phone: (619) 239-4663
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours:

CARLTON, SHARMILA G , MD

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Gender: Female
License number: A91362
NPI: 1558442566
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
COMMUNITY RESEARCH
FOUNDATION INC
1963 4TH AVE
SAN DIEGO, CA 92101-2394
Phone: (619) 233-3432
Fax: (619) 233-7022
After Hours Phone: (619)
233-3432
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

CARLTON, SHARMILA G , MD

Provider Gender: Female
License number: A91362
NPI: 1558442566
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
COMMUNITY RESEARCH
FOUNDATION INC
1568 6TH AVE
SAN DIEGO, CA 92101-3216
Phone: (619) 696-0822
Fax: (619) 696-9573
After Hours Phone: (619)
696-0822

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-6PM

CARLTON, SHARMILA G , MD

Provider Gender: Female
License number: A91362
NPI: 1558442566
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
COMMUNITY RESEARCH
FOUNDATION INC
1465 30TH ST STE K
SAN DIEGO, CA 92154-3497
Phone: (619) 275-0822
Fax: (619) 696-9573
After Hours Phone: (619)
275-0822
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information

Hours: M,W 9AM-8PM, TU,TH,F
9AM-5PM

CARLTON, SHARMILA G , MD

Provider Gender: Female
License number: A91362
NPI: 1558442566
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
COMMUNITY RESEARCH
FOUNDATION INC
995 GATEWAY CENTER WAY
SAN DIEGO, CA 92102-4500
Phone: (619) 398-2156
Fax: (619) 398-2165
After Hours Phone: (619)
398-2156
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

CARLTON, SHARMILA G , MD

Provider Gender: Female
License number: A91362
NPI: 1558442566
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
COMMUNITY RESEARCH
FOUNDATION INC
892 27TH ST
SAN DIEGO, CA 92154-1444

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 275-0822
 Fax: (619) 696-9573
 After Hours Phone: (619) 275-0822
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Russian
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours:

CARR-LEE, NICOLE, PSY

Provider Gender: Female
 License number: 26191
 NPI: 1316270481
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619) 662-4100
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender

Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours:

CASTELLANOS, TERESITA D , CSW

Provider Gender: Female
 License number: 82782
 NPI: 1598165441
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

CASTELLANOS, TERESITA D , CSW

Provider Gender: Female
 License number: 82782

NPI: 1598165441
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-W,F 8:30AM-5PM

CASTELLANOS, TERESITA D , CSW

Provider Gender: Female
 License number: 82782
 NPI: 1598165441
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

CASTELLANOS, TERESITA D , CSW

Provider Gender: Female
License number: 82782
NPI: 1598165441
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,

Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

CASTELLANOS, TERESITA D , CSW

Provider Gender: Female
License number: 82782
NPI: 1598165441
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

CASTELLANOS, TERESITA D , CSW

Provider Gender: Female
License number: 82782
NPI: 1598165441
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619) 515-2424
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

CASTELLANOS, TERESITA D , CSW

Provider Gender: Female
License number: 82782
NPI: 1598165441
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

CASTELLANOS, TERESITA D , CSW

Provider Gender: Female
License number: 82782
NPI: 1598165441
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

CASTELLANOS, TERESITA D , CSW

Provider Gender: Female
License number: 82782
NPI: 1598165441
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information

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

CASTELLANOS, TERESITA D , CSW

Provider Gender: Female
License number: 82782
NPI: 1598165441
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

CASTELLANOS, TERESITA D , CSW

Provider Gender: Female
License number: 82782
NPI: 1598165441
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

SAN DIEGO
140 ELM ST
SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520

Fax:
After Hours Phone: (619)
515-2520

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No

Min/Max Age:
Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

CHAMBERS, NICOLE, PSY

Provider Gender: Female
License number: PSY30966
NPI: 1821297029

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

SAN YSIDRO HEALTH CENTER
950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100

Fax:
After Hours Phone: (619)
662-4100

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken:
Arabic, Farsi, Hindi, Kannada,

Maithili, Sinhala, Sinhalese,
Spanish, Urdu
TDD: No
Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information
Hours:

CHANG, YUFANG J , MD

Provider Gender: Female
License number: A119710
NPI: 1093918807

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

COMMUNITY RESEARCH
FOUNDATION INC
743 10TH AVE
SAN DIEGO, CA 92101-6673
Phone: (619) 239-4663

Fax: (619) 239-3045
After Hours Phone: (619)
239-4663

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

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

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information
Hours:

CHANG, YUFANG J , MD

Provider Gender: Female

License number: A119710
NPI: 1093918807
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency:
COMMUNITY RESEARCH
FOUNDATION INC
1465 30TH ST STE K
SAN DIEGO, CA 92154-3497

Phone: (619) 275-0822
Fax: (619) 696-9573

After Hours Phone: (619)
275-0822

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

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

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M,W 9AM-8PM, TU,TH,F
9AM-5PM

CHANG, YUFANG J , MD

Provider Gender: Female
License number: A119710
NPI: 1093918807

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

COMMUNITY RESEARCH
FOUNDATION INC
892 27TH ST
SAN DIEGO, CA 92154-1444
Phone: (619) 275-0822

Fax: (619) 696-9573
After Hours Phone: (619)
275-0822

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours:

CHANG, YUFANG J , MD
Provider Gender: Female
License number: A119710
NPI: 1093918807
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
COMMUNITY RESEARCH
FOUNDATION INC
1963 4TH AVE
SAN DIEGO, CA 92101-2394
Phone: (619) 233-3432
Fax: (619) 233-7022
After Hours Phone: (619)
233-3432
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM
CHANG, YUFANG J , MD
Provider Gender: Female
License number: A119710
NPI: 1093918807
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
COMMUNITY RESEARCH
FOUNDATION INC
1568 6TH AVE
SAN DIEGO, CA 92101-3216
Phone: (619) 696-0822
Fax: (619) 696-9573
After Hours Phone: (619)
696-0822
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-6PM

CHAPMAN, DONNA M , MFT
Provider Gender: Female
License number: 83943
NPI: 1457637068
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
CHAPMAN, DONNA
2835 CAMINO DEL RIO S STE
120
SAN DIEGO, CA 92108-3825

Phone: (619) 908-9908
Fax:
After Hours Phone: (619)
908-9908
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M,TU 8:30AM-10PM, W
9AM-10PM, F 8:30AM-9PM, SA
8AM-12PM

CHAPMAN, DONNA M , MFT
Provider Gender: Female
License number: 83943
NPI: 1457637068
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
CHAPMAN, DONNA
2525 CAMINO DEL RIO S STE
107
SAN DIEGO, CA 92108-3718
Phone: (619) 908-9908
Fax:
After Hours Phone: (619)
908-9908
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M,TU 8:30AM-10PM, W 9AM-10PM, F 8:30AM-9PM, SA 8AM-12PM</p>	<p><i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Hindi, Urdu <i>Cultural Competency:</i> SAN YSIDRO HEALTH CENTER 950 S EUCLID AVE SAN DIEGO, CA 92114-6201 <i>Phone:</i> (619) 662-4100</p>	<p><i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Urdu <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M,TU,TH,F 8:30AM-5:30PM, W 10AM-7PM</p>
<p>CHAUDHRI, YASHWANT, MD <i>Provider Gender:</i> Male <i>License number:</i> A67679 <i>NPI:</i> 1043258429 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Hindi, Urdu <i>Cultural Competency:</i> OPERATION SAMAHAN 9995 CARMEL MOUNTAIN RD STE B10 & B11 SAN DIEGO, CA 92129-2889 <i>Phone:</i> (844) 200-2426 <i>Fax:</i> (858) 312-6660 <i>After Hours Phone:</i> (844) 200-2426 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Urdu <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i></p>	<p><i>Fax:</i> <i>After Hours Phone:</i> (619) 662-4100 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i></p>	<p>CHAUHAN, SMIT S , MD <i>Provider Gender:</i> Male <i>License number:</i> A123312 <i>NPI:</i> 1700083391 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> SAN YSIDRO HEALTH CENTER 950 S EUCLID AVE SAN DIEGO, CA 92114-6201 <i>Phone:</i> (619) 662-4100 <i>Fax:</i> <i>After Hours Phone:</i> (619) 662-4100 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No</p>
<p>CHAUDHRI, YASHWANT, MD <i>Provider Gender:</i> Male <i>License number:</i> A67679 <i>NPI:</i> 1043258429</p>	<p>CHAUDHRI, YASHWANT, MD <i>Provider Gender:</i> Male <i>License number:</i> A67679 <i>NPI:</i> 1043258429 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Hindi, Urdu <i>Cultural Competency:</i> OPERATION SAMAHAN 10737 CAMINO RUIZ STE 235 SAN DIEGO, CA 92126-2375 <i>Phone:</i> (844) 200-2426 <i>Fax:</i> (858) 695-9074 <i>After Hours Phone:</i> (844) 200-2426</p>	<p><i>After Hours Phone:</i> (619) 662-4100 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No</p>

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J. Directorio de proveedores de salud mental

Please contact provider for
Accessibility information
Hours:

CHAUHAN, SMIT S , MD

Provider Gender: Male
License number: A123312
NPI: 1700083391
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
YASHWANT CHAUDRI MD A
PROF CORP
7850 VISTA HILL AVE
SAN DIEGO, CA 92123-2717
Phone: (858) 836-8434
Fax: (619) 596-9893
After Hours Phone: (858)
836-8434
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No

Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No

Please contact provider for
Accessibility information
Hours: M-F 6AM-6PM

CHAUHAN, SMIT S , MD

Provider Gender: Male
License number: A123312
NPI: 1700083391
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
OPERATION SAMAHAN
9995 CARMEL MOUNTAIN RD
STE B10 & B11
SAN DIEGO, CA 92129-2889

Phone: (844) 200-2426
Fax: (858) 312-6660
After Hours Phone: (844)
200-2426
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Urdu
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M,TU,TH,F
8:30AM-5:30PM, W 10AM-7PM

CHAUHAN, SMIT S , MD

Provider Gender: Male
License number: A123312
NPI: 1700083391
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126-2375
Phone: (844) 200-2426
Fax: (858) 695-9074
After Hours Phone: (844)
200-2426
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Urdu
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M,TU,TH,F
8:30AM-5:30PM, W 10AM-7PM

CHAUHAN, SMIT S , MD

Provider Gender: Male
License number: A123312
NPI: 1700083391
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
YASHWANT CHAUDRI MD A
PROF CORP
4077 FIFTH AVE
SAN DIEGO, CA 92103-2105
Phone: (619) 294-8111
Fax:

After Hours Phone: (619)
294-8111
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No

Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours:

CHEN, ANGELA, MFT

Provider Gender: Female
License number: LMFT40923
NPI: 1811027956
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

SAN DIEGO
1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

CHEN, ANGELA, MFT
Provider Gender: Female
License number: LMFT40923
NPI: 1811027956
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4065 3RD AVE
SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

CHEN, ANGELA, MFT
Provider Gender: Female
License number: LMFT40923
NPI: 1811027956
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

CHEN, ANGELA, MFT
Provider Gender: Female
License number: LMFT40923
NPI: 1811027956
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

CHEN, ANGELA, MFT
Provider Gender: Female
License number: LMFT40923
NPI: 1811027956
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619) 515-2424
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

CHEN, ANGELA, MFT

Provider Gender: Female
License number: LMFT40923
NPI: 1811027956
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
140 ELM ST
SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
515-2520
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

CHEN, ANGELA, MFT

Provider Gender: Female
License number: LMFT40923
NPI: 1811027956
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

CHEN, ANGELA, MFT

Provider Gender: Female

License number: LMFT40923
NPI: 1811027956
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:

Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

CHEN, ANGELA, MFT

Provider Gender: Female
License number: LMFT40923
NPI: 1811027956
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105-2026

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

CHEN, ANGELA, MFT

Provider Gender: Female
License number: LMFT40923
NPI: 1811027956
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
2204 NATIONAL AVE
SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

CHEN, ANGELA, MFT

Provider Gender: Female
License number: LMFT40923
NPI: 1811027956
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

CHEN, ANGELA, MFT

Provider Gender: Female

License number: LMFT40923
NPI: 1811027956
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM

CHERNOBELSKY, RONIT L , MD

Provider Gender: Female
License number: A107075
NPI: 1154468684
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
COMMUNITY RESEARCH
FOUNDATION INC
892 27TH ST
SAN DIEGO, CA 92154-1444

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 275-0822
 Fax: (619) 696-9573
 After Hours Phone: (619) 275-0822
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Russian
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours:

CHERNOBELSKY, RONIT L , MD

Provider Gender: Female
 License number: A107075
 NPI: 1154468684
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 COMMUNITY RESEARCH FOUNDATION INC
 1963 4TH AVE
 SAN DIEGO, CA 92101-2394
 Phone: (619) 233-3432
 Fax: (619) 233-7022
 After Hours Phone: (619) 233-3432
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Russian
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender

Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

CHERNOBELSKY, RONIT L , MD

Provider Gender: Female
 License number: A107075
 NPI: 1154468684
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 COMMUNITY RESEARCH FOUNDATION INC
 995 GATEWAY CENTER WAY
 SAN DIEGO, CA 92102-4500
 Phone: (619) 398-2156
 Fax: (619) 398-2165
 After Hours Phone: (619) 398-2156
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

CHERNOBELSKY, RONIT L , MD

Provider Gender: Female
 License number: A107075
 NPI: 1154468684
 Provider English Spoken: Yes

Provider Language(s) Spoken:
 Cultural Competency:
 COMMUNITY RESEARCH FOUNDATION INC
 1465 30TH ST STE K
 SAN DIEGO, CA 92154-3497
 Phone: (619) 275-0822
 Fax: (619) 696-9573
 After Hours Phone: (619) 275-0822
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Russian
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M,W 9AM-8PM, TU,TH,F 9AM-5PM

CHERNOBELSKY, RONIT L , MD

Provider Gender: Female
 License number: A107075
 NPI: 1154468684
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 COMMUNITY RESEARCH FOUNDATION INC
 1260 MORENA BLVD
 SAN DIEGO, CA 92110-3889
 Phone: (619) 398-0355
 Fax: (619) 398-0350
 After Hours Phone: (619) 398-0355
 Website:
 www.beaconhealthoptions.com

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

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

CHERNOBELSKY, RONIT L , MD

Provider Gender: Female

License number: A107075

NPI: 1154468684

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

COMMUNITY RESEARCH FOUNDATION INC

1568 6TH AVE

SAN DIEGO, CA 92101-3216

Phone: (619) 696-0822

Fax: (619) 696-9573

After Hours Phone: (619)

696-0822

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Russian

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: M-F 8:30AM-6PM

CHI, IDA C , CSW

Provider Gender: Female

License number: 21911

NPI: 1407003874

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

SAN DIEGO FAMILY CARE

7011 LINDA VISTA RD

SAN DIEGO, CA 92111-6307

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858)

810-8700

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Mandarin, Farsi, Spanish,

Vietnamese, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL):

No

Please contact provider for Accessibility information

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

8AM-2PM

CHRISTENSEN, MELISSA, CSW

Provider Gender: Female

License number: 69616

NPI: 1922313394

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619) 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

CHRISTENSEN, MELISSA, CSW

Provider Gender: Female

License number: 69616

NPI: 1922313394

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax: (619) 702-8536

After Hours Phone: (619)

515-2424

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

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J. Directorio de proveedores de salud mental

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

CHRISTENSEN, MELISSA, CSW

Provider Gender: Female

License number: 69616

NPI: 1922313394

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

140 ELM ST

SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520

Fax:

After Hours Phone: (619)

515-2520

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

CHRISTENSEN, MELISSA, CSW

Provider Gender: Female

License number: 69616

NPI: 1922313394

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1250 6TH AVE STE 100

SAN DIEGO, CA 92101-4368

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

CHRISTENSEN, MELISSA, CSW

Provider Gender: Female

License number: 69616

NPI: 1922313394

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

CHRISTENSEN, MELISSA, CSW

Provider Gender: Female

License number: 69616

NPI: 1922313394

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

CHRISTENSEN, MELISSA, CSW

Provider Gender: Female

License number: 69616

NPI: 1922313394

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4874 POLK AVE

SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

CHRISTENSEN, MELISSA, CSW

Provider Gender: Female

License number: 69616

NPI: 1922313394

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1550 BROADWAY STE 2

SAN DIEGO, CA 92101-5713

Phone: (619) 515-2338

Fax: (619) 702-8535

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

CHRISTENSEN, MELISSA, CSW

Provider Gender: Female

License number: 69616

NPI: 1922313394

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

CHRISTENSEN, MELISSA, CSW

Provider Gender: Female

License number: 69616

NPI: 1922313394

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

2204 NATIONAL AVE

SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>Accessibility information <i>Hours:</i> CHRISTENSEN, MELISSA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 69616 <i>NPI:</i> 1922313394 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>10981 SAN DIEGO MISSION RD STE 114 SAN DIEGO, CA 92108-2448 <i>Phone:</i> (619) 280-0285 <i>Fax:</i> (619) 280-0286 <i>After Hours Phone:</i> (619) 280-0285 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> <i>TDD:</i> No <i>Min/Max Age:</i> 0/64 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 10AM-5PM</p>
<p>CHRISTENSEN, MELISSA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 69616 <i>NPI:</i> 1922313394 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4065 3RD AVE SAN DIEGO, CA 92103-2184 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for</p>	<p>CLARK, MARY M , PSY <i>Provider Gender:</i> Female <i>License number:</i> 17897 <i>NPI:</i> 1659374775 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> CLARK, MARY</p>	<p>CLEMENT, LUIS, PSY <i>Provider Gender:</i> Male <i>License number:</i> 28534 <i>NPI:</i> 1235364712 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> SAN DIEGO AMERICAN INDIAN HEALTH CENTER 2630 1ST AVE SAN DIEGO, CA 92103-6599 <i>Phone:</i> (619) 234-2158 <i>Fax:</i> (619) 234-1979 <i>After Hours Phone:</i> (619) 234-2158 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p> <p>CLONTS, PAUL A , CSW <i>Provider Gender:</i> Male <i>License number:</i> 87259 <i>NPI:</i> 1467808568 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-W,F 8:30AM-5PM</p> <p>COLLINS, CONSTANCE A , CSW <i>Provider Gender:</i> Female <i>License number:</i> 23330 <i>NPI:</i> 1477600195</p>	<p><i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> SAN DIEGO AMERICAN INDIAN HEALTH CENTER 2630 1ST AVE SAN DIEGO, CA 92103-6599 <i>Phone:</i> (619) 234-2158 <i>Fax:</i> (619) 234-1979 <i>After Hours Phone:</i> (619) 234-2158 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p> <p>COMBS, LAURI, CSW <i>Provider Gender:</i> Female <i>License number:</i> LCSW75330 <i>NPI:</i> 1538398979 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4065 3RD AVE SAN DIEGO, CA 92103-2184 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes</p>	<p><i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i></p> <p>CORBETT, KIMBERLY F , PSY <i>Provider Gender:</i> Female <i>License number:</i> 21669 <i>NPI:</i> 1235239823 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> CORBETT, KIMBERLY 4411 30TH ST STE 101 SAN DIEGO, CA 92116-4286 <i>Phone:</i> (619) 298-2098 <i>Fax:</i> (619) 298-2098 <i>After Hours Phone:</i> (619) 298-2098 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> <i>TDD:</i> No <i>Min/Max Age:</i> 0/64 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-W,F 8AM-6PM, TH 8AM-7:30PM</p> <p>COURT, MARIA C , MD</p>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Gender: Female
License number: A113797
NPI: 1316196108
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours:

CROCKFORD, DANE, PSY
Provider Gender: Male
License number: 28313
NPI: 1780031831
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713

Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-TH 8:30AM-5PM

CROCKFORD, DANE, PSY
Provider Gender: Male
License number: 28313
NPI: 1780031831
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CROCKFORD, DANE, PSY
Provider Gender: Male
License number: 28313
NPI: 1780031831
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:

After Hours Phone: (619) 515-2300
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours:

CROCKFORD, DANE, PSY
Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 28313
NPI: 1780031831
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

CROCKFORD, DANE, PSY

Provider Gender: Male
License number: 28313
NPI: 1780031831
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

CROCKFORD, DANE, PSY

Provider Gender: Male
License number: 28313
NPI: 1780031831
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

CROCKFORD, DANE, PSY

Provider Gender: Male
License number: 28313
NPI: 1780031831
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
515-2424
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

CROCKFORD, DANE, PSY

Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 28313
NPI: 1780031831
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

CROCKFORD, DANE, PSY

Provider Gender: Male
License number: 28313
NPI: 1780031831
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
 515-2520
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

CROCKFORD, DANE, PSY

Provider Gender: Male
License number: 28313
NPI: 1780031831
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-W,F 8:30AM-5PM

CROCKFORD, DANE, PSY

Provider Gender: Male
License number: 28313
NPI: 1780031831
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

CROCKFORD, DANE, PSY

Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 28313
 NPI: 1780031831
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

**CRUZ ARAUJO, ANDREA L ,
 MD**
 Provider Gender: Female
 License number: A160789
 NPI: 1124401435
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-W,F 8:30AM-5PM

CUELLAR, BETHANY, MFT
 Provider Gender: Female
 License number: 79616
 NPI: 1720388374
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 LA MAESTRA COMMUNITY
 HEALTH CENTERS
 4157 FAIRMOUNT AVE
 SAN DIEGO, CA 92105-1609
 Phone: (619) 285-7097
 Fax: (619) 564-8140
 After Hours Phone: (619)
 285-7097
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish
 TDD: No
 Min/Max Age: 19/64

Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours:

CUELLAR, BETHANY, MFT
 Provider Gender: Female
 License number: 79616
 NPI: 1720388374
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 LA MAESTRA COMMUNITY
 HEALTH CENTERS
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105-1608
 Phone: (619) 280-4213
 Fax: (619) 281-6738
 After Hours Phone: (619)
 280-4213
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5:30PM

CUTLER, APRYL, NPA
 Provider Gender: Female
 License number: 95012457
 NPI: 1467960120
 Provider English Spoken: Yes
 Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>Cultural Competency:</i> SAN YSIDRO HEALTH CENTER 950 S EUCLID AVE SAN DIEGO, CA 92114-6201 <i>Phone:</i> (619) 662-4100 <i>Fax:</i> <i>After Hours Phone:</i> (619) 662-4100 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i></p>	<p><i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p><i>Hours:</i> M-F 8:30AM-5PM DALONSO, SANDRA L , CSW <i>Provider Gender:</i> Female <i>License number:</i> 82240 <i>NPI:</i> 1841797644 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 2204 NATIONAL AVE SAN DIEGO, CA 92113-3615 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>
<p>DALONSO, SANDRA L , CSW <i>Provider Gender:</i> Female <i>License number:</i> 82240 <i>NPI:</i> 1841797644 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes</p>	<p>DALONSO, SANDRA L , CSW <i>Provider Gender:</i> Female <i>License number:</i> 82240 <i>NPI:</i> 1841797644 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information</p>	<p>DALONSO, SANDRA L , CSW <i>Provider Gender:</i> Female <i>License number:</i> 82240 <i>NPI:</i> 1841797644 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1250 6TH AVE STE 100</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

DALONSO, SANDRA L , CSW
 Provider Gender: Female
 License number: 82240
 NPI: 1841797644
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,

Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

DALONSO, SANDRA L , CSW
 Provider Gender: Female
 License number: 82240
 NPI: 1841797644
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

DALONSO, SANDRA L , CSW

Provider Gender: Female
 License number: 82240
 NPI: 1841797644
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
 Phone: (619) 515-2338
 Fax: (619) 702-8535
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

DALONSO, SANDRA L , CSW
 Provider Gender: Female
 License number: 82240
 NPI: 1841797644
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2520

Fax:

After Hours Phone: (619)
515-2520

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

DALONSO, SANDRA L , CSW

Provider Gender: Female

License number: 82240

NPI: 1841797644

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

DALONSO, SANDRA L , CSW

Provider Gender: Female

License number: 82240

NPI: 1841797644

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax: (619) 702-8536

After Hours Phone: (619)

515-2424

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

DALONSO, SANDRA L , CSW

Provider Gender: Female

License number: 82240

NPI: 1841797644

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4874 POLK AVE

SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

DALONSO, SANDRA L , CSW

Provider Gender: Female

License number: 82240

NPI: 1841797644

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4065 3RD AVE

SAN DIEGO, CA 92103-2184

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)
515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours:

DAN, WENDY L , CSW

Provider Gender: Female

License number: 26015

NPI: 1700224037

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax: (619) 702-8536

After Hours Phone: (619)

515-2424

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

DAN, WENDY L , CSW

Provider Gender: Female

License number: 26015

NPI: 1700224037

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)
515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

DAN, WENDY L , CSW

Provider Gender: Female

License number: 26015

NPI: 1700224037

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)
515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

DAN, WENDY L , CSW

Provider Gender: Female

License number: 26015

NPI: 1700224037

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM

DAN, WENDY L , CSW
Provider Gender: Female
License number: 26015
NPI: 1700224037
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

DAN, WENDY L , CSW
Provider Gender: Female
License number: 26015
NPI: 1700224037
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information

Hours: M-F 8AM-5PM
DAN, WENDY L , CSW
Provider Gender: Female
License number: 26015
NPI: 1700224037
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619) 515-2520
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM
DAN, WENDY L , CSW
Provider Gender: Female
License number: 26015
NPI: 1700224037
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

SAN DIEGO
2204 NATIONAL AVE
SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

DAN, WENDY L , CSW
Provider Gender: Female
License number: 26015
NPI: 1700224037
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4065 3RD AVE
SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

DAN, WENDY L , CSW
Provider Gender: Female
License number: 26015
NPI: 1700224037
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for

Accessibility information
Hours: M-F 8:30AM-5PM
DAN, WENDY L , CSW
Provider Gender: Female
License number: 26015
NPI: 1700224037
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM
DAN, WENDY L , CSW
Provider Gender: Female
License number: 26015
NPI: 1700224037
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>Site English Spoken: Yes Site Language(s) Spoken: Spanish TDD: No Min/Max Age: 13/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M,TU,TH 8AM-8PM, W,F 8AM-5PM, SA 8AM-12PM</p>	<p>1PM-6PM</p> <p>DE SILVA, NIHAL, MD Provider Gender: Male License number: C135933 NPI: 1003834789 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: SAN YSIDRO HEALTH CENTER 950 S EUCLID AVE SAN DIEGO, CA 92114-6201 Phone: (619) 662-4100 Fax: After Hours Phone: (619) 662-4100 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours:</p>
<p>DE LEEUW, KELLEY, MD Provider Gender: Female License number: A114857 NPI: 1720395361 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: NESTOR COMMUNITY HEALTH CENTER 1016 OUTER RD SAN DIEGO, CA 92154-1351 Phone: (619) 429-3733 Fax: (619) 628-5550 After Hours Phone: (619) 429-3733 Website: www.beaconhealthoptions.com Accepting New Patients: Yes</p>	<p>DE LLANO, CARMEN, PSY Provider Gender: Female License number: PSY11154 NPI: 1992752406 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: DR. CARMEN DE LLANO, PH.D. 3505 CAMINO DEL RIO S STE 335 SAN DIEGO, CA 92108-4090 Phone: (619) 584-6299 Fax: (619) 468-6917 After Hours Phone: (619) 584-6299 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Spanish TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M-W 1PM-8:30PM, TH</p>	<p>DEAM, JONATHAN, MD Provider Gender: Male License number: A126198 NPI: 1982864948 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-W,F 8:30AM-5PM

DEBBOLD, ERIC M , MD

Provider Gender: Male
 License number: 164068
 NPI: 1144726415
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-W,F 8:30AM-5PM

DEIGNAN, PATRICIA, CSW

Provider Gender: Female
 License number: 21861
 NPI: 1679630776
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 PATRICIA, DEIGNAN
 2496 E ST STE 2F
 SAN DIEGO, CA 92102-6208
 Phone: (619) 723-9244
 Fax:

After Hours Phone: (619)
 723-9244
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: TU 9AM-5PM, W,TH
 9AM-5:30PM, F 9AM-1:30PM

DEWART, ELIZABETH, NPA

Provider Gender: Female
 License number: 22736
 NPI: 1407027618
 Provider English Spoken: Yes

Provider Language(s) Spoken:
 Cultural Competency:
 SAN DIEGO FAMILY CARE
 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111-6342
 Phone: (858) 810-8787
 Fax: (858) 279-0377
 After Hours Phone: (858)
 810-8787
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Mandarin, Spanish, Vietnamese,
 Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM, SA
 8AM-1PM

DIAZ, LIZETH, CSW

Provider Gender: Female
 License number: 97277
 NPI: 1124457023
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

DIAZ, LIZETH, CSW

Provider Gender: Female
License number: 97277
NPI: 1124457023
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for

Accessibility information
Hours: M-TH 8:30AM-5PM

DIAZ, LIZETH, CSW

Provider Gender: Female
License number: 97277
NPI: 1124457023
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

DIAZ, LIZETH, CSW

Provider Gender: Female
License number: 97277
NPI: 1124457023
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

4065 3RD AVE
 SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

DIAZ, LIZETH, CSW

Provider Gender: Female
License number: 97277
NPI: 1124457023
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

DIAZ, LIZETH, CSW

Provider Gender: Female

License number: 97277

NPI: 1124457023

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax: (619) 702-8536

After Hours Phone: (619)

515-2424

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

DIAZ, LIZETH, CSW

Provider Gender: Female

License number: 97277

NPI: 1124457023

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

DIAZ, LIZETH, CSW

Provider Gender: Female

License number: 97277

NPI: 1124457023

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

DIAZ, LIZETH, CSW

Provider Gender: Female

License number: 97277

NPI: 1124457023

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

140 ELM ST

SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520

Fax:

After Hours Phone: (619)

515-2520

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

DIAZ, LIZETH, CSW

Provider Gender: Female
 License number: 97277
 NPI: 1124457023
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

DIAZ, LIZETH, CSW

Provider Gender: Female

License number: 97277
 NPI: 1124457023
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

DIA, ALI R , MD

Provider Gender: Male
 License number: A47803
 NPI: 1912031030
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619) 662-4100

Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours:

DOBOS, DAVID, MD

Provider Gender: Male
 License number: G57276
 NPI: 1548318348
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM

DOBOS, DAVID, MD

Provider Gender: Male
License number: G57276
NPI: 1548318348

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO

1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536

After Hours Phone: (619)
515-2338

Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

DOBOS, DAVID, MD

Provider Gender: Male
License number: G57276
NPI: 1548318348

Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424

Fax: (619) 702-8536
After Hours Phone: (619)
515-2424

Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

DOBOS, DAVID, MD

Provider Gender: Male
License number: G57276
NPI: 1548318348

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO

4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338

Fax: (619) 702-8536
After Hours Phone: (619)
515-2338

Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

DOBOS, DAVID, MD

Provider Gender: Male
License number: G57276
NPI: 1548318348

Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO

1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338

Fax: (619) 702-8535
After Hours Phone: (619)
515-2338

Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accessibility information
Hours: M-TH 8:30AM-5PM

DOBOS, DAVID, MD

Provider Gender: Male
License number: G57276
NPI: 1548318348
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)
515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

DOBOS, DAVID, MD

Provider Gender: Male
License number: G57276
NPI: 1548318348

Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency:
FAMILY HEALTH CENTERS OF

SAN DIEGO

4094 4TH AVE
SAN DIEGO, CA 92103-2143

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

DOBOS, DAVID, MD

Provider Gender: Male
License number: G57276
NPI: 1548318348

Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency:
FAMILY HEALTH CENTERS OF

SAN DIEGO

4874 POLK AVE

SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

DOBOS, DAVID, MD

Provider Gender: Male
License number: G57276
NPI: 1548318348

Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency:
FAMILY HEALTH CENTERS OF

SAN DIEGO

4065 3RD AVE

SAN DIEGO, CA 92103-2184

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

DOBOS, DAVID, MD

Provider Gender: Male

License number: G57276

NPI: 1548318348

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

140 ELM ST

SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520

Fax:

After Hours Phone: (619)

515-2520

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

DOBOS, DAVID, MD

Provider Gender: Male

License number: G57276

NPI: 1548318348

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

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

DOBOS, DAVID, MD

Provider Gender: Male

License number: G57276

NPI: 1548318348

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

2204 NATIONAL AVE

SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

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

DRISCOLL, MICHAEL S , CSW

Provider Gender: Male

License number: 93951

NPI: 1659761880

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1550 BROADWAY STE 2

SAN DIEGO, CA 92101-5713

Phone: (619) 515-2338

Fax: (619) 702-8535

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

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

DRISCOLL, MICHAEL S , CSW

Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 93951
NPI: 1659761880
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

DRISCOLL, MICHAEL S , CSW

Provider Gender: Male
License number: 93951
NPI: 1659761880
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
140 ELM ST
SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
515-2520
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

DRISCOLL, MICHAEL S , CSW

Provider Gender: Male
License number: 93951
NPI: 1659761880
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
2204 NATIONAL AVE
SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

DRISCOLL, MICHAEL S , CSW

Provider Gender: Male
License number: 93951
NPI: 1659761880
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

DRISCOLL, MICHAEL S , CSW

Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 93951
 NPI: 1659761880
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

DRISCOLL, MICHAEL S , CSW
 Provider Gender: Male
 License number: 93951
 NPI: 1659761880
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

DRISCOLL, MICHAEL S , CSW
 Provider Gender: Male
 License number: 93951
 NPI: 1659761880
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

DRISCOLL, MICHAEL S , CSW
 Provider Gender: Male
 License number: 93951
 NPI: 1659761880
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

DRISCOLL, MICHAEL S , CSW
 Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 93951
 NPI: 1659761880
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2424
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

DUNFORD, KATELYN C , MFT
 Provider Gender: Female
 License number: 126626
 NPI: 1437517497
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

DUNFORD, KATELYN C , MFT
 Provider Gender: Female
 License number: 126626
 NPI: 1437517497
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

DUNFORD, KATELYN C , MFT
 Provider Gender: Female
 License number: 126626
 NPI: 1437517497
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619)
 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours:
DUNFORD, KATELYN C , MFT
 Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 126626
 NPI: 1437517497
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

DUNFORD, KATELYN C , MFT
 Provider Gender: Female
 License number: 126626
 NPI: 1437517497
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713

Phone: (619) 515-2338
 Fax: (619) 702-8535
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

DUNFORD, KATELYN C , MFT
 Provider Gender: Female
 License number: 126626
 NPI: 1437517497
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2424
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

DUNFORD, KATELYN C , MFT
 Provider Gender: Female
 License number: 126626
 NPI: 1437517497
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

DUNFORD, KATELYN C , MFT
 Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 126626
NPI: 1437517497
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

DUNFORD, KATELYN C , MFT
Provider Gender: Female
License number: 126626
NPI: 1437517497
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-W,F 8:30AM-5PM

DUNFORD, KATELYN C , MFT
Provider Gender: Female
License number: 126626
NPI: 1437517497
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

DUNFORD, KATELYN C , MFT
Provider Gender: Female
License number: 126626
NPI: 1437517497
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520

Fax:
After Hours Phone: (619)
 515-2520
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

DUNFORD, KATELYN C , MFT
Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 126626
NPI: 1437517497
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

DWYER, GEORGE, CSW

Provider Gender: Male
License number: 70988
NPI: 1437606126
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

DWYER, GEORGE, CSW

Provider Gender: Male
License number: 70988
NPI: 1437606126
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

DWYER, GEORGE, CSW

Provider Gender: Male
License number: 70988
NPI: 1437606126
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

DWYER, GEORGE, CSW

Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 70988
NPI: 1437606126
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

DWYER, GEORGE, CSW

Provider Gender: Male
License number: 70988
NPI: 1437606126
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

DWYER, GEORGE, CSW

Provider Gender: Male
License number: 70988
NPI: 1437606126
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM

DWYER, GEORGE, CSW

Provider Gender: Male
License number: 70988
NPI: 1437606126
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4065 3RD AVE
SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:

After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

DWYER, GEORGE, CSW

Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 70988
 NPI: 1437606126
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:
 After Hours Phone: (619)
 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

DWYER, GEORGE, CSW

Provider Gender: Male
 License number: 70988
 NPI: 1437606126
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2424
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

DWYER, GEORGE, CSW

Provider Gender: Male
 License number: 70988
 NPI: 1437606126
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

DWYER, GEORGE, CSW

Provider Gender: Male
 License number: 70988
 NPI: 1437606126
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

DWYER, GEORGE, CSW

Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 70988
NPI: 1437606126
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

DYLAK, JASMINE C , CSW
Provider Gender: Female
License number: 33-0743869
NPI: 1659782498
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM

ERBE, EDWARD J , MD
Provider Gender: Male
License number: G76886
NPI: 1952318289
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
515-2424
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

ERBE, EDWARD J , MD
Provider Gender: Male
License number: G76886
NPI: 1952318289
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
140 ELM ST
SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:

After Hours Phone: (619)
515-2520
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

ERBE, EDWARD J , MD
Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: G76886
NPI: 1952318289
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

ERBE, EDWARD J , MD

Provider Gender: Male
License number: G76886
NPI: 1952318289
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713

Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM

ERBE, EDWARD J , MD

Provider Gender: Male
License number: G76886
NPI: 1952318289
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

ERBE, EDWARD J , MD

Provider Gender: Male
License number: G76886
NPI: 1952318289
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-W,F 8:30AM-5PM

ERBE, EDWARD J , MD

Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: G76886
 NPI: 1952318289
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

ERBE, EDWARD J , MD

Provider Gender: Male
 License number: G76886
 NPI: 1952318289
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

ERBE, EDWARD J , MD

Provider Gender: Male
 License number: G76886
 NPI: 1952318289
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

ERBE, EDWARD J , MD

Provider Gender: Male
 License number: G76886
 NPI: 1952318289
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

ERBE, EDWARD J , MD

Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>License number: G76886 NPI: 1952318289 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1250 6TH AVE STE 100 SAN DIEGO, CA 92101-4368 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>Phone: (619) 662-4100 Fax: After Hours Phone: (619) 662-4100 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours:</p>	<p>Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours:</p>
<p>ESCAMILLA, KARLA B , CSW Provider Gender: Female License number: 87168 NPI: 1134613946 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: SAN YSIDRO HEALTH CENTER 950 S EUCLID AVE SAN DIEGO, CA 92114-6201</p>	<p>FAJARDO, JACQUELINE M , CSW Provider Gender: Female License number: 87322 NPI: 1215342118 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4065 3RD AVE SAN DIEGO, CA 92103-2184 Phone: (619) 515-2300 Fax: After Hours Phone: (619) 515-2300 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi,</p>	<p>FAJARDO, JACQUELINE M , CSW Provider Gender: Female License number: 87322 NPI: 1215342118 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

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

**FAJARDO, JACQUELINE M ,
CSW**

Provider Gender: Female

License number: 87322

NPI: 1215342118

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4874 POLK AVE

SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

**FAJARDO, JACQUELINE M ,
CSW**

Provider Gender: Female

License number: 87322

NPI: 1215342118

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1550 BROADWAY STE 2

SAN DIEGO, CA 92101-5713

Phone: (619) 515-2338

Fax: (619) 702-8535

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

**FAJARDO, JACQUELINE M ,
CSW**

Provider Gender: Female

License number: 87322

NPI: 1215342118

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1250 6TH AVE STE 100

SAN DIEGO, CA 92101-4368

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

**FAJARDO, JACQUELINE M ,
CSW**

Provider Gender: Female

License number: 87322

NPI: 1215342118

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

FAJARDO, JACQUELINE M , CSW

Provider Gender: Female
License number: 87322
NPI: 1215342118
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No

Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

FAJARDO, JACQUELINE M , CSW

Provider Gender: Female
License number: 87322
NPI: 1215342118
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619) 515-2520
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

FAJARDO, JACQUELINE M , CSW

Provider Gender: Female
License number: 87322
NPI: 1215342118
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 3544 30TH ST

SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619) 515-2424
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

FAJARDO, JACQUELINE M , CSW

Provider Gender: Female
License number: 87322
NPI: 1215342118
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

FAJARDO, JACQUELINE M , CSW

Provider Gender: Female

License number: 87322

NPI: 1215342118

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

2204 NATIONAL AVE

SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)
515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for

Accessibility information

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

FANTINO, RAMONA E , CSW

Provider Gender: Female

License number: 70826

NPI: 1215191515

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

INTEGRATED HEALTH

PARTNERS - ST VINCENT DE

PAUL VILLAGE INC

1501 IMPERIAL AVE

SAN DIEGO, CA 92101-7638

Phone: (619) 233-8500

Fax: (619) 687-1067

After Hours Phone: (619)

233-8500

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for

Accessibility information

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

FAUTH, JAMIE, NPA

Provider Gender: Female

License number: 95002650

NPI: 1396098455

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

SAN DIEGO FAMILY CARE

6973 LINDA VISTA RD

SAN DIEGO, CA 92111-6342

Phone: (858) 810-8787

Fax: (858) 279-0377

After Hours Phone: (858)

810-8787

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Mandarin, Spanish, Vietnamese,
Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

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

8AM-1PM

FEDEROFF, MONICA, MD

Provider Gender: Female

License number: A164677

NPI: 1912404492

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax: (619) 702-8536

After Hours Phone: (619)

515-2424

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

FEDEROFF, MONICA, MD
 Provider Gender: Female
 License number: A164677
 NPI: 1912404492
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

FEDEROFF, MONICA, MD
 Provider Gender: Female

License number: A164677
 NPI: 1912404492
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
 Phone: (619) 515-2338
 Fax: (619) 702-8535
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-TH 8:30AM-5PM

FEDEROFF, MONICA, MD
 Provider Gender: Female
 License number: A164677
 NPI: 1912404492
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

FEDEROFF, MONICA, MD
 Provider Gender: Female
 License number: A164677
 NPI: 1912404492
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>License number: A164677 NPI: 1912404492 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-W,F 8:30AM-5PM</p>	<p>Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-W,F 8:30AM-5PM</p>
<p>FEDEROFF, MONICA, MD Provider Gender: Female License number: A164677 NPI: 1912404492 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4065 3RD AVE SAN DIEGO, CA 92103-2184 Phone: (619) 515-2300 Fax: After Hours Phone: (619) 515-2300 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours:</p>	<p>FEDEROFF, MONICA, MD Provider Gender: Female License number: A164677 NPI: 1912404492 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104</p>	<p>FEDEROFF, MONICA, MD Provider Gender: Female License number: A164677 NPI: 1912404492 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese</p>
<p>FEDEROFF, MONICA, MD Provider Gender: Female</p>		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

FEDEROFF, MONICA, MD

Provider Gender: Female
 License number: A164677
 NPI: 1912404492
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:
 After Hours Phone: (619)
 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

Provider Gender: Female
 License number: A164677
 NPI: 1912404492
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

FEDEROFF, MONICA, MD

Provider Gender: Female

License number: A164677
 NPI: 1912404492
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

License number: A164677
 NPI: 1912404492
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

License number: A164677
 NPI: 1912404492
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

FEDEROFF, MONICA, MD

Provider Gender: Female
 License number: A164677
 NPI: 1912404492
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

FERRER, ADAREZZA I, MD

Provider Gender: Female
 License number: A123390
 NPI: 1316175524
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 COMMUNITY RESEARCH
 FOUNDATION INC
 1465 30TH ST STE K
 SAN DIEGO, CA 92154-3497
 Phone: (619) 275-0822
 Fax: (619) 696-9573
 After Hours Phone: (619)
 275-0822
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Russian
 TDD: No
 Min/Max Age: 0/99

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M,W 9AM-8PM, TU,TH,F 9AM-5PM

FERRER, ADAREZZA I , MD

Provider Gender: Female
License number: A123390
NPI: 1316175524
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: COMMUNITY RESEARCH FOUNDATION INC
 1963 4TH AVE
 SAN DIEGO, CA 92101-2394
Phone: (619) 233-3432
Fax: (619) 233-7022
After Hours Phone: (619) 233-3432
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Russian
TDD: No
Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

FERRER, ADAREZZA I , MD

Provider Gender: Female
License number: A123390
NPI: 1316175524
Provider English Spoken: Yes

Provider Language(s) Spoken: Cultural Competency: COMMUNITY RESEARCH FOUNDATION INC
 1568 6TH AVE
 SAN DIEGO, CA 92101-3216
Phone: (619) 696-0822
Fax: (619) 696-9573
After Hours Phone: (619) 696-0822
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-6PM

FERRER, ADAREZZA I , MD

Provider Gender: Female
License number: A123390
NPI: 1316175524
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: COMMUNITY RESEARCH FOUNDATION INC
 892 27TH ST
 SAN DIEGO, CA 92154-1444
Phone: (619) 275-0822
Fax: (619) 696-9573
After Hours Phone: (619) 275-0822
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken: Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours:

FERRER, ADAREZZA I , MD

Provider Gender: Female
License number: A123390
NPI: 1316175524
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: COMMUNITY RESEARCH FOUNDATION INC
 743 10TH AVE
 SAN DIEGO, CA 92101-6673
Phone: (619) 239-4663
Fax: (619) 239-3045
After Hours Phone: (619) 239-4663
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours:

FERRIS, DONALD W , MD

Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: G24351
NPI: 1770756835
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
INTEGRATED HEALTH
PARTNERS - ST VINCENT DE
PAUL VILLAGE INC
1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638
Phone: (619) 233-8500
Fax: (619) 687-1067
After Hours Phone: (619)
233-8500
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM, TH
8:30AM-9PM

FERTIG, PATRICIA A , MD

Provider Gender: Female
License number: 20A14928
NPI: 1457642803
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
SAN DIEGO FAMILY CARE
4290 POLK AVE
SAN DIEGO, CA 92105-1524
Phone: (619) 563-0250
Fax: (619) 563-0015
After Hours Phone: (619)
563-0250

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Farsi,
Vietnamese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM, SA
8AM-2PM

FERTIG, PATRICIA A , MD

Provider Gender: Female
License number: 20A14928
NPI: 1457642803
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
SAN DIEGO FAMILY CARE
4305 UNIVERSITY AVE
SAN DIEGO, CA 92105-1645
Phone: (858) 280-2058
Fax: (619) 563-0015
After Hours Phone: (858)
280-2058
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM, SA

8AM-2PM

FIGUEROA, FABIOLA, PSY

Provider Gender: Female
License number: PSY24471
NPI: 1720283211
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NESTOR COMMUNITY HEALTH
CENTER
1016 OUTER RD
SAN DIEGO, CA 92154-1351
Phone: (619) 429-3733
Fax: (619) 628-5550
After Hours Phone: (619)
429-3733
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M,TU,TH 8AM-8PM, W,F
8AM-5PM, SA 8AM-12PM

FLORES, MARY LUPE, CSW

Provider Gender: Female
License number: 19815
NPI: 1134147457
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
2204 NATIONAL AVE

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

FLORES, MARY LUPE, CSW
Provider Gender: Female
License number: 19815
NPI: 1134147457
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian,

Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-W,F 8:30AM-5PM

FLORES, MARY LUPE, CSW
Provider Gender: Female
License number: 19815
NPI: 1134147457
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

FLORES, MARY LUPE, CSW

Provider Gender: Female
License number: 19815
NPI: 1134147457
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619) 515-2424
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

FLORES, MARY LUPE, CSW
Provider Gender: Female
License number: 19815
NPI: 1134147457
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

FLORES, MARY LUPE, CSW

Provider Gender: Female
License number: 19815
NPI: 1134147457
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

FLORES, MARY LUPE, CSW

Provider Gender: Female
License number: 19815
NPI: 1134147457
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4065 3RD AVE
SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:

After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

FLORES, MARY LUPE, CSW

Provider Gender: Female

License number: 19815
NPI: 1134147457
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
140 ELM ST
SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520

Fax:
After Hours Phone: (619)
515-2520
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

FLORES, MARY LUPE, CSW

Provider Gender: Female
License number: 19815
NPI: 1134147457
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

FLORES, MARY LUPE, CSW
 Provider Gender: Female
 License number: 19815
 NPI: 1134147457
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
 Phone: (619) 515-2338
 Fax: (619) 702-8535
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

FLORES, MARY LUPE, CSW
 Provider Gender: Female
 License number: 19815
 NPI: 1134147457
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

FLORES, MARY LUPE, CSW
 Provider Gender: Female

License number: 19815
 NPI: 1134147457
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

FLOWERS, LAURA L , CSW
 Provider Gender: Female
 License number: 74705
 NPI: 1437648862
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-W,F 8:30AM-5PM</p>	<p>TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-W,F 8:30AM-5PM</p>	<p>NPI: 1902939630 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: SAN DIEGO FAMILY CARE 4290 POLK AVE SAN DIEGO, CA 92105-1524 Phone: (619) 563-0250 Fax: (619) 563-0015 After Hours Phone: (619) 563-0250 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Farsi, Vietnamese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M-F 8AM-5PM, SA 8AM-2PM</p>
<p>FLYNN CRUZ, MARY E , CSW Provider Gender: Female License number: 92918 NPI: 1942814181 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese</p>	<p>FONTANA, LOUIS A , MD Provider Gender: Male License number: G49072 NPI: 1780734343 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: SAN YSIDRO HEALTH CENTER 950 S EUCLID AVE SAN DIEGO, CA 92114-6201 Phone: (619) 662-4100 Fax: After Hours Phone: (619) 662-4100 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours:</p>	<p>FRANCO, RODRIGO, CSW Provider Gender: Male License number: 71548 NPI: 1952736043 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713 Phone: (619) 515-2338 Fax: (619) 702-8535 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com</p>
	<p>FORZANI, CHRISTINA A , PSY Provider Gender: Female License number: 25710</p>	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM

FRANCO, RODRIGO, CSW

Provider Gender: Male
License number: 71548
NPI: 1952736043
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes

Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

FRANCO, RODRIGO, CSW

Provider Gender: Male
License number: 71548
NPI: 1952736043
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes

Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

FRANCO, RODRIGO, CSW

Provider Gender: Male
License number: 71548
NPI: 1952736043
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF

SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

FRANCO, RODRIGO, CSW

Provider Gender: Male
License number: 71548
NPI: 1952736043
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours:

FRANCO, RODRIGO, CSW

Provider Gender: Male

License number: 71548

NPI: 1952736043

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

140 ELM ST

SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520

Fax:

After Hours Phone: (619)

515-2520

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

FRANCO, RODRIGO, CSW

Provider Gender: Male

License number: 71548

NPI: 1952736043

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

FRANCO, RODRIGO, CSW

Provider Gender: Male

License number: 71548

NPI: 1952736043

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

2204 NATIONAL AVE

SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

FRANCO, RODRIGO, CSW

Provider Gender: Male

License number: 71548

NPI: 1952736043

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

FRANCO, RODRIGO, CSW

Provider Gender: Male
 License number: 71548
 NPI: 1952736043
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2424
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

FRANCO, RODRIGO, CSW

Provider Gender: Male

License number: 71548
 NPI: 1952736043
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-W,F 8:30AM-5PM

FRANCO, RODRIGO, CSW

Provider Gender: Male
 License number: 71548
 NPI: 1952736043
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

FREEMAN, KAY M , MFT

Provider Gender: Female
 License number: 16284
 NPI: 1588795298
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No	License number: 16284	Phone: (619) 445-6200
Min/Max Age:	NPI: 1588795298	Fax: (619) 824-9076
Gender Restriction: No Gender Restrictions	Provider English Spoken: Yes	After Hours Phone: (619) 445-6200
American Sign Language (ASL): Yes	Provider Language(s) Spoken: Cultural Competency:	Website:
Please contact provider for Accessibility information	FAMILY HEALTH CENTERS OF SAN DIEGO	www.beaconhealthoptions.com
Hours:	3705 MISSION BLVD SAN DIEGO, CA 92109-7104	Accepting New Patients: Yes
	Phone: (619) 515-2338	Site English Spoken: Yes
	Fax: (619) 702-8536	Site Language(s) Spoken: Armenian
	After Hours Phone: (619) 515-2338	TDD: No
	Website:	Min/Max Age:
	www.beaconhealthoptions.com	Gender Restriction: No Gender Restrictions
	Accepting New Patients: Yes	American Sign Language (ASL): No
	Site English Spoken: Yes	Please contact provider for Accessibility information
	Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese	Hours: M-F 8AM-5PM
	TDD: No	
	Min/Max Age: 0/99	FRITZ, JENNIFER K , PSY
	Gender Restriction: No Gender Restrictions	Provider Gender: Female
	American Sign Language (ASL): Yes	License number: PSY24350
	Please contact provider for Accessibility information	NPI: 1013071497
	Hours: M-W,F 8:30AM-5PM	Provider English Spoken: Yes
		Provider Language(s) Spoken: Cultural Competency:
	FRITZ, JENNIFER K , PSY	SAN YSIDRO HEALTH CENTER
	Provider Gender: Female	950 S EUCLID AVE
	License number: PSY24350	SAN DIEGO, CA 92114-6201
	NPI: 1013071497	Phone: (619) 662-4100
	Provider English Spoken: Yes	Fax:
	Provider Language(s) Spoken: Cultural Competency:	After Hours Phone: (619) 662-4100
	MOUNTAIN HEALTH AND COMMUNITY SERVICES INC	Website:
	4690 EL CAJON BLVD	www.beaconhealthoptions.com
	SAN DIEGO, CA 92115-4403	Accepting New Patients: Yes
		Site English Spoken: Yes
		Site Language(s) Spoken: Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu
		TDD: No
		Min/Max Age:
		Gender Restriction: No Gender
FREEMAN, KAY M , MFT		
Provider Gender: Female		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i></p> <p>FRITZ, JENNIFER K , PSY <i>Provider Gender:</i> Female <i>License number:</i> PSY24350 <i>NPI:</i> 1013071497 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> MOUNTAIN HEALTH AND COMMUNITY SERVICES INC 316 25TH ST SAN DIEGO, CA 92102-3016 <i>Phone:</i> (619) 445-6200 <i>Fax:</i> (619) 238-5551 <i>After Hours Phone:</i> (619) 445-6200 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Armenian <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p> <p>FUENTES WEST, MARYSOL, MFT <i>Provider Gender:</i> Female <i>License number:</i> 39962 <i>NPI:</i> 1285770941 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i></p>	<p>Spanish <i>Cultural Competency:</i> FUENTES WEST, MARYSOL 4080 CENTRE ST STE 207 SAN DIEGO, CA 92103-2658 <i>Phone:</i> (619) 422-7216 <i>Fax:</i> <i>After Hours Phone:</i> (619) 422-7216 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish <i>TDD:</i> Yes <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-TH 9AM-6PM</p> <p>FUKUI, TOMONORI, MD <i>Provider Gender:</i> Male <i>License number:</i> 75713 <i>NPI:</i> 1366519670 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Japanese, Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1250 6TH AVE STE 100 SAN DIEGO, CA 92101-4368 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes</p>	<p><i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p> <p>FUKUI, TOMONORI, MD <i>Provider Gender:</i> Male <i>License number:</i> 75713 <i>NPI:</i> 1366519670 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Japanese, Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 140 ELM ST SAN DIEGO, CA 92101-2602 <i>Phone:</i> (619) 515-2520 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2520 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for</p>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accessibility information
Hours: M-F 8AM-5PM

FUKUI, TOMONORI, MD

Provider Gender: Male
License number: 75713
NPI: 1366519670
Provider English Spoken: Yes
Provider Language(s) Spoken: Japanese, Spanish
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

FUKUI, TOMONORI, MD

Provider Gender: Male
License number: 75713
NPI: 1366519670
Provider English Spoken: Yes
Provider Language(s) Spoken: Japanese, Spanish
Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO
2204 NATIONAL AVE
SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338

Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

FUKUI, TOMONORI, MD

Provider Gender: Male
License number: 75713
NPI: 1366519670
Provider English Spoken: Yes
Provider Language(s) Spoken: Japanese, Spanish
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

FUKUI, TOMONORI, MD

Provider Gender: Male
License number: 75713
NPI: 1366519670
Provider English Spoken: Yes
Provider Language(s) Spoken: Japanese, Spanish
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

FUKUI, TOMONORI, MD

Provider Gender: Male
License number: 75713
NPI: 1366519670
Provider English Spoken: Yes
Provider Language(s) Spoken:
Japanese, Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4065 3RD AVE
SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

FUKUI, TOMONORI, MD

Provider Gender: Male
License number: 75713
NPI: 1366519670
Provider English Spoken: Yes
Provider Language(s) Spoken:
Japanese, Spanish

Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

FUKUI, TOMONORI, MD

Provider Gender: Male
License number: 75713
NPI: 1366519670
Provider English Spoken: Yes
Provider Language(s) Spoken:
Japanese, Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

FUKUI, TOMONORI, MD

Provider Gender: Male
License number: 75713
NPI: 1366519670
Provider English Spoken: Yes
Provider Language(s) Spoken:
Japanese, Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM</p>	<p>Japanese, Spanish Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO</p>	<p>Site English Spoken: Yes Site Language(s) Spoken: Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu</p>
<p>FUKUI, TOMONORI, MD Provider Gender: Male License number: 75713 NPI: 1366519670 Provider English Spoken: Yes Provider Language(s) Spoken: Japanese, Spanish Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120 Phone: (619) 515-2424 Fax: (619) 702-8536 After Hours Phone: (619) 515-2424 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese</p>	<p>3705 MISSION BLVD SAN DIEGO, CA 92109-7104 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-W,F 8:30AM-5PM</p>	<p>TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours:</p>
<p>FUKUI, TOMONORI, MD Provider Gender: Male License number: 75713 NPI: 1366519670 Provider English Spoken: Yes Provider Language(s) Spoken:</p>	<p>GAHAGAN, SHEILA, MD Provider Gender: Female License number: G53666 NPI: 1053327221 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: SAN YSIDRO HEALTH CENTER 950 S EUCLID AVE SAN DIEGO, CA 92114-6201 Phone: (619) 662-4100 Fax: After Hours Phone: (619) 662-4100 Website: www.beaconhealthoptions.com Accepting New Patients: Yes</p>	<p>GALAPON, DIXIE L , PSY Provider Gender: Female License number: 16711 NPI: 1174646301 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 2204 NATIONAL AVE SAN DIEGO, CA 92113-3615 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

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

GALAPON, DIXIE L , PSY

Provider Gender: Female
License number: 16711
NPI: 1174646301
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO

1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713

Phone: (619) 515-2338

Fax: (619) 702-8535

After Hours Phone: (619)
515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

Yes

Please contact provider for
Accessibility information

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

GALAPON, DIXIE L , PSY

Provider Gender: Female
License number: 16711
NPI: 1174646301
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO

1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

Yes

Please contact provider for
Accessibility information

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

GALAPON, DIXIE L , PSY

Provider Gender: Female
License number: 16711
NPI: 1174646301
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

Yes

Please contact provider for
Accessibility information

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

GALAPON, DIXIE L , PSY

Provider Gender: Female
License number: 16711
NPI: 1174646301
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO

140 ELM ST

SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520

Fax:

After Hours Phone: (619)

515-2520

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

GALAPON, DIXIE L , PSY

Provider Gender: Female
License number: 16711
NPI: 1174646301
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

GALAPON, DIXIE L , PSY

Provider Gender: Female
License number: 16711
NPI: 1174646301
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

GALAPON, DIXIE L , PSY

Provider Gender: Female
License number: 16711
NPI: 1174646301
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

GALAPON, DIXIE L , PSY

Provider Gender: Female
License number: 16711
NPI: 1174646301
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

GALAPON, DIXIE L , PSY

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 16711
NPI: 1174646301
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2424
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

GALAPON, DIXIE L , PSY
Provider Gender: Female
License number: 16711
NPI: 1174646301
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

GALAPON, DIXIE L , PSY
Provider Gender: Female
License number: 16711
NPI: 1174646301
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

GATTEY, JOEL A , MFT
Provider Gender: Male
License number: 112422
NPI: 1487942488
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-W,F 8:30AM-5PM

GAUD, KRISTINA G , MD
Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 170667
NPI: 1508151598
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

GAUD, KRISTINA G , MD
Provider Gender: Female
License number: 170667
NPI: 1508151598
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184

Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

GAUD, KRISTINA G , MD
Provider Gender: Female
License number: 170667
NPI: 1508151598
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM

GAUD, KRISTINA G , MD
Provider Gender: Female
License number: 170667
NPI: 1508151598
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

GAUD, KRISTINA G , MD
Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 170667
NPI: 1508151598
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
515-2424
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

GAUD, KRISTINA G , MD
Provider Gender: Female
License number: 170667
NPI: 1508151598
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
140 ELM ST
SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
515-2520
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

GAUD, KRISTINA G , MD
Provider Gender: Female
License number: 170667
NPI: 1508151598
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

GAUD, KRISTINA G , MD
Provider Gender: Female
License number: 170667
NPI: 1508151598
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM

GAUD, KRISTINA G , MD
Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 170667
NPI: 1508151598
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

GAUD, KRISTINA G , MD
Provider Gender: Female
License number: 170667
NPI: 1508151598
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

GAUD, KRISTINA G , MD
Provider Gender: Female
License number: 170667
NPI: 1508151598
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

GAUD, KRISTINA G , MD
Provider Gender: Female
License number: 170667
NPI: 1508151598
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

GENTILE, GILBERT J , CSW
Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 17074
 NPI: 1164965265
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 INTEGRATED HEALTH
 PARTNERS - ST VINCENT DE
 PAUL VILLAGE INC
 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101-7638
 Phone: (619) 233-8500
 Fax: (619) 687-1067
 After Hours Phone: (619)
 233-8500
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-W,F 8:30AM-5PM, TH
 8:30AM-9PM

GIAMONA, KRISTEN, PSY

Provider Gender: Female
 License number: 28419
 NPI: 1376824383
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 SAN DIEGO FAMILY CARE
 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111-6307
 Phone: (858) 810-8700
 Fax: (858) 633-4680
 After Hours Phone: (858)
 810-8700

Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Mandarin, Farsi, Spanish,
 Vietnamese, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM, SA
 8AM-2PM

GILLIS, RUTH, MFT

Provider Gender: Female
 License number: 50313
 NPI: 1568588325
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

GILLIS, RUTH, MFT

Provider Gender: Female
 License number: 50313
 NPI: 1568588325
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-W,F 8:30AM-5PM

GLASSMAN, JAGA NATH, MD

Provider Gender: Male
 License number: G55004
 NPI: 1558409771
 Provider English Spoken: Yes
 Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

GLASSMAN, JAGA NATH, MD

Provider Gender: Male
License number: G55004
NPI: 1558409771
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619) 515-2424
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

GLASSMAN, JAGA NATH, MD

Provider Gender: Male
License number: G55004
NPI: 1558409771
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:

After Hours Phone: (619) 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for

Accessibility information
Hours:
GLASSMAN, JAGA NATH, MD
Provider Gender: Male
License number: G55004
NPI: 1558409771
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

GLASSMAN, JAGA NATH, MD

Provider Gender: Male
License number: G55004
NPI: 1558409771
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

GLASSMAN, JAGA NATH, MD
 Provider Gender: Male
 License number: G55004
 NPI: 1558409771
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,

Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-W,F 8:30AM-5PM

GLASSMAN, JAGA NATH, MD
 Provider Gender: Male
 License number: G55004
 NPI: 1558409771
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:

After Hours Phone: (619) 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

GLASSMAN, JAGA NATH, MD
 Provider Gender: Male
 License number: G55004
 NPI: 1558409771
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

GLASSMAN, JAGA NATH, MD
 Provider Gender: Male
 License number: G55004
 NPI: 1558409771
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

GLASSMAN, JAGA NATH, MD
Provider Gender: Male
License number: G55004
NPI: 1558409771
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

GLASSMAN, JAGA NATH, MD
Provider Gender: Male
License number: G55004
NPI: 1558409771
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

GLASSMAN, JAGA NATH, MD
Provider Gender: Male

License number: G55004
NPI: 1558409771
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

GLEASON, SHEILA, PSY
Provider Gender: Female
License number: 13685
NPI: 1366641813
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

GLEASON, SHEILA, PSY

Provider Gender: Female
License number: 13685
NPI: 1366641813
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM
GLEASON, SHEILA, PSY
Provider Gender: Female
License number: 13685
NPI: 1366641813
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4065 3RD AVE
SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

GLEASON, SHEILA, PSY
Provider Gender: Female
License number: 13685
NPI: 1366641813
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105-2026

License number: 13685
NPI: 1366641813
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

GLEASON, SHEILA, PSY
Provider Gender: Female
License number: 13685
NPI: 1366641813
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105-2026

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

GLEASON, SHEILA, PSY

Provider Gender: Female
 License number: 13685
 NPI: 1366641813
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-W,F 8:30AM-5PM

GLEASON, SHEILA, PSY

Provider Gender: Female
 License number: 13685
 NPI: 1366641813
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

GLEASON, SHEILA, PSY

Provider Gender: Female

License number: 13685
 NPI: 1366641813
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

GLEASON, SHEILA, PSY

Provider Gender: Female
 License number: 13685
 NPI: 1366641813
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2520

Fax:

After Hours Phone: (619)
515-2520

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

GLEASON, SHEILA, PSY

Provider Gender: Female

License number: 13685

NPI: 1366641813

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax: (619) 702-8536

After Hours Phone: (619)
515-2424

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

GLEASON, SHEILA, PSY

Provider Gender: Female

License number: 13685

NPI: 1366641813

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1250 6TH AVE STE 100

SAN DIEGO, CA 92101-4368

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

GLEASON, SHEILA, PSY

Provider Gender: Female

License number: 13685

NPI: 1366641813

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

GOMEZ-NARANJO, PATRICIA A , MD

Provider Gender: Female

License number: A55544

NPI: 1053324541

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

SAN YSIDRO HEALTH CENTER

950 S EUCLID AVE

SAN DIEGO, CA 92114-6201

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)
662-4100

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Arabic, Farsi, Hindi, Kannada,
Maithili, Sinhala, Sinhalese,

Spanish, Urdu

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours:

GONZALES, JULIANA, CSW

Provider Gender: Female

License number: 83254

NPI: 1821487406

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1250 6TH AVE STE 100

SAN DIEGO, CA 92101-4368

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

GONZALES, JULIANA, CSW

Provider Gender: Female

License number: 83254

NPI: 1821487406

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1550 BROADWAY STE 2

SAN DIEGO, CA 92101-5713

Phone: (619) 515-2338

Fax: (619) 702-8535

After Hours Phone: (619)
515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

GONZALES, JULIANA, CSW

Provider Gender: Female

License number: 83254

NPI: 1821487406

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

2204 NATIONAL AVE

SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

GONZALES, JULIANA, CSW

Provider Gender: Female

License number: 83254

NPI: 1821487406

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

3544 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619) 515-2424
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

GONZALES, JULIANA, CSW
Provider Gender: Female
License number: 83254
NPI: 1821487406
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

GONZALES, JULIANA, CSW
Provider Gender: Female
License number: 83254
NPI: 1821487406
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information

Hours: M-F 8:30AM-5PM
GONZALES, JULIANA, CSW
Provider Gender: Female
License number: 83254
NPI: 1821487406
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619) 515-2520
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM
GONZALES, JULIANA, CSW
Provider Gender: Female
License number: 83254
NPI: 1821487406
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

GONZALES, JULIANA, CSW
Provider Gender: Female
License number: 83254
NPI: 1821487406
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

GONZALES, JULIANA, CSW
Provider Gender: Female
License number: 83254
NPI: 1821487406
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for

Accessibility information
Hours: M-F 8:30AM-5PM
GONZALES, JULIANA, CSW
Provider Gender: Female
License number: 83254
NPI: 1821487406
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM
GONZALEZ, ANDREA, CSW
Provider Gender: Female
License number: 97593
NPI: 1326346198
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

FAMILY HEALTH CENTERS OF SAN DIEGO

140 ELM ST
SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520

Fax:

After Hours Phone: (619)
515-2520

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

GONZALEZ, ANDREA, CSW

Provider Gender: Female

License number: 97593

NPI: 1326346198

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

GONZALEZ, ANDREA, CSW

Provider Gender: Female

License number: 97593

NPI: 1326346198

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713

Phone: (619) 515-2338

Fax: (619) 702-8535

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

Yes

Please contact provider for
Accessibility information

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

GONZALEZ, ANDREA, CSW

Provider Gender: Female

License number: 97593

NPI: 1326346198

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

Yes

Please contact provider for
Accessibility information

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

GONZALEZ, ANDREA, CSW

Provider Gender: Female

License number: 97593

NPI: 1326346198

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-W,F 8:30AM-5PM

GONZALEZ, ANDREA, CSW
Provider Gender: Female
License number: 97593
NPI: 1326346198
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

GONZALEZ, ANDREA, CSW
Provider Gender: Female
License number: 97593
NPI: 1326346198
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):

Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM
GONZALEZ, ANDREA, CSW
Provider Gender: Female
License number: 97593
NPI: 1326346198
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM
GONZALEZ, ANDREA, CSW
Provider Gender: Female
License number: 97593
NPI: 1326346198
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

GONZALEZ, ANDREA, CSW
Provider Gender: Female
License number: 97593
NPI: 1326346198
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338

Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

GONZALEZ, ANDREA, CSW
Provider Gender: Female
License number: 97593
NPI: 1326346198
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2424
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender

Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

GONZALEZ, ANDREA, CSW
Provider Gender: Female
License number: 97593
NPI: 1326346198
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

GOTTUNG, CHRISTINA, CSW
Provider Gender: Female
License number: 87716
NPI: 1134597123

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
140 ELM ST
SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
515-2520
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

GOTTUNG, CHRISTINA, CSW
Provider Gender: Female
License number: 87716
NPI: 1134597123
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
515-2424

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

GOTTUNG, CHRISTINA, CSW
Provider Gender: Female
License number: 87716
NPI: 1134597123
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

GOTTUNG, CHRISTINA, CSW
Provider Gender: Female
License number: 87716
NPI: 1134597123
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

GOTTUNG, CHRISTINA, CSW
Provider Gender: Female
License number: 87716
NPI: 1134597123
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM

GOTTUNG, CHRISTINA, CSW
Provider Gender: Female
License number: 87716
NPI: 1134597123
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-W,F 8:30AM-5PM

GOTTUNG, CHRISTINA, CSW
Provider Gender: Female
License number: 87716
NPI: 1134597123
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for

Accessibility information
Hours: M-F 8:30AM-5PM
GOTTUNG, CHRISTINA, CSW
Provider Gender: Female
License number: 87716
NPI: 1134597123
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

GOTTUNG, CHRISTINA, CSW
Provider Gender: Female
License number: 87716
NPI: 1134597123
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

GOTTUNG, CHRISTINA, CSW
Provider Gender: Female
License number: 87716
NPI: 1134597123
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,

Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

GOTTUNG, CHRISTINA, CSW
Provider Gender: Female
License number: 87716
NPI: 1134597123
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4065 3RD AVE
SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:

After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

GOTTUNG, CHRISTINA, CSW
Provider Gender: Female
License number: 87716
NPI: 1134597123
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

GOULD, HILARY, PSY
Provider Gender: Female
License number: 31088
NPI: 1104297696
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
SAN YSIDRO HEALTH CENTER
950 S EUCLID AVE
SAN DIEGO, CA 92114-6201

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619) 662-4100
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Arabic, Farsi, Hindi, Kannada,
 Maithili, Sinhala, Sinhalese,
 Spanish, Urdu
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours:

GRACE, MONIKA M , PSY

Provider Gender: Female
 License number: 24462
 NPI: 1497985832
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Modern Greek, French,
 Portuguese, Spanish
 Cultural Competency:
 GRACE COUNSELING AND
 PSYCHOTHERAPY
 2423 CAMINO DEL RIO S STE
 101
 SAN DIEGO, CA 92108-3734
 Phone: (619) 381-8472
 Fax: (619) 839-3973
 After Hours Phone: (619)
 381-8472
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:

Modern Greek, French,
 Portuguese, Spanish
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-SA 8AM-8PM

GRAHAM, DEBRA JEANNE, NPA

Provider Gender: Female
 License number: NP15657
 NPI: 1790757623
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
 Phone: (619) 662-4100

Fax:
 After Hours Phone: (619)
 662-4100
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Arabic, Farsi, Hindi, Kannada,
 Maithili, Sinhala, Sinhalese,
 Spanish, Urdu
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours:

GRAHAM, DEBRA JEANNE, NPA

Provider Gender: Female
 License number: NP15657
 NPI: 1790757623
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 OPERATION SAMAHAN
 9995 CARMEL MOUNTAIN RD
 STE B10 & B11
 SAN DIEGO, CA 92129-2889
 Phone: (844) 200-2426
 Fax: (858) 312-6660
 After Hours Phone: (844)
 200-2426
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi,
 Urdu
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M,TU,TH,F
 8:30AM-5:30PM, W 10AM-7PM

GRAHAM, DEBRA JEANNE, NPA

Provider Gender: Female
 License number: NP15657
 NPI: 1790757623
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 OPERATION SAMAHAN
 10737 CAMINO RUIZ STE 235
 SAN DIEGO, CA 92126-2375

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (844) 200-2426
 Fax: (858) 695-9074
 After Hours Phone: (844) 200-2426
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Urdu
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M,TU,TH,F 8:30AM-5:30PM, W 10AM-7PM

GUARDADO SOTO, RAQUEL E , PSY

Provider Gender: Female
 License number: 26883
 NPI: 1194999276
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency:
 SAN DIEGO FAMILY CARE
 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111-6342
 Phone: (858) 810-8787
 Fax: (858) 279-0377
 After Hours Phone: (858) 810-8787
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Mandarin, Spanish, Vietnamese, Yue Chinese
 TDD: No

Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM, SA 8AM-1PM

GUARDADO SOTO, RAQUEL E , PSY

Provider Gender: Female
 License number: 26883
 NPI: 1194999276
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency:
 SAN DIEGO FAMILY CARE
 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111-6307
 Phone: (858) 810-8700
 Fax: (858) 633-4680
 After Hours Phone: (858) 810-8700
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Mandarin, Farsi, Spanish, Vietnamese, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM, SA 8AM-2PM

GUILLEN-IBARRA, MIRIAM,

CSW

Provider Gender: Female
 License number: 103357
 NPI: 1164691424
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619) 662-4100
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours:

GUTIERREZ, APRIL P , CSW

Provider Gender: Female
 License number: 86166
 NPI: 1356749949
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 SAN DIEGO FAMILY CARE
 4290 POLK AVE
 SAN DIEGO, CA 92105-1524

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 563-0250
 Fax: (619) 563-0015
 After Hours Phone: (619) 563-0250
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Farsi, Vietnamese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM, SA 8AM-2PM

GUTIERREZ, APRIL P , CSW
 Provider Gender: Female
 License number: 86166
 NPI: 1356749949
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No

Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

GUTIERREZ, APRIL P , CSW
 Provider Gender: Female
 License number: 86166
 NPI: 1356749949
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

GUTIERREZ, APRIL P , CSW
 Provider Gender: Female
 License number: 86166

NPI: 1356749949
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-W,F 8:30AM-5PM

GUTIERREZ, APRIL P , CSW
 Provider Gender: Female
 License number: 86166
 NPI: 1356749949
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p> <p>GUTIERREZ, APRIL P , CSW <i>Provider Gender:</i> Female <i>License number:</i> 86166 <i>NPI:</i> 1356749949 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8535 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions</p>	<p><i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM</p> <p>GUTIERREZ, APRIL P , CSW <i>Provider Gender:</i> Female <i>License number:</i> 86166 <i>NPI:</i> 1356749949 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120 <i>Phone:</i> (619) 515-2424 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2424 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p> <p>GUTIERREZ, APRIL P , CSW <i>Provider Gender:</i> Female <i>License number:</i> 86166 <i>NPI:</i> 1356749949 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes</p>	<p><i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p> <p>GUTIERREZ, APRIL P , CSW <i>Provider Gender:</i> Female <i>License number:</i> 86166 <i>NPI:</i> 1356749949 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes</p>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p> <p>GUTIERREZ, APRIL P , CSW <i>Provider Gender:</i> Female <i>License number:</i> 86166 <i>NPI:</i> 1356749949 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 2204 NATIONAL AVE SAN DIEGO, CA 92113-3615 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>4065 3RD AVE SAN DIEGO, CA 92103-2184 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i></p>
<p>GUTIERREZ, APRIL P , CSW <i>Provider Gender:</i> Female <i>License number:</i> 86166 <i>NPI:</i> 1356749949 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for</p>	<p>GUTIERREZ, APRIL P , CSW <i>Provider Gender:</i> Female <i>License number:</i> 86166 <i>NPI:</i> 1356749949 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 140 ELM ST SAN DIEGO, CA 92101-2602 <i>Phone:</i> (619) 515-2520 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2520 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi,</p>	<p>GUTIERREZ, APRIL P , CSW <i>Provider Gender:</i> Female <i>License number:</i> 86166 <i>NPI:</i> 1356749949 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 140 ELM ST SAN DIEGO, CA 92101-2602 <i>Phone:</i> (619) 515-2520 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2520 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi,</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

GUTIERREZ, SARAH, CSW

Provider Gender: Female
License number: 82040
NPI: 1174909071
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM

HARASHEVSKY, MARK, MD

Provider Gender: Male
License number: 20A10936
NPI: 1699923318
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
COMMUNITY RESEARCH
FOUNDATION INC
545 LAUREL ST
SAN DIEGO, CA 92101-1634
Phone: (619) 433-4399
Fax: (619) 233-0453
After Hours Phone: (619)
433-4399
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours:

HARRIMAN, CORAL, PSY

Provider Gender: Female
License number: 26098
NPI: 1417373069
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

HARRIMAN, CORAL, PSY

Provider Gender: Female
License number: 26098
NPI: 1417373069
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
515-2424
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>License number: 26098 NPI: 1417373069 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 2204 NATIONAL AVE SAN DIEGO, CA 92113-3615 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>
<p>HARRIMAN, CORAL, PSY Provider Gender: Female License number: 26098 NPI: 1417373069 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713 Phone: (619) 515-2338 Fax: (619) 702-8535 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-TH 8:30AM-5PM</p>	<p>HARRIMAN, CORAL, PSY Provider Gender: Female License number: 26098 NPI: 1417373069 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1250 6TH AVE STE 100 SAN DIEGO, CA 92101-4368</p>	<p>HARRIMAN, CORAL, PSY Provider Gender: Female License number: 26098 NPI: 1417373069 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>License number: 26098 NPI: 1417373069 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST SAN DIEGO, CA 92102-4715 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM</p>	<p>Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM</p>
<p>HARRIMAN, CORAL, PSY Provider Gender: Female License number: 26098 NPI: 1417373069 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-W,F 8:30AM-5PM</p>	<p>HARRIMAN, CORAL, PSY Provider Gender: Female License number: 26098 NPI: 1417373069 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026</p>	<p>HARRIMAN, CORAL, PSY Provider Gender: Female License number: 26098 NPI: 1417373069 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4065 3RD AVE SAN DIEGO, CA 92103-2184 Phone: (619) 515-2300 Fax: After Hours Phone: (619) 515-2300 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours:</p>	<p>License number: 26098 NPI: 1417373069 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-TH 8:30AM-5PM</p>	<p>Phone: (619) 515-2338 Fax: (619) 702-8535 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-TH 8:30AM-5PM</p>
<p>HARRIMAN, CORAL, PSY Provider Gender: Female License number: 26098 NPI: 1417373069 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 140 ELM ST SAN DIEGO, CA 92101-2602 Phone: (619) 515-2520 Fax: After Hours Phone: (619) 515-2520 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM</p>	<p>HAYDEN WADE, HELEN, PSY Provider Gender: Female License number: PSY19313 NPI: 1366951105 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713</p>	<p>HAYDEN WADE, HELEN, PSY Provider Gender: Female License number: PSY19313 NPI: 1366951105 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 2204 NATIONAL AVE SAN DIEGO, CA 92113-3615 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese</p>
<p>HARRIMAN, CORAL, PSY Provider Gender: Female</p>		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

HAYDEN WADE, HELEN, PSY

Provider Gender: Female
 License number: PSY19313
 NPI: 1366951105
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

HAYDEN WADE, HELEN, PSY

Provider Gender: Female

License number: PSY19313
 NPI: 1366951105
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:

After Hours Phone: (619) 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

HAYDEN WADE, HELEN, PSY

Provider Gender: Female
 License number: PSY19313
 NPI: 1366951105
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184

Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours:

HAYDEN WADE, HELEN, PSY

Provider Gender: Female
 License number: PSY19313
 NPI: 1366951105
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-W,F 8:30AM-5PM

HAYDEN WADE, HELEN, PSY

Provider Gender: Female
 License number: PSY19313
 NPI: 1366951105
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

HAYDEN WADE, HELEN, PSY

Provider Gender: Female

License number: PSY19313
 NPI: 1366951105
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

HAYDEN WADE, HELEN, PSY

Provider Gender: Female
 License number: PSY19313
 NPI: 1366951105
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

HAYDEN WADE, HELEN, PSY

Provider Gender: Female
 License number: PSY19313
 NPI: 1366951105
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

HAYDEN WADE, HELEN, PSY

Provider Gender: Female
 License number: PSY19313
 NPI: 1366951105
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

HAYDEN WADE, HELEN, PSY

Provider Gender: Female

License number: PSY19313
 NPI: 1366951105
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2424
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

HEDMAN, TERI LEE, CSW

Provider Gender: U
 License number: 74947
 NPI: 1154811636
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

HEDMAN, TERI LEE, CSW

Provider Gender: U
 License number: 74947
 NPI: 1154811636
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p> <p>HEDMAN, TERI LEE, CSW Provider Gender: U License number: 74947 NPI: 1154811636 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1250 6TH AVE STE 100 SAN DIEGO, CA 92101-4368 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p> <p>HEDMAN, TERI LEE, CSW Provider Gender: U</p>	<p>License number: 74947 NPI: 1154811636 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p> <p>HEDMAN, TERI LEE, CSW Provider Gender: U License number: 74947 NPI: 1154811636 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 140 ELM ST SAN DIEGO, CA 92101-2602</p>	<p>Phone: (619) 515-2520 Fax: After Hours Phone: (619) 515-2520 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM</p> <p>HEDMAN, TERI LEE, CSW Provider Gender: U License number: 74947 NPI: 1154811636 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese</p>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM</p>	<p>License number: 74947 NPI: 1154811636 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>Phone: (619) 515-2424 Fax: (619) 702-8536 After Hours Phone: (619) 515-2424 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>
<p>HEDMAN, TERI LEE, CSW Provider Gender: U License number: 74947 NPI: 1154811636 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713 Phone: (619) 515-2338 Fax: (619) 702-8535 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-TH 8:30AM-5PM</p>	<p>HEDMAN, TERI LEE, CSW Provider Gender: U License number: 74947 NPI: 1154811636 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese</p>	<p>HEDMAN, TERI LEE, CSW Provider Gender: U</p>
<p>HEDMAN, TERI LEE, CSW Provider Gender: U</p>	<p>HEDMAN, TERI LEE, CSW Provider Gender: U License number: 74947 NPI: 1154811636 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120</p>	<p>HEDMAN, TERI LEE, CSW Provider Gender: U</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-W,F 8:30AM-5PM

HEDMAN, TERI LEE, CSW

Provider Gender: U
 License number: 74947
 NPI: 1154811636
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

HIGHTOWER, TERRI M , MFT

Provider Gender: Female

License number: 43779
 NPI: 1063572899
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 INTEGRATED HEALTH PARTNERS - ST VINCENT DE PAUL VILLAGE INC
 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101-7638
 Phone: (619) 233-8500
 Fax: (619) 687-1067
 After Hours Phone: (619) 233-8500
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-W,F 8:30AM-5PM, TH 8:30AM-9PM

HODGE, ROGER G , PSY

Provider Gender: Male
 License number: 26148
 NPI: 1306096714
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 OPERATION SAMAHAN
 9995 CARMEL MOUNTAIN RD
 STE B10 & B11
 SAN DIEGO, CA 92129-2889
 Phone: (844) 200-2426
 Fax: (858) 312-6660
 After Hours Phone: (844) 200-2426

Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Urdu
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M,TU,TH,F 8:30AM-5:30PM, W 10AM-7PM

HODGE, ROGER G , PSY

Provider Gender: Male
 License number: 26148
 NPI: 1306096714
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619) 662-4100
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Please contact provider for
Accessibility information
Hours:

HODGE, ROGER G , PSY

Provider Gender: Male
License number: 26148
NPI: 1306096714
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126-2375
Phone: (844) 200-2426
Fax: (858) 695-9074
After Hours Phone: (844)
200-2426
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Urdu

TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No

Please contact provider for
Accessibility information
Hours: M,TU,TH,F
8:30AM-5:30PM, W 10AM-7PM

HORN BROOK, JESSICA, CSW

Provider Gender: Female
License number: 26598
NPI: 1134401805
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

HORN BROOK, JESSICA, CSW

Provider Gender: Female
License number: 26598
NPI: 1134401805
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO

4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338

Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,

Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

HORN BROOK, JESSICA, CSW

Provider Gender: Female
License number: 26598
NPI: 1134401805
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338

Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM

HORN BROOK, JESSICA, CSW

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Gender: Female
License number: 26598
NPI: 1134401805
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

HORNBROOK, JESSICA, CSW
Provider Gender: Female
License number: 26598
NPI: 1134401805
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

HORNBROOK, JESSICA, CSW
Provider Gender: Female
License number: 26598
NPI: 1134401805
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

HORNBROOK, JESSICA, CSW
Provider Gender: Female
License number: 26598
NPI: 1134401805
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM

HORNBROOK, JESSICA, CSW
Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 26598
NPI: 1134401805
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

HORN BROOK, JESSICA, CSW
Provider Gender: Female
License number: 26598
NPI: 1134401805
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
2204 NATIONAL AVE
SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

HORN BROOK, JESSICA, CSW
Provider Gender: Female
License number: 26598
NPI: 1134401805
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
515-2424
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

HORN BROOK, JESSICA, CSW
Provider Gender: Female
License number: 26598
NPI: 1134401805
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

HORN BROOK, JESSICA, CSW
Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 26598
 NPI: 1134401805
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:

After Hours Phone: (619)
 515-2520

Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No

Min/Max Age:
 Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 Yes

Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

HOUSE, SEAN, PSY

Provider Gender: Male
 License number: 25128
 NPI: 1659524544
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:

HOUSE, SEAN
 11417 W BERNARDO CT STE K
 SAN DIEGO, CA 92127-1639
 Phone: (858) 254-4192

Fax:
 After Hours Phone: (858)
 254-4192

Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M 9AM-7:30PM, TU
 9:30AM-7PM, W,TH
 9:30AM-7:30PM, F 9AM-5PM,
 SA 9AM-12PM

HUBER, REBECCA, MD

Provider Gender: Female
 License number: A133711
 NPI: 1174960686
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:

FAMILY HEALTH CENTERS OF
 SAN DIEGO

3544 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax: (619) 702-8536

After Hours Phone: (619)
 515-2424

Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:

American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No

Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

HUBER, REBECCA, MD

Provider Gender: Female
 License number: A133711
 NPI: 1174960686
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:

FAMILY HEALTH CENTERS OF
 SAN DIEGO

1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
 Phone: (619) 515-2338

Fax: (619) 702-8535
 After Hours Phone: (619)
 515-2338

Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99

Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 Yes

Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

HUBER, REBECCA, MD

Provider Gender: Female
 License number: A133711
 NPI: 1174960686
 Provider English Spoken: Yes
 Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

HUBER, REBECCA, MD
Provider Gender: Female
License number: A133711
NPI: 1174960686
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

HUBER, REBECCA, MD
Provider Gender: Female
License number: A133711
NPI: 1174960686
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:

After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for

Accessibility information
Hours:
HUBER, REBECCA, MD
Provider Gender: Female
License number: A133711
NPI: 1174960686
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

HUBER, REBECCA, MD
Provider Gender: Female
License number: A133711
NPI: 1174960686
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

140 ELM ST
SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
515-2520
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

HUBER, REBECCA, MD
Provider Gender: Female
License number: A133711
NPI: 1174960686
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,

Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM

HUBER, REBECCA, MD
Provider Gender: Female
License number: A133711
NPI: 1174960686
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
2204 NATIONAL AVE
SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

HUBER, REBECCA, MD
Provider Gender: Female
License number: A133711
NPI: 1174960686
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

HUBER, REBECCA, MD
Provider Gender: Female
License number: A133711
NPI: 1174960686
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105-2026

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

HUBER, REBECCA, MD

Provider Gender: Female
License number: A133711
NPI: 1174960686
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

HUDSON, KATE, CSW

Provider Gender: Female
License number: 83712
NPI: 1194159384
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
515-2424
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

HUDSON, KATE, CSW

Provider Gender: Female
License number: 83712
NPI: 1194159384
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
140 ELM ST
SAN DIEGO, CA 92101-2602

HUDSON, KATE, CSW

Provider Gender: Female

License number: 83712
NPI: 1194159384
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

HUDSON, KATE, CSW

Provider Gender: Female
License number: 83712
NPI: 1194159384
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
140 ELM ST
SAN DIEGO, CA 92101-2602

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2520

Fax:

After Hours Phone: (619)
515-2520

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

HUDSON, KATE, CSW

Provider Gender: Female

License number: 83712

NPI: 1194159384

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

2204 NATIONAL AVE

SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

HUDSON, KATE, CSW

Provider Gender: Female

License number: 83712

NPI: 1194159384

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4065 3RD AVE

SAN DIEGO, CA 92103-2184

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours:

HUDSON, KATE, CSW

Provider Gender: Female

License number: 83712

NPI: 1194159384

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

HUDSON, KATE, CSW

Provider Gender: Female

License number: 83712

NPI: 1194159384

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1550 BROADWAY STE 2

SAN DIEGO, CA 92101-5713

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

HUDSON, KATE, CSW

Provider Gender: Female
License number: 83712
NPI: 1194159384
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

HUDSON, KATE, CSW

Provider Gender: Female
License number: 83712
NPI: 1194159384
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

HUDSON, KATE, CSW

Provider Gender: Female
License number: 83712
NPI: 1194159384
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

HUDSON, KATE, CSW

Provider Gender: Female

License number: 83712
NPI: 1194159384
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

HUDSON, KATE, CSW

Provider Gender: Female
License number: 83712
NPI: 1194159384
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)
515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

IBANEZ, BERNICE, PSY

Provider Gender: Female

License number: 22080

NPI: 1740394386

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

SAN YSIDRO HEALTH CENTER
950 S EUCLID AVE

SAN DIEGO, CA 92114-6201

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Arabic, Farsi, Hindi, Kannada,
Maithili, Sinhala, Sinhalese,
Spanish, Urdu

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours:

ISHIDA, YO, CSW

Provider Gender: Female

License number: 29526

NPI: 1225154081

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO

1250 6TH AVE STE 100

SAN DIEGO, CA 92101-4368

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

ISHIDA, YO, CSW

Provider Gender: Female

License number: 29526

NPI: 1225154081

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax: (619) 702-8536

After Hours Phone: (619)

515-2424

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

ISHIDA, YO, CSW

Provider Gender: Female

License number: 29526

NPI: 1225154081

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

140 ELM ST

SAN DIEGO, CA 92101-2602

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2520

Fax:

After Hours Phone: (619)
515-2520

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

ISHIDA, YO, CSW

Provider Gender: Female

License number: 29526

NPI: 1225154081

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

ISHIDA, YO, CSW

Provider Gender: Female

License number: 29526

NPI: 1225154081

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4874 POLK AVE

SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

ISHIDA, YO, CSW

Provider Gender: Female

License number: 29526

NPI: 1225154081

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4065 3RD AVE

SAN DIEGO, CA 92103-2184

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours:

ISHIDA, YO, CSW

Provider Gender: Female

License number: 29526

NPI: 1225154081

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

2204 NATIONAL AVE

SAN DIEGO, CA 92113-3615

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

ISHIDA, YO, CSW

Provider Gender: Female
 License number: 29526
 NPI: 1225154081
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

ISHIDA, YO, CSW

Provider Gender: Female
 License number: 29526
 NPI: 1225154081
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

ISHIDA, YO, CSW

Provider Gender: Female

License number: 29526
 NPI: 1225154081
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

ISHIDA, YO, CSW

Provider Gender: Female
 License number: 29526
 NPI: 1225154081
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8535
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

ISHIDA, YO, CSW

Provider Gender: Female
 License number: 29526
 NPI: 1225154081
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-W,F 8:30AM-5PM

JACKSON, TIENNA S , CSW

Provider Gender: Female
 License number: 89122
 NPI: 1194976225
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-W,F 8:30AM-5PM

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-W,F 8:30AM-5PM

JALAN, DEVESH, MD

Provider Gender: Male

License number: A167754
 NPI: 1083092134
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

JALAN, DEVESH, MD

Provider Gender: Male
 License number: A167754
 NPI: 1083092134
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

JALAN, DEVESH, MD

Provider Gender: Male
License number: A167754
NPI: 1083092134
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

JALAN, DEVESH, MD

Provider Gender: Male
License number: A167754
NPI: 1083092134
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

JALAN, DEVESH, MD

Provider Gender: Male

License number: A167754
NPI: 1083092134
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM

JALAN, DEVESH, MD

Provider Gender: Male
License number: A167754
NPI: 1083092134
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4065 3RD AVE
SAN DIEGO, CA 92103-2184

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)
515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours:

JALAN, DEVESH, MD

Provider Gender: Male

License number: A167754

NPI: 1083092134

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

140 ELM ST

SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520

Fax:

After Hours Phone: (619)

515-2520

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

JALAN, DEVESH, MD

Provider Gender: Male

License number: A167754

NPI: 1083092134

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax: (619) 702-8536

After Hours Phone: (619)

515-2424

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

JALAN, DEVESH, MD

Provider Gender: Male

License number: A167754

NPI: 1083092134

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

2204 NATIONAL AVE

SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

JALAN, DEVESH, MD

Provider Gender: Male

License number: A167754

NPI: 1083092134

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1250 6TH AVE STE 100

SAN DIEGO, CA 92101-4368

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

JALAN, DEVESH, MD

Provider Gender: Male
License number: A167754
NPI: 1083092134
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

JALAN, DEVESH, MD

Provider Gender: Male
License number: A167754
NPI: 1083092134
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

JAMES, CHRISTINE E , MD

Provider Gender: Female

License number: 20A13931
NPI: 1679834022
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

JAMES, CHRISTINE E , MD

Provider Gender: Female
License number: 20A13931
NPI: 1679834022
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

JAMES, CHRISTINE E , MD
Provider Gender: Female
License number: 20A13931
NPI: 1679834022
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
140 ELM ST
SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
515-2520
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

JAMES, CHRISTINE E , MD
Provider Gender: Female
License number: 20A13931
NPI: 1679834022
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

JAMES, CHRISTINE E , MD
Provider Gender: Female

License number: 20A13931
NPI: 1679834022
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4065 3RD AVE
SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

JAMES, CHRISTINE E , MD
Provider Gender: Female
License number: 20A13931
NPI: 1679834022
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

JAMES, CHRISTINE E , MD
Provider Gender: Female
License number: 20A13931
NPI: 1679834022
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

JAMES, CHRISTINE E , MD
Provider Gender: Female
License number: 20A13931
NPI: 1679834022
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

JAMES, CHRISTINE E , MD
Provider Gender: Female

License number: 20A13931
NPI: 1679834022
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
2204 NATIONAL AVE
SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

JAMES, CHRISTINE E , MD
Provider Gender: Female
License number: 20A13931
NPI: 1679834022
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619) 515-2424
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

JAMES, CHRISTINE E , MD
Provider Gender: Female
License number: 20A13931
NPI: 1679834022
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

JAMES, CHRISTINE E , MD
Provider Gender: Female
License number: 20A13931
NPI: 1679834022
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM

**JASSO-RAMIREZ, MARTHA,
CSW**

Provider Gender: Female
License number: 26493
NPI: 1871772020
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

**JASSO-RAMIREZ, MARTHA,
CSW**

Provider Gender: Female
License number: 26493
NPI: 1871772020
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619) 515-2424
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

JASSO-RAMIREZ, MARTHA, CSW
Provider Gender: Female
License number: 26493
NPI: 1871772020
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-W,F 8:30AM-5PM

JASSO-RAMIREZ, MARTHA, CSW
Provider Gender: Female
License number: 26493
NPI: 1871772020
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619) 515-2520
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for

Accessibility information
Hours: M-F 8AM-5PM

JASSO-RAMIREZ, MARTHA, CSW
Provider Gender: Female
License number: 26493
NPI: 1871772020
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours:

JASSO-RAMIREZ, MARTHA, CSW
Provider Gender: Female
License number: 26493
NPI: 1871772020
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

JASSO-RAMIREZ, MARTHA, CSW

Provider Gender: Female
License number: 26493
NPI: 1871772020
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338

Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

JASSO-RAMIREZ, MARTHA, CSW

Provider Gender: Female
License number: 26493
NPI: 1871772020
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99

Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

JASSO-RAMIREZ, MARTHA, CSW

Provider Gender: Female
License number: 26493
NPI: 1871772020
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

JASSO-RAMIREZ, MARTHA, CSW

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>Provider Gender:</i> Female <i>License number:</i> 26493 <i>NPI:</i> 1871772020 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1250 6TH AVE STE 100 SAN DIEGO, CA 92101-4368 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>SAN DIEGO, CA 92113-3615 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM</p>
<p>JASSO-RAMIREZ, MARTHA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 26493 <i>NPI:</i> 1871772020 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 2204 NATIONAL AVE</p>	<p>JASSO-RAMIREZ, MARTHA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 26493 <i>NPI:</i> 1871772020 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8535 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i></p>	<p>JAUREGUI, CYNTHIA J , MFT <i>Provider Gender:</i> Female <i>License number:</i> 46152 <i>NPI:</i> 1003953886 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

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

JAUREGUI, CYNTHIA J , MFT

Provider Gender: Female

License number: 46152

NPI: 1003953886

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

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

JENSEN, DEXTER, MD

Provider Gender: Male

License number: A67960

NPI: 1740465541

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4065 3RD AVE

SAN DIEGO, CA 92103-2184

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

Hours:

**JETHROW, LASHAUNDA R ,
NPA**

Provider Gender: Female

License number: 95017852

NPI: 1497325187

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

SAN DIEGO FAMILY CARE

4290 POLK AVE

SAN DIEGO, CA 92105-1524

Phone: (619) 563-0250

Fax: (619) 563-0015

After Hours Phone: (619)

563-0250

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Farsi,

Vietnamese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

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

8AM-2PM

JONES, ADELE, PSY

Provider Gender: Female

License number: 25311

NPI: 1558602490

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

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

JONES, ADELE, PSY

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Gender: Female
License number: 25311
NPI: 1558602490
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

JONES, ADELE, PSY

Provider Gender: Female
License number: 25311
NPI: 1558602490
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

JONES, ADELE, PSY

Provider Gender: Female
License number: 25311
NPI: 1558602490
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2424
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

JONES, ADELE, PSY

Provider Gender: Female
License number: 25311
NPI: 1558602490
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

JONES, ADELE, PSY

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 25311
 NPI: 1558602490
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619)
 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours:

JONES, ADELE, PSY

Provider Gender: Female
 License number: 25311
 NPI: 1558602490
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713

Phone: (619) 515-2338
 Fax: (619) 702-8535
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

JONES, ADELE, PSY

Provider Gender: Female
 License number: 25311
 NPI: 1558602490
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

JONES, ADELE, PSY

Provider Gender: Female
 License number: 25311
 NPI: 1558602490
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

JONES, ADELE, PSY

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 25311
 NPI: 1558602490
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

JONES, ADELE, PSY

Provider Gender: Female
 License number: 25311
 NPI: 1558602490
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

JONES, ADELE, PSY

Provider Gender: Female
 License number: 25311
 NPI: 1558602490
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:
 After Hours Phone: (619)
 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

JONES, ATAVIA L , CSW

Provider Gender: Female
 License number: LCSW76796
 NPI: 1952734899
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

JONES, ATAVIA L , CSW

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: LCSW76796
 NPI: 1952734899
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:
 After Hours Phone: (619)
 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

JONES, ATAVIA L , CSW
 Provider Gender: Female
 License number: LCSW76796
 NPI: 1952734899
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-W,F 8:30AM-5PM

JONES, ATAVIA L , CSW
 Provider Gender: Female
 License number: LCSW76796
 NPI: 1952734899
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

JONES, ATAVIA L , CSW
 Provider Gender: Female
 License number: LCSW76796
 NPI: 1952734899
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
 Phone: (619) 515-2338
 Fax: (619) 702-8535
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

JONES, ATAVIA L , CSW
 Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: LCSW76796
NPI: 1952734899
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

JONES, ATAVIA L , CSW

Provider Gender: Female
License number: LCSW76796
NPI: 1952734899
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

JONES, ATAVIA L , CSW

Provider Gender: Female
License number: LCSW76796
NPI: 1952734899
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

JONES, ATAVIA L , CSW

Provider Gender: Female
License number: LCSW76796
NPI: 1952734899
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

JONES, ATAVIA L , CSW

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: LCSW76796
NPI: 1952734899
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

JONES, MICHAEL A , CSW
Provider Gender: Male
License number: LCS 22452
NPI: 1548205719
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
515-2424
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

JONES, MICHAEL A , CSW
Provider Gender: Male
License number: LCS 22452
NPI: 1548205719
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

JONES, MICHAEL A , CSW
Provider Gender: Male
License number: LCS 22452
NPI: 1548205719
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

JONES, MICHAEL A , CSW
Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: LCS 22452
 NPI: 1548205719
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:
 After Hours Phone: (619)
 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

JONES, MICHAEL A , CSW
 Provider Gender: Male
 License number: LCS 22452
 NPI: 1548205719
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-W,F 8:30AM-5PM

JONES, MICHAEL A , CSW
 Provider Gender: Male
 License number: LCS 22452
 NPI: 1548205719
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

JONES, MICHAEL A , CSW
 Provider Gender: Male
 License number: LCS 22452
 NPI: 1548205719
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

JONES, MICHAEL A , CSW
 Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: LCS 22452
NPI: 1548205719
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

JONES, MICHAEL A , CSW
Provider Gender: Male
License number: LCS 22452
NPI: 1548205719
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

JONES, MICHAEL A , CSW
Provider Gender: Male
License number: LCS 22452
NPI: 1548205719
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4065 3RD AVE
SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

JONES, MICHAEL A , CSW
Provider Gender: Male
License number: LCS 22452
NPI: 1548205719
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

JONES, MICHAEL A , CSW
Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: LCS 22452
NPI: 1548205719
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
2204 NATIONAL AVE
SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

JUAREZ, AMERICA, CSW
Provider Gender: Female
License number: 92516
NPI: 1386281541
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
SAN YSIDRO HEALTH CENTER
950 S EUCLID AVE
SAN DIEGO, CA 92114-6201

Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
662-4100
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Arabic, Farsi, Hindi, Kannada,
Maithili, Sinhala, Sinhalese,
Spanish, Urdu
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours:

KANE, SADIE P , NPA
Provider Gender: Female
License number: 95004685
NPI: 1942608161
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
SAN DIEGO FAMILY CARE
7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858)
810-8700
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Farsi, Spanish,
Vietnamese, Yue Chinese
TDD: No
Min/Max Age:

Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM, SA
8AM-2PM

KEI, JUSTIN, MD
Provider Gender: Male
License number: A138266
NPI: 1396150041
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
140 ELM ST
SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:

After Hours Phone: (619)
515-2520
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

KEI, JUSTIN, MD
Provider Gender: Male
License number: A138266

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

NPI: 1396150041
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

KEI, JUSTIN, MD

Provider Gender: Male
 License number: A138266
 NPI: 1396150041
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338

Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

KEI, JUSTIN, MD

Provider Gender: Male
 License number: A138266
 NPI: 1396150041
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-W,F 8:30AM-5PM

KEI, JUSTIN, MD

Provider Gender: Male
 License number: A138266
 NPI: 1396150041
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

KEI, JUSTIN, MD

Provider Gender: Male
 License number: A138266
 NPI: 1396150041
 Provider English Spoken: Yes
 Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

KEI, JUSTIN, MD

Provider Gender: Male
License number: A138266
NPI: 1396150041
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4065 3RD AVE
SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

KEI, JUSTIN, MD

Provider Gender: Male
License number: A138266
NPI: 1396150041
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
515-2424
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for

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

KEI, JUSTIN, MD

Provider Gender: Male
License number: A138266
NPI: 1396150041
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

KEI, JUSTIN, MD

Provider Gender: Male
License number: A138266
NPI: 1396150041
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

4874 POLK AVE
SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

KEI, JUSTIN, MD

Provider Gender: Male
License number: A138266
NPI: 1396150041
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,

Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

KEI, JUSTIN, MD

Provider Gender: Male
License number: A138266
NPI: 1396150041
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

KELLEY, KIMBERLY L , CSW

Provider Gender: Female
License number: 97888
NPI: 1326447897
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM

KERI, JASON S , MD

Provider Gender: Male
License number: A82017
NPI: 1811915812
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
SENIOR MEDICAL
ASSOCIATES INC
2810 CAMINO DEL RIO S STE
102

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

SAN DIEGO, CA 92108-3819
 Phone: (619) 299-1419
 Fax: (858) 461-6008
 After Hours Phone: (619) 299-1419
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish
 TDD: No
 Min/Max Age: 13/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

KHAN, MAYSUN, CSW

Provider Gender: Female
 License number: 71910
 NPI: 1033519632
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No

Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-W,F 8:30AM-5PM

KLOBERDANZ, KELSEY L , NPA

Provider Gender: Female
 License number: 95005293
 NPI: 1235672502
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:

After Hours Phone: (619) 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

KLOBERDANZ, KELSEY L , NPA

Provider Gender: Female
 License number: 95005293
 NPI: 1235672502
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-W,F 8:30AM-5PM

KLOBERDANZ, KELSEY L , NPA

Provider Gender: Female
 License number: 95005293
 NPI: 1235672502
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8535
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

**KLOBERDANZ, KELSEY L ,
 NPA**
 Provider Gender: Female
 License number: 95005293
 NPI: 1235672502
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,

Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

**KLOBERDANZ, KELSEY L ,
 NPA**
 Provider Gender: Female
 License number: 95005293
 NPI: 1235672502
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

**KLOBERDANZ, KELSEY L ,
 NPA**
 Provider Gender: Female
 License number: 95005293
 NPI: 1235672502
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

**KLOBERDANZ, KELSEY L ,
 NPA**
 Provider Gender: Female
 License number: 95005293
 NPI: 1235672502
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

KLOBERDANZ, KELSEY L , NPA

Provider Gender: Female
License number: 95005293
NPI: 1235672502
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4065 3RD AVE
SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

KLOBERDANZ, KELSEY L , NPA

Provider Gender: Female
License number: 95005293
NPI: 1235672502
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
515-2424
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information

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

KLOBERDANZ, KELSEY L , NPA

Provider Gender: Female
License number: 95005293
NPI: 1235672502
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

KLOBERDANZ, KELSEY L , NPA

Provider Gender: Female
License number: 95005293
NPI: 1235672502
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

KLOBERDANZ, KELSEY L , NPA

Provider Gender: Female

License number: 95005293

NPI: 1235672502

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

KLUEMPER, NICOLE, PSY

Provider Gender: Female

License number: 27064

NPI: 1902125818

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

SAN DIEGO FAMILY CARE

6973 LINDA VISTA RD

SAN DIEGO, CA 92111-6342

Phone: (858) 810-8787

Fax: (858) 279-0377

After Hours Phone: (858)

810-8787

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Mandarin, Spanish, Vietnamese,
Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

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

8AM-1PM

KLUEMPER, NICOLE, PSY

Provider Gender: Female

License number: 27064

NPI: 1902125818

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

SAN DIEGO FAMILY CARE

7011 LINDA VISTA RD

SAN DIEGO, CA 92111-6307

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858)

810-8700

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Mandarin, Farsi, Spanish,
Vietnamese, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

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

8AM-2PM

KNIGHT, MARK ANTHONY, MD

Provider Gender: Male

License number: A94460

NPI: 1851573554

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

KNIGHT, MARK ANTHONY, MD

Provider Gender: Male
License number: A94460
NPI: 1851573554
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
2204 NATIONAL AVE
SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

KNIGHT, MARK ANTHONY, MD

Provider Gender: Male
License number: A94460
NPI: 1851573554
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338

Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

KNIGHT, MARK ANTHONY, MD

Provider Gender: Male

License number: A94460
NPI: 1851573554
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
140 ELM ST
SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520

Fax:
After Hours Phone: (619)
515-2520
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

KNIGHT, MARK ANTHONY, MD

Provider Gender: Male
License number: A94460
NPI: 1851573554
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

KNIGHT, MARK ANTHONY, MD

Provider Gender: Male
 License number: A94460
 NPI: 1851573554
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

KNIGHT, MARK ANTHONY, MD

Provider Gender: Male
 License number: A94460
 NPI: 1851573554
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424

Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2424
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

KNIGHT, MARK ANTHONY, MD

Provider Gender: Male

License number: A94460
 NPI: 1851573554
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
 Phone: (619) 515-2300

Fax:
 After Hours Phone: (619)
 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours:

KNIGHT, MARK ANTHONY, MD

Provider Gender: Male
 License number: A94460
 NPI: 1851573554
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

KNIGHT, MARK ANTHONY, MD

Provider Gender: Male

License number: A94460

NPI: 1851573554

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619) 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

KNIGHT, MARK ANTHONY, MD

Provider Gender: Male

License number: A94460

NPI: 1851573554

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1550 BROADWAY STE 2

SAN DIEGO, CA 92101-5713

Phone: (619) 515-2338

Fax: (619) 702-8535

After Hours Phone: (619) 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

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

KNIGHT, MARK ANTHONY, MD

Provider Gender: Male

License number: A94460

NPI: 1851573554

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619) 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

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

KNIGHT, TARA J , NPA

Provider Gender: Female

License number: 95012285

NPI: 1801394358

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

SAN YSIDRO HEALTH CENTER

950 S EUCLID AVE

SAN DIEGO, CA 92114-6201

Phone: (619) 662-4100

Fax:

After Hours Phone: (619) 662-4100

662-4100

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Arabic, Farsi, Hindi, Kannada,
Maithili, Sinhala, Sinhalese,
Spanish, Urdu
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours:

KOH, STEVE H , MD

Provider Gender: Male
License number: A103468
NPI: 1467650473
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

KOH, STEVE H , MD

Provider Gender: Male
License number: A103468
NPI: 1467650473
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

KOH, STEVE H , MD

Provider Gender: Male
License number: A103468
NPI: 1467650473
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

KOH, STEVE H , MD

Provider Gender: Male
License number: A103468
NPI: 1467650473
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>Accessibility information <i>Hours:</i> M-F 8AM-5PM KOH, STEVE H , MD <i>Provider Gender:</i> Male <i>License number:</i> A103468 <i>NPI:</i> 1467650473 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 2204 NATIONAL AVE SAN DIEGO, CA 92113-3615 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>3544 30TH ST SAN DIEGO, CA 92104-4120 <i>Phone:</i> (619) 515-2424 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2424 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>
<p>KOH, STEVE H , MD <i>Provider Gender:</i> Male <i>License number:</i> A103468 <i>NPI:</i> 1467650473 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for</p>	<p>KOH, STEVE H , MD <i>Provider Gender:</i> Male <i>License number:</i> A103468 <i>NPI:</i> 1467650473 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8535 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi,</p>	<p>KOH, STEVE H , MD <i>Provider Gender:</i> Male <i>License number:</i> A103468 <i>NPI:</i> 1467650473 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8535 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi,</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

KOH, STEVE H , MD

Provider Gender: Male

License number: A103468

NPI: 1467650473

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

140 ELM ST

SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520

Fax:

After Hours Phone: (619)

515-2520

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

KOH, STEVE H , MD

Provider Gender: Male

License number: A103468

NPI: 1467650473

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

KOH, STEVE H , MD

Provider Gender: Male

License number: A103468

NPI: 1467650473

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1250 6TH AVE STE 100

SAN DIEGO, CA 92101-4368

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

KOH, STEVE H , MD

Provider Gender: Male

License number: A103468

NPI: 1467650473

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

SAN YSIDRO HEALTH CENTER

950 S EUCLID AVE

SAN DIEGO, CA 92114-6201

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Arabic, Farsi, Hindi, Kannada,
Maithili, Sinhala, Sinhalese,
Spanish, Urdu

TDD: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<i>Min/Max Age:</i>	<i>NPI:</i> 1801233911	<i>Site English Spoken:</i> Yes
<i>Gender Restriction:</i> No Gender Restrictions	<i>Provider English Spoken:</i> Yes	<i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
<i>American Sign Language (ASL):</i> No	<i>Provider Language(s) Spoken:</i> Cultural Competency: KOSMACH, JOSEPH	<i>TDD:</i> No
Please contact provider for Accessibility information	7850 VISTA HILL AVE SAN DIEGO, CA 92123-2717	<i>Min/Max Age:</i> 0/99
<i>Hours:</i>	<i>Phone:</i> (619) 294-4119	<i>Gender Restriction:</i> No Gender Restrictions
	<i>Fax:</i>	<i>American Sign Language (ASL):</i> Yes
KOH, STEVE H , MD	<i>After Hours Phone:</i> (619) 294-4119	Please contact provider for Accessibility information
<i>Provider Gender:</i> Male	<i>Website:</i> www.beaconhealthoptions.com	<i>Hours:</i> M-W,F 8:30AM-5PM
<i>License number:</i> A103468	<i>Accepting New Patients:</i> Yes	
<i>NPI:</i> 1467650473	<i>Site English Spoken:</i> Yes	
<i>Provider English Spoken:</i> Yes	<i>Site Language(s) Spoken:</i> TDD: Yes	KURANAKA, TRACY R , MD
<i>Provider Language(s) Spoken:</i> Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO	<i>Min/Max Age:</i> 0/99	<i>Provider Gender:</i> Female
4065 3RD AVE	<i>Gender Restriction:</i> No Gender Restrictions	<i>License number:</i> A75170
SAN DIEGO, CA 92103-2184	<i>American Sign Language (ASL):</i> No	<i>NPI:</i> 1619930542
<i>Phone:</i> (619) 515-2300	Please contact provider for Accessibility information	<i>Provider English Spoken:</i> Yes
<i>Fax:</i>	<i>Hours:</i> M-W,F 8AM-5PM, TH 8AM-5:30PM	<i>Provider Language(s) Spoken:</i> Cultural Competency: SAN DIEGO FAMILY CARE
<i>After Hours Phone:</i> (619) 515-2300		6973 LINDA VISTA RD
<i>Website:</i> www.beaconhealthoptions.com	KRITTMAN, STUART W , PSY	SAN DIEGO, CA 92111-6342
<i>Accepting New Patients:</i> Yes	<i>Provider Gender:</i> Male	<i>Phone:</i> (858) 810-8787
<i>Site English Spoken:</i> Yes	<i>License number:</i> PSY20233	<i>Fax:</i> (858) 279-0377
<i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese	<i>NPI:</i> 1174964399	<i>After Hours Phone:</i> (858) 810-8787
<i>TDD:</i> No	<i>Provider English Spoken:</i> Yes	<i>Website:</i> www.beaconhealthoptions.com
<i>Min/Max Age:</i>	<i>Provider Language(s) Spoken:</i> Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO	<i>Accepting New Patients:</i> Yes
<i>Gender Restriction:</i> No Gender Restrictions	3705 MISSION BLVD	<i>Site English Spoken:</i> Yes
<i>American Sign Language (ASL):</i> Yes	SAN DIEGO, CA 92109-7104	<i>Site Language(s) Spoken:</i> Mandarin, Spanish, Vietnamese, Yue Chinese
Please contact provider for Accessibility information	<i>Phone:</i> (619) 515-2338	<i>TDD:</i> No
<i>Hours:</i>	<i>Fax:</i> (619) 702-8536	<i>Min/Max Age:</i>
	<i>After Hours Phone:</i> (619) 515-2338	<i>Gender Restriction:</i> No Gender Restrictions
KOSMACH, JOSEPH J , MD	<i>Website:</i> www.beaconhealthoptions.com	<i>American Sign Language (ASL):</i> No
<i>Provider Gender:</i> Male	<i>Accepting New Patients:</i> Yes	Please contact provider for Accessibility information
<i>License number:</i> 20A16558		<i>Hours:</i> M-F 8AM-5PM, SA

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

8AM-1PM

KURANAKA, TRACY R , MD

Provider Gender: Female
License number: A75170
NPI: 1619930542
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 SAN DIEGO FAMILY CARE
 4305 UNIVERSITY AVE
 SAN DIEGO, CA 92105-1645
Phone: (858) 280-2058
Fax: (619) 563-0015
After Hours Phone: (858)
 280-2058
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM, SA
 8AM-2PM

KURANAKA, TRACY R , MD

Provider Gender: Female
License number: A75170
NPI: 1619930542
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 SAN DIEGO FAMILY CARE
 4290 POLK AVE
 SAN DIEGO, CA 92105-1524

Phone: (619) 563-0250
Fax: (619) 563-0015
After Hours Phone: (619)
 563-0250
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Farsi,
 Vietnamese
 TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM, SA
 8AM-2PM

KYLE, MARCIE, CSW

Provider Gender: Female
License number: LCSW78555
NPI: 1174981500
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No

Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

KYLE, MARCIE, CSW

Provider Gender: Female
License number: LCSW78555
NPI: 1174981500
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM

KYLE, MARCIE, CSW

Provider Gender: Female
License number: LCSW78555

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

NPI: 1174981500
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
515-2424
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

KYLE, MARCIE, CSW

Provider Gender: Female
License number: LCSW78555
NPI: 1174981500
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

KYLE, MARCIE, CSW

Provider Gender: Female
License number: LCSW78555
NPI: 1174981500
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
140 ELM ST
SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
515-2520
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

KYLE, MARCIE, CSW

Provider Gender: Female
License number: LCSW78555
NPI: 1174981500
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

KYLE, MARCIE, CSW

Provider Gender: Female
License number: LCSW78555
NPI: 1174981500
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM

KYLE, MARCIE, CSW

Provider Gender: Female
License number: LCSW78555
NPI: 1174981500
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
2204 NATIONAL AVE
SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

KYLE, MARCIE, CSW

Provider Gender: Female
License number: LCSW78555
NPI: 1174981500
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4065 3RD AVE
SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:

After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for

Accessibility information
Hours:
KYLE, MARCIE, CSW
Provider Gender: Female
License number: LCSW78555
NPI: 1174981500
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

KYLE, MARCIE, CSW

Provider Gender: Female
License number: LCSW78555
NPI: 1174981500
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

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

KYLE, MARCIE, CSW

Provider Gender: Female

License number: LCSW78555

NPI: 1174981500

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1250 6TH AVE STE 100

SAN DIEGO, CA 92101-4368

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

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

LAKE, NAOMI B , CSW

Provider Gender: Female

License number: 17413

NPI: 1215084116

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

SAN DIEGO AMERICAN INDIAN

HEALTH CENTER

2630 1ST AVE

SAN DIEGO, CA 92103-6599

Phone: (619) 234-2158

Fax: (619) 234-1979

After Hours Phone: (619)

234-2158

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

LARDON, MICHAEL T , MD

Provider Gender: Male

License number: A48664

NPI: 1174630305

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

LARDON, MICHAEL

3750 CONVOY ST STE 318

SAN DIEGO, CA 92111-3741

Phone: (858) 292-2929

Fax: (619) 292-2909

After Hours Phone: (858)

292-2929

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

TDD: Yes

Min/Max Age: 19/64

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-TH 9AM-5PM, F

9AM-12PM

LEBLANC, ASHLEY B , CSW

Provider Gender: Female

License number: 83136

NPI: 1275905622

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>Accessibility information <i>Hours:</i> M-F 8:30AM-5PM LEBLANC, ASHLEY B , CSW <i>Provider Gender:</i> Female <i>License number:</i> 83136 <i>NPI:</i> 1275905622 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 140 ELM ST SAN DIEGO, CA 92101-2602 <i>Phone:</i> (619) 515-2520 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2520 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>3544 30TH ST SAN DIEGO, CA 92104-4120 <i>Phone:</i> (619) 515-2424 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2424 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>
<p>LEBLANC, ASHLEY B , CSW <i>Provider Gender:</i> Female <i>License number:</i> 83136 <i>NPI:</i> 1275905622 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1250 6TH AVE STE 100 SAN DIEGO, CA 92101-4368 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for</p>	<p>LEBLANC, ASHLEY B , CSW <i>Provider Gender:</i> Female <i>License number:</i> 83136 <i>NPI:</i> 1275905622 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8535 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi,</p>	<p>LEBLANC, ASHLEY B , CSW <i>Provider Gender:</i> Female <i>License number:</i> 83136 <i>NPI:</i> 1275905622 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8535 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi,</p>

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J. Directorio de proveedores de salud mental

Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

LEBLANC, ASHLEY B , CSW
Provider Gender: Female
License number: 83136
NPI: 1275905622
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

LEBLANC, ASHLEY B , CSW
Provider Gender: Female
License number: 83136
NPI: 1275905622
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

LEBLANC, ASHLEY B , CSW
Provider Gender: Female
License number: 83136
NPI: 1275905622
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

LEBLANC, ASHLEY B , CSW
Provider Gender: Female
License number: 83136
NPI: 1275905622
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

LEBLANC, ASHLEY B , CSW
 Provider Gender: Female
 License number: 83136
 NPI: 1275905622
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

LEWIS, ARASELI P , PSY
 Provider Gender: Female

License number: 25551
 NPI: 1144395542
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: ACCESS PSYCHOLOGY SERVICES, PC
 750 B ST STE 2870
 SAN DIEGO, CA 92101-8132
 Phone: (619) 722-0014
 Fax: (619) 327-4174
 After Hours Phone: (619) 722-0014
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 9AM-5PM

LIANG, YINGJIAN, MD
 Provider Gender: Female
 License number: A127013
 NPI: 1912295361
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Mandarin
 Cultural Competency: LIANG, YINGJIAN
 7850 VISTA HILL AVE
 SAN DIEGO, CA 92123-2717
 Phone: (858) 499-8430
 Fax: (858) 278-7721
 After Hours Phone: (858) 499-8430

Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Mandarin
 TDD: Yes
 Min/Max Age: 13/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 9AM-5PM

LIDSTONE, PAVEN, MD
 Provider Gender: Female
 License number: 161149
 NPI: 1942662093
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

LIDSTONE, PAVEN, MD

Provider Gender: Female

License number: 161149

NPI: 1942662093

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

LIDSTONE, PAVEN, MD

Provider Gender: Female

License number: 161149

NPI: 1942662093

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

LIDSTONE, PAVEN, MD

Provider Gender: Female

License number: 161149

NPI: 1942662093

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1250 6TH AVE STE 100

SAN DIEGO, CA 92101-4368

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

LIDSTONE, PAVEN, MD

Provider Gender: Female

License number: 161149

NPI: 1942662093

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax: (619) 702-8536

After Hours Phone: (619)

515-2424

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

LIDSTONE, PAVEN, MD

Provider Gender: Female
License number: 161149
NPI: 1942662093
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

LIDSTONE, PAVEN, MD

Provider Gender: Female
License number: 161149
NPI: 1942662093
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184

Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

LIDSTONE, PAVEN, MD

Provider Gender: Female
License number: 161149
NPI: 1942662093
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
 515-2520
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

LIDSTONE, PAVEN, MD

Provider Gender: Female
License number: 161149
NPI: 1942662093
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

LIDSTONE, PAVEN, MD

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 161149
NPI: 1942662093
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

LIDSTONE, PAVEN, MD

Provider Gender: Female
License number: 161149
NPI: 1942662093
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

LIDSTONE, PAVEN, MD

Provider Gender: Female
License number: 161149
NPI: 1942662093
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

LIERA, CARMEN G , CSW

Provider Gender: Female
License number: 72986
NPI: 1275895443
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
SAN YSIDRO HEALTH CENTER
950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100

Fax:
After Hours Phone: (619)
662-4100
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Arabic, Farsi, Hindi, Kannada,
Maithili, Sinhala, Sinhalese,
Spanish, Urdu
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours:

LIM, SANDRA S , MD

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 20A13075
 NPI: 1083963094
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
 Phone: (619) 515-2300

Fax:
 After Hours Phone: (619)
 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No

Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours:

LIM, SANDRA S , MD

Provider Gender: Female
 License number: 20A13075
 NPI: 1083963094
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

LIM, SANDRA S , MD

Provider Gender: Female
 License number: 20A13075
 NPI: 1083963094
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

LIM, SANDRA S , MD

Provider Gender: Female
 License number: 20A13075
 NPI: 1083963094
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2338

Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No

Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

LIM, SANDRA S , MD

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 20A13075
NPI: 1083963094
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

LIM, SANDRA S , MD

Provider Gender: Female
License number: 20A13075
NPI: 1083963094
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
2204 NATIONAL AVE
SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

LIM, SANDRA S , MD

Provider Gender: Female
License number: 20A13075
NPI: 1083963094
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

LIM, SANDRA S , MD

Provider Gender: Female
License number: 20A13075
NPI: 1083963094
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
140 ELM ST
SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:

After Hours Phone: (619)
515-2520
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

LIM, SANDRA S , MD

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 20A13075
NPI: 1083963094
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM

LIM, SANDRA S , MD

Provider Gender: Female
License number: 20A13075
NPI: 1083963094
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713

Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

LIM, SANDRA S , MD

Provider Gender: Female
License number: 20A13075
NPI: 1083963094
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
515-2424
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

LIM, SANDRA S , MD

Provider Gender: Female
License number: 20A13075
NPI: 1083963094
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

LINDEMAN, KURTIS P , MD

Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: A104052
NPI: 1124155791
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
INTEGRATED HEALTH
PARTNERS - ST VINCENT DE
PAUL VILLAGE INC
1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638
Phone: (619) 233-8500
Fax: (619) 687-1067
After Hours Phone: (619)
233-8500
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM, TH
8:30AM-9PM

LIPPERT, HEATHER M , CSW
Provider Gender: Female
License number: 22526
NPI: 1093991663
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

LIPPERT, HEATHER M , CSW
Provider Gender: Female
License number: 22526
NPI: 1093991663
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

LIPPERT, HEATHER M , CSW
Provider Gender: Female
License number: 22526
NPI: 1093991663
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4065 3RD AVE
SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:

After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

LIPPERT, HEATHER M , CSW
Provider Gender: Female
License number: 22526
NPI: 1093991663
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-W,F 8:30AM-5PM

LIPPERT, HEATHER M , CSW
Provider Gender: Female
License number: 22526
NPI: 1093991663
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2424
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

LIPPERT, HEATHER M , CSW
Provider Gender: Female
License number: 22526
NPI: 1093991663
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for

Accessibility information
Hours: M-F 8:30AM-5PM
LIPPERT, HEATHER M , CSW
Provider Gender: Female
License number: 22526
NPI: 1093991663
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
 515-2520
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM
LIPPERT, HEATHER M , CSW
Provider Gender: Female
License number: 22526
NPI: 1093991663
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

Accessibility information
Hours: M-F 8:30AM-5PM
LIPPERT, HEATHER M , CSW
Provider Gender: Female
License number: 22526
NPI: 1093991663
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
 515-2520
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

LIPPERT, HEATHER M , CSW
Provider Gender: Female
License number: 22526
NPI: 1093991663
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

LIPPERT, HEATHER M , CSW
 Provider Gender: Female
 License number: 22526
 NPI: 1093991663
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,

Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

LIPPERT, HEATHER M , CSW
 Provider Gender: Female
 License number: 22526
 NPI: 1093991663
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

LIPPERT, HEATHER M , CSW
 Provider Gender: Female
 License number: 22526
 NPI: 1093991663
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 LA MAESTRA COMMUNITY
 HEALTH CENTERS
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105-1608
 Phone: (619) 280-4213
 Fax: (619) 281-6738
 After Hours Phone: (619) 280-4213
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5:30PM

LIPPERT, HEATHER M , CSW
 Provider Gender: Female
 License number: 22526
 NPI: 1093991663
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

LIPPERT, HEATHER M , CSW
Provider Gender: Female
License number: 22526
NPI: 1093991663
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

LIU, TIMOTHY C , MD
Provider Gender: Male
License number: A105535
NPI: 1720262801
Provider English Spoken: Yes
Provider Language(s) Spoken:
Mandarin, Yue Chinese
Cultural Competency:
SAN DIEGO FAMILY CARE
7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Farsi, Spanish,
Vietnamese, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM, SA
8AM-2PM

LIU, TIMOTHY C , MD
Provider Gender: Male

License number: A105535
NPI: 1720262801
Provider English Spoken: Yes
Provider Language(s) Spoken:
Mandarin, Yue Chinese
Cultural Competency:
SAN DIEGO FAMILY CARE
6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342
Phone: (858) 810-8787
Fax: (858) 279-0377
After Hours Phone: (858) 810-8787
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Spanish, Vietnamese,
Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM, SA
8AM-1PM

LLAMAS, SASHA G , CSW
Provider Gender: Female
License number: 94249
NPI: 1356713739
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM

LOEB, CINDY, CSW

Provider Gender: Female
License number: 75333
NPI: 1619108511
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM
LOEB, CINDY, CSW
Provider Gender: Female
License number: 75333
NPI: 1619108511
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
140 ELM ST
SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
515-2520
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

LOEB, CINDY, CSW
Provider Gender: Female
License number: 75333
NPI: 1619108511
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621

License number: 75333
NPI: 1619108511
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

LOEB, CINDY, CSW

Provider Gender: Female
License number: 75333
NPI: 1619108511
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

LOEB, CINDY, CSW

Provider Gender: Female
License number: 75333
NPI: 1619108511
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
2204 NATIONAL AVE
SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

LOEB, CINDY, CSW

Provider Gender: Female
License number: 75333
NPI: 1619108511
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM

LOEB, CINDY, CSW

Provider Gender: Female

License number: 75333
NPI: 1619108511
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
515-2424
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

LOEB, CINDY, CSW

Provider Gender: Female
License number: 75333
NPI: 1619108511
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

LOEB, CINDY, CSW

Provider Gender: Female
 License number: 75333
 NPI: 1619108511
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619)
 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours:

LOEB, CINDY, CSW

Provider Gender: Female
 License number: 75333
 NPI: 1619108511
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

LOEB, CINDY, CSW

Provider Gender: Female

License number: 75333
 NPI: 1619108511
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

LOEB, CINDY, CSW

Provider Gender: Female
 License number: 75333
 NPI: 1619108511
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: LUCKS, BONNIE D , PSY Provider Gender: Female License number: 22788 NPI: 1609910876 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: LUCKS PSYCHOLOGY INC 2878 CAMINO DEL RIO S STE 315 SAN DIEGO, CA 92108-3846 Phone: (619) 569-0777 Fax: (619) 563-4559 After Hours Phone: (619) 569-0777 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: TDD: Yes Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M 10AM-6PM, TU-TH 8AM-9PM, F 8AM-7PM</p>	<p>Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST SAN DIEGO, CA 92102-4715 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>
<p>LOVE-ROBLES, YVONNE, PSY Provider Gender: Female License number: 18321 NPI: 1902812811 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: SAN YSIDRO HEALTH CENTER 950 S EUCLID AVE SAN DIEGO, CA 92114-6201 Phone: (619) 662-4100 Fax: After Hours Phone: (619) 662-4100 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu TDD: No</p>	<p>LYDIARD, JESSICA, MD Provider Gender: Female License number: A171775 NPI: 1841731296 Provider English Spoken: Yes</p>	<p>LYDIARD, JESSICA, MD Provider Gender: Female License number: A171775 NPI: 1841731296 Provider English Spoken: Yes Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120 Phone: (619) 515-2424 Fax: (619) 702-8536 After Hours Phone: (619) 515-2424 Website: www.beaconhealthoptions.com</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>
<p>LYDIARD, JESSICA, MD <i>Provider Gender:</i> Female <i>License number:</i> A171775 <i>NPI:</i> 1841731296 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>LYDIARD, JESSICA, MD <i>Provider Gender:</i> Female <i>License number:</i> A171775 <i>NPI:</i> 1841731296 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 2204 NATIONAL AVE SAN DIEGO, CA 92113-3615 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>LYDIARD, JESSICA, MD <i>Provider Gender:</i> Female <i>License number:</i> A171775 <i>NPI:</i> 1841731296 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i></p>
<p>LYDIARD, JESSICA, MD <i>Provider Gender:</i> Female <i>License number:</i> A171775 <i>NPI:</i> 1841731296 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 2204 NATIONAL AVE SAN DIEGO, CA 92113-3615 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>LYDIARD, JESSICA, MD <i>Provider Gender:</i> Female <i>License number:</i> A171775 <i>NPI:</i> 1841731296 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>LYDIARD, JESSICA, MD <i>Provider Gender:</i> Female <i>License number:</i> A171775 <i>NPI:</i> 1841731296 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i></p>

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J. Directorio de proveedores de salud mental

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

LYDIARD, JESSICA, MD

Provider Gender: Female

License number: A171775

NPI: 1841731296

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1250 6TH AVE STE 100

SAN DIEGO, CA 92101-4368

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for

Accessibility information

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

LYDIARD, JESSICA, MD

Provider Gender: Female

License number: A171775

NPI: 1841731296

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for

Accessibility information

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

LYDIARD, JESSICA, MD

Provider Gender: Female

License number: A171775

NPI: 1841731296

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4065 3RD AVE

SAN DIEGO, CA 92103-2184

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)
515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours:

LYDIARD, JESSICA, MD

Provider Gender: Female

License number: A171775

NPI: 1841731296

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

140 ELM ST

SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520

Fax:

After Hours Phone: (619)

515-2520

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM</p>	<p>License number: A171775 NPI: 1841731296 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713 Phone: (619) 515-2338 Fax: (619) 702-8535 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-W,F 8:30AM-5PM</p>	<p>Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-W,F 8:30AM-5PM</p>
<p>LYDIARD, JESSICA, MD Provider Gender: Female License number: A171775 NPI: 1841731296 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>LYONS, KEITH E , CSW Provider Gender: Male License number: 92724 NPI: 1538704002 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713 Phone: (619) 515-2338 Fax: (619) 702-8535 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese</p>	<p>LYONS, KEITH E , CSW Provider Gender: Male License number: 92724 NPI: 1538704002 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104</p>
<p>LYDIARD, JESSICA, MD Provider Gender: Female</p>	<p>LYONS, KEITH E , CSW Provider Gender: Male License number: 92724 NPI: 1538704002 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104</p>	<p>LYONS, KEITH E , CSW Provider Gender: Male License number: 92724 NPI: 1538704002 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713 Phone: (619) 515-2338 Fax: (619) 702-8535 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese</p>

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J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-TH 8:30AM-5PM

LYONS, KEITH E , CSW

Provider Gender: Male
 License number: 92724
 NPI: 1538704002
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No

Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

LYONS, KEITH E , CSW

Provider Gender: Male

License number: 92724
 NPI: 1538704002
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No

Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

LYONS, KEITH E , CSW

Provider Gender: Male
 License number: 92724
 NPI: 1538704002
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No

Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

LYONS, KEITH E , CSW

Provider Gender: Male
 License number: 92724
 NPI: 1538704002
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

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J. Directorio de proveedores de salud mental

<p>TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p> <p>LYONS, KEITH E , CSW Provider Gender: Male License number: 92724 NPI: 1538704002 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1250 6TH AVE STE 100 SAN DIEGO, CA 92101-4368 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p> <p>LYONS, KEITH E , CSW Provider Gender: Male</p>	<p>License number: 92724 NPI: 1538704002 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 140 ELM ST SAN DIEGO, CA 92101-2602 Phone: (619) 515-2520 Fax: 515-2520 After Hours Phone: (619) 515-2520 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM</p> <p>LYONS, KEITH E , CSW Provider Gender: Male License number: 92724 NPI: 1538704002 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120</p>	<p>Phone: (619) 515-2424 Fax: (619) 702-8536 After Hours Phone: (619) 515-2424 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p> <p>LYONS, KEITH E , CSW Provider Gender: Male License number: 92724 NPI: 1538704002 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese</p>
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J. Directorio de proveedores de salud mental

<p>TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM</p> <p>LYONS, KEITH E , CSW Provider Gender: Male License number: 92724 NPI: 1538704002 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p> <p>MACMASTER, LINDSAY, PSY Provider Gender: Female</p>	<p>License number: 25570 NPI: 1659520179 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713 Phone: (619) 515-2338 Fax: (619) 702-8535 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-TH 8:30AM-5PM</p> <p>MACMASTER, LINDSAY, PSY Provider Gender: Female License number: 25570 NPI: 1659520179 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621</p>	<p>Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p> <p>MACMASTER, LINDSAY, PSY Provider Gender: Female License number: 25570 NPI: 1659520179 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese</p>
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J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

MACMASTER, LINDSAY, PSY

Provider Gender: Female
 License number: 25570
 NPI: 1659520179
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:
 After Hours Phone: (619) 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

MACMASTER, LINDSAY, PSY
 Provider Gender: Female
 License number: 25570
 NPI: 1659520179
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

MACMASTER, LINDSAY, PSY

Provider Gender: Female

License number: 25570
 NPI: 1659520179
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

MACMASTER, LINDSAY, PSY
 Provider Gender: Female
 License number: 25570
 NPI: 1659520179
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026

MACMASTER, LINDSAY, PSY
 Provider Gender: Female
 License number: 25570
 NPI: 1659520179
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

MACMASTER, LINDSAY, PSY
 Provider Gender: Female
 License number: 25570
 NPI: 1659520179
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

MACMASTER, LINDSAY, PSY

Provider Gender: Female
 License number: 25570
 NPI: 1659520179
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours:

MACMASTER, LINDSAY, PSY
 Provider Gender: Female
 License number: 25570
 NPI: 1659520179
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104

MACMASTER, LINDSAY, PSY

Provider Gender: Female

License number: 25570
 NPI: 1659520179
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2424
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

MACMASTER, LINDSAY, PSY
 Provider Gender: Female
 License number: 25570
 NPI: 1659520179
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

MACMASTER, LINDSAY, PSY
 Provider Gender: Female
 License number: 25570
 NPI: 1659520179
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104

MACMASTER, LINDSAY, PSY
 Provider Gender: Female
 License number: 25570
 NPI: 1659520179
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-W,F 8:30AM-5PM

MACMASTER, LINDSAY, PSY
 Provider Gender: Female
 License number: 25570
 NPI: 1659520179
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p> <p>MACMASTER, LINDSAY, PSY Provider Gender: Female License number: 25570 NPI: 1659520179 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1250 6TH AVE STE 100 SAN DIEGO, CA 92101-4368 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p> <p>MAHONEY, PATRICIA A , CSW Provider Gender: Female</p>	<p>License number: 22296 NPI: 1700200888 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST SAN DIEGO, CA 92102-4715 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p> <p>MAHONEY, PATRICIA A , CSW Provider Gender: Female License number: 22296 NPI: 1700200888 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120</p>	<p>Phone: (619) 515-2424 Fax: (619) 702-8536 After Hours Phone: (619) 515-2424 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p> <p>MAHONEY, PATRICIA A , CSW Provider Gender: Female License number: 22296 NPI: 1700200888 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese</p>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM</p> <p>MAHONEY, PATRICIA A , CSW Provider Gender: Female License number: 22296 NPI: 1700200888 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 140 ELM ST SAN DIEGO, CA 92101-2602 Phone: (619) 515-2520 Fax: After Hours Phone: (619) 515-2520 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM</p> <p>MAHONEY, PATRICIA A , CSW Provider Gender: Female</p>	<p>License number: 22296 NPI: 1700200888 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713 Phone: (619) 515-2338 Fax: (619) 702-8535 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-TH 8:30AM-5PM</p> <p>MAHONEY, PATRICIA A , CSW Provider Gender: Female License number: 22296 NPI: 1700200888 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 2204 NATIONAL AVE SAN DIEGO, CA 92113-3615</p>	<p>Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p> <p>MAHONEY, PATRICIA A , CSW Provider Gender: Female License number: 22296 NPI: 1700200888 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1250 6TH AVE STE 100 SAN DIEGO, CA 92101-4368 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese</p>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>License number: 22296 NPI: 1700200888 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>Phone: (619) 515-2300 Fax: After Hours Phone: (619) 515-2300 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours:</p>
<p>MAHONEY, PATRICIA A , CSW Provider Gender: Female License number: 22296 NPI: 1700200888 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>MAHONEY, PATRICIA A , CSW Provider Gender: Female License number: 22296 NPI: 1700200888 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4065 3RD AVE SAN DIEGO, CA 92103-2184</p>	<p>MAHONEY, PATRICIA A , CSW Provider Gender: Female License number: 22296 NPI: 1700200888 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese</p>
<p>MAHONEY, PATRICIA A , CSW Provider Gender: Female</p>		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

MAIETTA, KATHLEEN H , CSW

Provider Gender: Female
 License number: 88399
 NPI: 1487128617
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-W,F 8:30AM-5PM

MAIETTA, KATHLEEN H , CSW

Provider Gender: Female

License number: 88399
 NPI: 1487128617
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

MAIETTA, KATHLEEN H , CSW

Provider Gender: Female
 License number: 88399
 NPI: 1487128617
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184

Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours:

MAIETTA, KATHLEEN H , CSW

Provider Gender: Female
 License number: 88399
 NPI: 1487128617
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

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J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

MAIETTA, KATHLEEN H , CSW

Provider Gender: Female
 License number: 88399
 NPI: 1487128617
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

MAIETTA, KATHLEEN H , CSW

Provider Gender: Female

License number: 88399
 NPI: 1487128617
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2338

Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

MAIETTA, KATHLEEN H , CSW

Provider Gender: Female
 License number: 88399
 NPI: 1487128617
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

MAIETTA, KATHLEEN H , CSW

Provider Gender: Female
 License number: 88399
 NPI: 1487128617
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>License number: 88399 NPI: 1487128617 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 2204 NATIONAL AVE SAN DIEGO, CA 92113-3615 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>Phone: (619) 515-2424 Fax: (619) 702-8536 After Hours Phone: (619) 515-2424 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>
<p>MAIETTA, KATHLEEN H , CSW Provider Gender: Female License number: 88399 NPI: 1487128617 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 140 ELM ST SAN DIEGO, CA 92101-2602 Phone: (619) 515-2520 Fax: After Hours Phone: (619) 515-2520 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM</p>	<p>MAIETTA, KATHLEEN H , CSW Provider Gender: Female License number: 88399 NPI: 1487128617 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120</p>	<p>MAIETTA, KATHLEEN H , CSW Provider Gender: Female License number: 88399 NPI: 1487128617 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713 Phone: (619) 515-2338 Fax: (619) 702-8535 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-TH 8:30AM-5PM</p>	<p>Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-W,F 8:30AM-5PM</p>	<p>Site English Spoken: Yes Site Language(s) Spoken: Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours:</p>
<p>MAK, HEATHER, MD Provider Gender: Female License number: A153551 NPI: 1033430863 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: SAN DIEGO AMERICAN INDIAN HEALTH CENTER 2630 1ST AVE SAN DIEGO, CA 92103-6599 Phone: (619) 234-2158 Fax: (619) 234-1979 After Hours Phone: (619) 234-2158 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M-F 8AM-5PM</p>	<p>MALAK, LAWRENCE, MD Provider Gender: Male License number: A115345 NPI: 1467773028 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: SAN YSIDRO HEALTH CENTER 950 S EUCLID AVE SAN DIEGO, CA 92114-6201 Phone: (619) 662-4100 Fax: After Hours Phone: (619) 662-4100 Website: www.beaconhealthoptions.com Accepting New Patients: Yes</p>	<p>MANESS, PAULA J , PSY Provider Gender: Female License number: 23787 NPI: 1437312097 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: MOUNTAIN HEALTH AND COMMUNITY SERVICES INC 316 25TH ST SAN DIEGO, CA 92102-3016 Phone: (619) 445-6200 Fax: (619) 238-5551 After Hours Phone: (619) 445-6200 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Armenian TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M-F 8AM-5PM</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

MANESS, PAULA J , PSY

Provider Gender: Female
License number: 23787
NPI: 1437312097
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MOUNTAIN HEALTH AND
COMMUNITY SERVICES INC
4690 EL CAJON BLVD
SAN DIEGO, CA 92115-4403
Phone: (619) 445-6200
Fax: (619) 824-9076
After Hours Phone: (619)
445-6200
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Armenian
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

MANUEL, LUCKVIN P , MD

Provider Gender: Male
License number: A89173
NPI: 1699857813
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
COMMUNITY RESEARCH
FOUNDATION INC
1465 30TH ST STE K
SAN DIEGO, CA 92154-3497

Phone: (619) 275-0822
Fax: (619) 696-9573
After Hours Phone: (619)
275-0822
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M,W 9AM-8PM, TU,TH,F
9AM-5PM

MANUEL, LUCKVIN P , MD

Provider Gender: Male
License number: A89173
NPI: 1699857813
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
COMMUNITY RESEARCH
FOUNDATION INC
1963 4TH AVE
SAN DIEGO, CA 92101-2394
Phone: (619) 233-3432
Fax: (619) 233-7022
After Hours Phone: (619)
233-3432
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender

Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

MANUEL, LUCKVIN P , MD

Provider Gender: Male
License number: A89173
NPI: 1699857813
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
COMMUNITY RESEARCH
FOUNDATION INC
743 10TH AVE
SAN DIEGO, CA 92101-6673
Phone: (619) 239-4663
Fax: (619) 239-3045
After Hours Phone: (619)
239-4663
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours:

MANUEL, LUCKVIN P , MD

Provider Gender: Male
License number: A89173
NPI: 1699857813
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

COMMUNITY RESEARCH
FOUNDATION INC
1260 MORENA BLVD
SAN DIEGO, CA 92110-3889
Phone: (619) 398-0355
Fax: (619) 398-0350
After Hours Phone: (619)
398-0355

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

No

Please contact provider for
Accessibility information

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

MANUEL, LUCKVIN P , MD

Provider Gender: Male

License number: A89173

NPI: 1699857813

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

COMMUNITY RESEARCH

FOUNDATION INC

1568 6TH AVE

SAN DIEGO, CA 92101-3216

Phone: (619) 696-0822

Fax: (619) 696-9573

After Hours Phone: (619)

696-0822

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Russian

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

No

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-6PM

MANUEL, LUCKVIN P , MD

Provider Gender: Male

License number: A89173

NPI: 1699857813

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

COMMUNITY RESEARCH

FOUNDATION INC

892 27TH ST

SAN DIEGO, CA 92154-1444

Phone: (619) 275-0822

Fax: (619) 696-9573

After Hours Phone: (619)

275-0822

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Russian

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

No

Please contact provider for
Accessibility information

Hours:

MARTINEZ, IVONNE B , CSW

Provider Gender: Female

License number: 85604

NPI: 1225355498

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

MARTINEZ, STEPHANIE, MD

Provider Gender: Female

License number: 152787

NPI: 1699126367

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

SAN YSIDRO HEALTH CENTER

950 S EUCLID AVE

SAN DIEGO, CA 92114-6201

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Site English Spoken: Yes
Site Language(s) Spoken:
 Arabic, Farsi, Hindi, Kannada,
 Maithili, Sinhala, Sinhalese,
 Spanish, Urdu
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours:

MARTINEZ, STEPHANIE, MD
Provider Gender: Female
License number: 152787
NPI: 1699126367
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for

Accessibility information
Hours: M-W,F 8:30AM-5PM
MARTIR, MICHEL, CSW
Provider Gender: Female
License number: 73174
NPI: 1356528434
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM
MARTIR, MICHEL, CSW
Provider Gender: Female
License number: 73174
NPI: 1356528434
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:

FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM
MARTIR, MICHEL, CSW
Provider Gender: Female
License number: 73174
NPI: 1356528434
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener
 información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de
 Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

MARTIR, MICHEL, CSW
Provider Gender: Female
License number: 73174
NPI: 1356528434
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
2204 NATIONAL AVE
SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM
MARTIR, MICHEL, CSW
Provider Gender: Female
License number: 73174
NPI: 1356528434
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
515-2424
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

MARTIR, MICHEL, CSW
Provider Gender: Female
License number: 73174
NPI: 1356528434
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish

Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

MARTIR, MICHEL, CSW
Provider Gender: Female
License number: 73174
NPI: 1356528434
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM

MARTIR, MICHEL, CSW
Provider Gender: Female
License number: 73174
NPI: 1356528434
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):

Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM
MARTIR, MICHEL, CSW
Provider Gender: Female
License number: 73174
NPI: 1356528434
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
 515-2520
Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

MARTIR, MICHEL, CSW
Provider Gender: Female
License number: 73174
NPI: 1356528434
Provider English Spoken: Yes
Provider Language(s) Spoken:

Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

MARTIR, MICHEL, CSW
Provider Gender: Female
License number: 73174
NPI: 1356528434
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i></p>	<p>Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-W,F 8:30AM-5PM</p>	<p>Mandarin <i>Cultural Competency:</i> MA, CI 7850 VISTA HILL AVE SAN DIEGO, CA 92123-2717 <i>Phone:</i> (858) 848-5386 <i>Fax:</i> (858) 836-8765 <i>After Hours Phone:</i> (858) 848-5386 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Mandarin <i>TDD:</i> No <i>Min/Max Age:</i> 13/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 9AM-5PM</p>
<p>MARTIR, MICHEL, CSW <i>Provider Gender:</i> Female <i>License number:</i> 73174 <i>NPI:</i> 1356528434 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender</p>	<p>MASTERS, MARCHITA, PSY <i>Provider Gender:</i> Female <i>License number:</i> 17265 <i>NPI:</i> 1043330467 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> SAN YSIDRO HEALTH CENTER 950 S EUCLID AVE SAN DIEGO, CA 92114-6201 <i>Phone:</i> (619) 662-4100 <i>Fax:</i> <i>After Hours Phone:</i> (619) 662-4100 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i></p>	<p>MCADAMS, HILDA, NPA <i>Provider Gender:</i> Female <i>License number:</i> 14201 <i>NPI:</i> 1396838082 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4065 3RD AVE SAN DIEGO, CA 92103-2184 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes</p>
<p>MA, CI, MD <i>Provider Gender:</i> Female <i>License number:</i> A134158 <i>NPI:</i> 1801185400 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i></p>		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i></p> <p>MCADAMS, HILDA, NPA <i>Provider Gender:</i> Female <i>License number:</i> 14201 <i>NPI:</i> 1396838082 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1250 6TH AVE STE 100 SAN DIEGO, CA 92101-4368 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p> <p>MCADAMS, HILDA, NPA <i>Provider Gender:</i> Female <i>License number:</i> 14201 <i>NPI:</i> 1396838082 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes</p>	<p><i>Accessibility information</i> <i>Hours:</i> M-F 8:30AM-5PM</p> <p>MCADAMS, HILDA, NPA <i>Provider Gender:</i> Female <i>License number:</i> 14201 <i>NPI:</i> 1396838082 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p> <p>MCADAMS, HILDA, NPA <i>Provider Gender:</i> Female <i>License number:</i> 14201 <i>NPI:</i> 1396838082 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i></p>	<p>FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8535 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM</p> <p>MCADAMS, HILDA, NPA <i>Provider Gender:</i> Female <i>License number:</i> 14201 <i>NPI:</i> 1396838082 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes</p>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-W,F 8:30AM-5PM

MCADAMS, HILDA, NPA
Provider Gender: Female
License number: 14201
NPI: 1396838082
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes

Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM
MCADAMS, HILDA, NPA
Provider Gender: Female
License number: 14201
NPI: 1396838082
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM
MCADAMS, HILDA, NPA
Provider Gender: Female
License number: 14201
NPI: 1396838082
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish

Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM
MCADAMS, HILDA, NPA
Provider Gender: Female
License number: 14201
NPI: 1396838082
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2424
Website:
 www.beaconhealthoptions.com

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p> <p>MCADAMS, HILDA, NPA <i>Provider Gender:</i> Female <i>License number:</i> 14201 <i>NPI:</i> 1396838082 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST SAN DIEGO, CA 92102-4715 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p> <p>MCADAMS, HILDA, NPA <i>Provider Gender:</i> Female <i>License number:</i> 14201 <i>NPI:</i> 1396838082 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 140 ELM ST SAN DIEGO, CA 92101-2602 <i>Phone:</i> (619) 515-2520 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2520 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p> <p>MCADAMS, HILDA, NPA <i>Provider Gender:</i> Female <i>License number:</i> 14201 <i>NPI:</i> 1396838082 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i></p>	<p>Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 2204 NATIONAL AVE SAN DIEGO, CA 92113-3615 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p> <p>MCHENRY, KELLY, CSW <i>Provider Gender:</i> Female <i>License number:</i> 29689 <i>NPI:</i> 1851544340 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> American Sign Language <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338</p>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

MCHENRY, KELLY, CSW
Provider Gender: Female
License number: 29689
NPI: 1851544340
Provider English Spoken: Yes
Provider Language(s) Spoken:
American Sign Language
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
2204 NATIONAL AVE
SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender

Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

MCHENRY, KELLY, CSW
Provider Gender: Female
License number: 29689
NPI: 1851544340
Provider English Spoken: Yes
Provider Language(s) Spoken:
American Sign Language
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

MCHENRY, KELLY, CSW
Provider Gender: Female
License number: 29689
NPI: 1851544340

Provider English Spoken: Yes
Provider Language(s) Spoken:
American Sign Language
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

MCHENRY, KELLY, CSW
Provider Gender: Female
License number: 29689
NPI: 1851544340
Provider English Spoken: Yes
Provider Language(s) Spoken:
American Sign Language
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-W,F 8:30AM-5PM

MCHENRY, KELLY, CSW
 Provider Gender: Female
 License number: 29689
 NPI: 1851544340
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 American Sign Language
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:
 After Hours Phone: (619)
 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,

Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

MCHENRY, KELLY, CSW
 Provider Gender: Female
 License number: 29689
 NPI: 1851544340
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 American Sign Language
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

MCHENRY, KELLY, CSW
 Provider Gender: Female
 License number: 29689
 NPI: 1851544340
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 American Sign Language
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

MCHENRY, KELLY, CSW
 Provider Gender: Female
 License number: 29689
 NPI: 1851544340
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 American Sign Language
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

3544 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619) 515-2424
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

MCHENRY, KELLY, CSW
Provider Gender: Female
License number: 29689
NPI: 1851544340
Provider English Spoken: Yes
Provider Language(s) Spoken:
 American Sign Language
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

MCHENRY, KELLY, CSW
Provider Gender: Female
License number: 29689
NPI: 1851544340
Provider English Spoken: Yes
Provider Language(s) Spoken:
 American Sign Language
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:

After Hours Phone: (619) 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information

Hours:
MCHENRY, KELLY, CSW
Provider Gender: Female
License number: 29689
NPI: 1851544340
Provider English Spoken: Yes
Provider Language(s) Spoken:
 American Sign Language
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM

MCKELLOGG GUAJARDO, MEGAN A, PSY
Provider Gender: Female
License number: 23450
NPI: 1952454043
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

MCKELLOGG GUAJARDO, MEGAN
 3821 FRONT ST
 SAN DIEGO, CA 92103-3019
Phone: (619) 354-9081
Fax:
After Hours Phone: (619) 354-9081
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
 No
 Please contact provider for Accessibility information
Hours: TU,W 9AM-8PM, SA 9AM-2PM

MEJIAS, JUAN C , PSY
Provider Gender: Male
License number: 26953
NPI: 1558560730
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 LA MAESTRA COMMUNITY HEALTH CENTERS
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105-1608
Phone: (619) 280-4213
Fax: (619) 281-6738
After Hours Phone: (619) 280-4213
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken:
 Spanish
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
 No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5:30PM

MEJIA, RITA I , MFT
Provider Gender: Female
License number: 99697
NPI: 1952741506
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

MEJIA, RITA I , MFT
Provider Gender: Female
License number: 99697
NPI: 1952741506
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:

After Hours Phone: (619) 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for Accessibility information
Hours:

MEJIA, RITA I , MFT
Provider Gender: Female
License number: 99697
NPI: 1952741506
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

MEJIA, RITA I , MFT

Provider Gender: Female
License number: 99697
NPI: 1952741506
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

MEJIA, RITA I , MFT

Provider Gender: Female
License number: 99697
NPI: 1952741506
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

MEJIA, RITA I , MFT

Provider Gender: Female

License number: 99697
NPI: 1952741506
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
140 ELM ST
SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
515-2520
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

MEJIA, RITA I , MFT

Provider Gender: Female
License number: 99697
NPI: 1952741506
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
2204 NATIONAL AVE
SAN DIEGO, CA 92113-3615

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

MEJIA, RITA I , MFT

Provider Gender: Female
 License number: 99697
 NPI: 1952741506
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-W,F 8:30AM-5PM

MEJIA, RITA I , MFT

Provider Gender: Female
 License number: 99697
 NPI: 1952741506
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
 Phone: (619) 515-2338
 Fax: (619) 702-8535

After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

MEJIA, RITA I , MFT

Provider Gender: Female

License number: 99697
 NPI: 1952741506
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

MEJIA, RITA I , MFT

Provider Gender: Female
 License number: 99697
 NPI: 1952741506
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
515-2424

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

MEJIA, RITA I , MFT

Provider Gender: Female

License number: 99697

NPI: 1952741506

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4874 POLK AVE

SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

**MENDEZ PEREZ, MARIA C ,
CSW**

Provider Gender: Female

License number: 89151

NPI: 1356902795

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

MENDEZ, ANDRES G , PSY

Provider Gender: Male

License number: 28907

NPI: 1841482692

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

2204 NATIONAL AVE

SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

MENDEZ, ANDRES G , PSY

Provider Gender: Male

License number: 28907

NPI: 1841482692

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3544 30TH ST

SAN DIEGO, CA 92104-4120

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619) 515-2424
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

MENDEZ, ANDRES G , PSY
Provider Gender: Male
License number: 28907
NPI: 1841482692
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM
MENDEZ, ANDRES G , PSY
Provider Gender: Male
License number: 28907
NPI: 1841482692
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
140 ELM ST
SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:

After Hours Phone: (619)
515-2520
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

MENDEZ, ANDRES G , PSY
Provider Gender: Male

License number: 28907
NPI: 1841482692
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

MENDEZ, ANDRES G , PSY
Provider Gender: Male
License number: 28907
NPI: 1841482692
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8535
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

MENDEZ, ANDRES G , PSY
 Provider Gender: Male
 License number: 28907
 NPI: 1841482692
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

MENDEZ, ANDRES G , PSY
 Provider Gender: Male
 License number: 28907
 NPI: 1841482692
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-W,F 8:30AM-5PM

MENDEZ, ANDRES G , PSY
 Provider Gender: Male

License number: 28907
 NPI: 1841482692
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

MENDEZ, ANDRES G , PSY
 Provider Gender: Male
 License number: 28907
 NPI: 1841482692
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

MENDEZ, ANDRES G , PSY
Provider Gender: Male
License number: 28907
NPI: 1841482692
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM
MENDEZ, ANDRES G , PSY
Provider Gender: Male
License number: 28907
NPI: 1841482692
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4065 3RD AVE
SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:

After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

MERRILL, SARAH M , CSW
Provider Gender: Female

License number: 79014
NPI: 1639403884
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

MERRILL, SARAH M , CSW
Provider Gender: Female
License number: 79014
NPI: 1639403884
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

MERRILL, SARAH M , CSW
 Provider Gender: Female
 License number: 79014
 NPI: 1639403884
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

MERRILL, SARAH M , CSW
 Provider Gender: Female
 License number: 79014
 NPI: 1639403884
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

MERRILL, SARAH M , CSW
 Provider Gender: Female

License number: 79014
 NPI: 1639403884
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

MERRILL, SARAH M , CSW
 Provider Gender: Female
 License number: 79014
 NPI: 1639403884
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

MERRILL, SARAH M , CSW

Provider Gender: Female
 License number: 79014
 NPI: 1639403884
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

MERRILL, SARAH M , CSW

Provider Gender: Female
 License number: 79014
 NPI: 1639403884
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:

After Hours Phone: (619)
 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

MERRILL, SARAH M , CSW

Provider Gender: Female

License number: 79014
 NPI: 1639403884
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2424
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

MERRILL, SARAH M , CSW

Provider Gender: Female
 License number: 79014
 NPI: 1639403884
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)
515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

Yes

Please contact provider for
Accessibility information

Hours:

MERRILL, SARAH M , CSW

Provider Gender: Female

License number: 79014

NPI: 1639403884

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4874 POLK AVE

SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

MERRILL, SARAH M , CSW

Provider Gender: Female

License number: 79014

NPI: 1639403884

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

Yes

Please contact provider for
Accessibility information

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

METZLER, CINDEA J , MFT

Provider Gender: Female

License number: LMFT38808

NPI: 1487690483

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

CINDEA J METZLER, LMFT
3633 CAMINO DEL RIO S STE
102

SAN DIEGO, CA 92108-4012

Phone: (858) 254-6590

Fax:

After Hours Phone: (858)

254-6590

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

No

Please contact provider for
Accessibility information

Hours: TU 7PM-8PM

MILLER, BRIAN P , MD

Provider Gender: Male

License number: A68180

NPI: 1861411381

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MILLER, BRIAN

7850 VISTA HILL AVE

SAN DIEGO, CA 92123-2717

Phone: (858) 836-8434

Fax: (619) 740-5055

After Hours Phone: (858)

836-8434

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Site English Spoken: Yes

Site Language(s) Spoken:

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

MILLICAN, RUTH, PSY

Provider Gender: Female

License number: 25354

NPI: 1346472305

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax: (619) 702-8536

After Hours Phone: (619)

515-2424

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

MILLICAN, RUTH, PSY

Provider Gender: Female

License number: 25354

NPI: 1346472305

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1550 BROADWAY STE 2

SAN DIEGO, CA 92101-5713

Phone: (619) 515-2338

Fax: (619) 702-8535

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

MILLICAN, RUTH, PSY

Provider Gender: Female

License number: 25354

NPI: 1346472305

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

4874 POLK AVE

SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619) 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

MILLICAN, RUTH, PSY

Provider Gender: Female

License number: 25354

NPI: 1346472305

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

MILLICAN, RUTH, PSY

Provider Gender: Female
 License number: 25354
 NPI: 1346472305
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No

Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

MILLICAN, RUTH, PSY

Provider Gender: Female

License number: 25354
 NPI: 1346472305
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No

Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

MILLICAN, RUTH, PSY

Provider Gender: Female
 License number: 25354
 NPI: 1346472305
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520
 Fax:
 After Hours Phone: (619) 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:

Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

MILLICAN, RUTH, PSY

Provider Gender: Female
 License number: 25354
 NPI: 1346472305
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

MILLICAN, RUTH, PSY

Provider Gender: Female
 License number: 25354
 NPI: 1346472305
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours:

MILLICAN, RUTH, PSY

Provider Gender: Female

License number: 25354
 NPI: 1346472305
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

MILLICAN, RUTH, PSY

Provider Gender: Female
 License number: 25354
 NPI: 1346472305
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

MILLICAN, RUTH, PSY

Provider Gender: Female
 License number: 25354
 NPI: 1346472305
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-W,F 8:30AM-5PM

MIRANDA, CYNTHIA, PSY

Provider Gender: Female
 License number: 21188
 NPI: 1023186970
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: LA MAESTRA COMMUNITY HEALTH CENTERS
 4157 FAIRMOUNT AVE
 SAN DIEGO, CA 92105-1609
 Phone: (619) 285-7097
 Fax: (619) 564-8140
 After Hours Phone: (619) 285-7097
 Website: www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish
 TDD: No
 Min/Max Age: 19/64
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours:

MIRANDA, CYNTHIA, PSY

Provider Gender: Female
 License number: 21188

NPI: 1023186970
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: LA MAESTRA COMMUNITY HEALTH CENTERS
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105-1608
 Phone: (619) 280-4213
 Fax: (619) 281-6738
 After Hours Phone: (619) 280-4213
 Website: www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5:30PM

MISHRA, GAURAV, MD

Provider Gender: Male
 License number: A129941
 NPI: 1689804866
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Hindi, Kannada, Maithili, Spanish
 Cultural Competency: SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619) 662-4100

Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours:

MODAD, ALBERT, PSY

Provider Gender: Female
 License number: 29697
 NPI: 1629453691
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

MODAD, ALBERT, PSY

Provider Gender: Female
License number: 29697
NPI: 1629453691
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
4065 3RD AVE
SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:

After Hours Phone: (619) 515-2300
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No

Min/Max Age:
Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours:

MODAD, ALBERT, PSY

Provider Gender: Female
License number: 29697
NPI: 1629453691
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338

Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No

Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-W,F 8:30AM-5PM

MODAD, ALBERT, PSY

Provider Gender: Female
License number: 29697
NPI: 1629453691
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
140 ELM ST
SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520

Fax:
After Hours Phone: (619) 515-2520
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No

Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes

Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

MODAD, ALBERT, PSY

Provider Gender: Female
License number: 29697
NPI: 1629453691

Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338

Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No

Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

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

MODAD, ALBERT, PSY

Provider Gender: Female
License number: 29697
NPI: 1629453691

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)
515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

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

MODAD, ALBERT, PSY

Provider Gender: Female

License number: 29697

NPI: 1629453691

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

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

MODAD, ALBERT, PSY

Provider Gender: Female

License number: 29697

NPI: 1629453691

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for

Accessibility information

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

MODAD, ALBERT, PSY

Provider Gender: Female

License number: 29697

NPI: 1629453691

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax: (619) 702-8536

After Hours Phone: (619)

515-2424

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for

Accessibility information

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

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

MODAD, ALBERT, PSY

Provider Gender: Female

License number: 29697

NPI: 1629453691

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

2204 NATIONAL AVE

SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

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

MODAD, ALBERT, PSY

Provider Gender: Female

License number: 29697

NPI: 1629453691

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1550 BROADWAY STE 2

SAN DIEGO, CA 92101-5713

Phone: (619) 515-2338

Fax: (619) 702-8535

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

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

MODAD, ALBERT, PSY

Provider Gender: Female

License number: 29697

NPI: 1629453691

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4874 POLK AVE

SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

MORALES MORENO, MINERVA, CSW

Provider Gender: Female

License number: 63550

NPI: 1841337565

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4874 POLK AVE

SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

MORALES MORENO,

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

MINERVA, CSW

Provider Gender: Female
License number: 63550
NPI: 1841337565
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

MORALES MORENO, MINERVA, CSW

Provider Gender: Female
License number: 63550
NPI: 1841337565
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

MORALES MORENO, MINERVA, CSW

Provider Gender: Female
License number: 63550
NPI: 1841337565
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2424
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,

Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

MORALES MORENO, MINERVA, CSW

Provider Gender: Female
License number: 63550
NPI: 1841337565
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-W,F 8:30AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

MORALES MORENO, MINERVA, CSW

Provider Gender: Female
License number: 63550
NPI: 1841337565
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

MORALES MORENO, MINERVA, CSW

Provider Gender: Female
License number: 63550
NPI: 1841337565
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO

4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

MORALES MORENO, MINERVA, CSW

Provider Gender: Female
License number: 63550
NPI: 1841337565
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

MORALES MORENO, MINERVA, CSW

Provider Gender: Female
License number: 63550
NPI: 1841337565
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

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

**MORALES MORENO,
MINERVA, CSW**

Provider Gender: Female

License number: 63550

NPI: 1841337565

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

140 ELM ST

SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520

Fax:

After Hours Phone: (619)

515-2520

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

**MORALES MORENO,
MINERVA, CSW**

Provider Gender: Female

License number: 63550

NPI: 1841337565

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

1550 BROADWAY STE 2

SAN DIEGO, CA 92101-5713

Phone: (619) 515-2338

Fax: (619) 702-8535

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

**MORALES MORENO,
MINERVA, CSW**

Provider Gender: Female

License number: 63550

NPI: 1841337565

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

MORRISON, TYLER E , MD

Provider Gender: Male

License number: A144917

NPI: 1912391814

Provider English Spoken: Yes

Provider Language(s) Spoken:

Japanese

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

140 ELM ST

SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520

Fax:

After Hours Phone: (619)

515-2520

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accessibility information
Hours: M-F 8AM-5PM

MORRISON, TYLER E , MD

Provider Gender: Male
License number: A144917
NPI: 1912391814
Provider English Spoken: Yes
Provider Language(s) Spoken: Japanese
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

MORRISON, TYLER E , MD
Provider Gender: Male
License number: A144917
NPI: 1912391814
Provider English Spoken: Yes
Provider Language(s) Spoken: Japanese
Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO
1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-TH 8:30AM-5PM

MORRISON, TYLER E , MD

Provider Gender: Male
License number: A144917
NPI: 1912391814
Provider English Spoken: Yes
Provider Language(s) Spoken: Japanese
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

MORRISON, TYLER E , MD

Provider Gender: Male
License number: A144917
NPI: 1912391814
Provider English Spoken: Yes
Provider Language(s) Spoken: Japanese
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619) 515-2424
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

MORRISON, TYLER E , MD

Provider Gender: Male
License number: A144917
NPI: 1912391814
Provider English Spoken: Yes
Provider Language(s) Spoken:
Japanese
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4065 3RD AVE
SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

MORRISON, TYLER E , MD

Provider Gender: Male
License number: A144917
NPI: 1912391814
Provider English Spoken: Yes
Provider Language(s) Spoken:
Japanese

Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

MORRISON, TYLER E , MD

Provider Gender: Male
License number: A144917
NPI: 1912391814
Provider English Spoken: Yes
Provider Language(s) Spoken:
Japanese
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

MORRISON, TYLER E , MD

Provider Gender: Male
License number: A144917
NPI: 1912391814
Provider English Spoken: Yes
Provider Language(s) Spoken:
Japanese
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
2204 NATIONAL AVE
SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>Japanese <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE</p>	<p><i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Farsi</p>
<p>MORRISON, TYLER E , MD <i>Provider Gender:</i> Male <i>License number:</i> A144917 <i>NPI:</i> 1912391814 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Japanese <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM</p>	<p>SAN DIEGO, CA 92105-2026 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM</p>	<p><i>TDD:</i> No <i>Min/Max Age:</i> 19/64 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information Hours: M,TU,TH 7AM-7PM</p>
<p>MORRISON, TYLER E , MD <i>Provider Gender:</i> Male <i>License number:</i> A144917 <i>NPI:</i> 1912391814 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i></p>	<p>MOTAGHED, HENGAMEH, PSY <i>Provider Gender:</i> Female <i>License number:</i> 12707 <i>NPI:</i> 1366550592 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi <i>Cultural Competency:</i> MOTAGHED, HENGAMEH 591 CAMINO DE LA REINA STE 918 SAN DIEGO, CA 92108-3111 <i>Phone:</i> (858) 922-4959 <i>Fax:</i> (619) 294-8190 <i>After Hours Phone:</i> (858) 922-4959</p>	<p>MOTAGHED, HENGAMEH, PSY <i>Provider Gender:</i> Female <i>License number:</i> 12707 <i>NPI:</i> 1366550592 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi <i>Cultural Competency:</i> MOTAGHED, HENGAMEH 411 CAMINO DEL RIO S STE 200 SAN DIEGO, CA 92108-3550 <i>Phone:</i> (858) 922-4959 <i>Fax:</i> (619) 294-8190 <i>After Hours Phone:</i> (858) 922-4959 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Farsi <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information Hours: M,TU,TH 8AM-8PM</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

MUIR, KATHLEEN G , MFT

Provider Gender: Female
License number: 52081
NPI: 1093009334
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MUIR, KATHLEEN
8885 RIO SAN DIEGO DR STE
365
SAN DIEGO, CA 92108-1627
Phone: (619) 873-7738
Fax: (619) 324-4154
After Hours Phone: (619)
873-7738
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No

Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M 4PM-9PM, W
12PM-4PM

MUNOZ, VIVIANA, CSW

Provider Gender: Female
License number: 66637
NPI: 1497987713
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4065 3RD AVE
SAN DIEGO, CA 92103-2184

Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

MURPHY, ERIN, MFT

Provider Gender: Female
License number: 42623
NPI: 1063571925
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
515-2424
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

MURPHY, VALERIE R , MFT

Provider Gender: Female
License number: 84920
NPI: 1770732992
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MURPHY, VALERIE
3974 SORRENTO VALLEY
BLVD UNIT 910255
SAN DIEGO, CA 92191-7012
Phone: (619) 786-6062
Fax: (859) 724-3034
After Hours Phone: (619)
786-6062
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 11AM-7PM

NACHE-MORRIS MCCULLUM, TIFFANY, PSY

Provider Gender: Female
License number: 29329
NPI: 1528306206

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
 662-4100
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Arabic, Farsi, Hindi, Kannada,
 Maithili, Sinhala, Sinhalese,
 Spanish, Urdu
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours:

NADEAU MANNING, JULIE, CSW

Provider Gender: Female
License number: 25094
NPI: 1275609760
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300

Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

NADEAU MANNING, JULIE, CSW

Provider Gender: Female
License number: 25094
NPI: 1275609760
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender

Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

NADEAU MANNING, JULIE, CSW

Provider Gender: Female
License number: 25094
NPI: 1275609760
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

NADEAU MANNING, JULIE, CSW

Provider Gender: Female
License number: 25094

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

NPI: 1275609760
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-W,F 8:30AM-5PM

**NADEAU MANNING, JULIE,
 CSW**
 Provider Gender: Female
 License number: 25094
 NPI: 1275609760
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2424
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

**NADEAU MANNING, JULIE,
 CSW**
 Provider Gender: Female
 License number: 25094
 NPI: 1275609760
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
 Phone: (619) 515-2338
 Fax: (619) 702-8535
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,

Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

**NADEAU MANNING, JULIE,
 CSW**
 Provider Gender: Female
 License number: 25094
 NPI: 1275609760
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

NADEAU MANNING, JULIE, CSW

Provider Gender: Female
License number: 25094
NPI: 1275609760
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

NADEAU MANNING, JULIE, CSW

Provider Gender: Female
License number: 25094
NPI: 1275609760
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO

1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

NADEAU MANNING, JULIE, CSW

Provider Gender: Female
License number: 25094
NPI: 1275609760
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
140 ELM ST
SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
515-2520
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

NADEAU MANNING, JULIE, CSW

Provider Gender: Female
License number: 25094
NPI: 1275609760
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

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

NADEAU MANNING, JULIE, CSW

Provider Gender: Female

License number: 25094

NPI: 1275609760

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

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

NAFICY, MAJID, MD

Provider Gender: Male

License number: G70878

NPI: 1265564553

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi, Spanish

Cultural Competency:

SAN YSIDRO HEALTH CENTER

950 S EUCLID AVE

SAN DIEGO, CA 92114-6201

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Arabic, Farsi, Hindi, Kannada,

Maithili, Sinhala, Sinhalese,

Spanish, Urdu

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours:

NARANJO, JORGE, MD

Provider Gender: Male

License number: A62504

NPI: 1992838684

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

SAN YSIDRO HEALTH CENTER

950 S EUCLID AVE

SAN DIEGO, CA 92114-6201

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Arabic, Farsi, Hindi, Kannada,

Maithili, Sinhala, Sinhalese,

Spanish, Urdu

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours:

NAVAKAS MD, EDWARD, MD

Provider Gender: Female

License number: 88320

NPI: 1184648248

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

SAN YSIDRO HEALTH CENTER

950 S EUCLID AVE

SAN DIEGO, CA 92114-6201

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Arabic, Farsi, Hindi, Kannada,

Maithili, Sinhala, Sinhalese,

Spanish, Urdu

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours:

NAWROCKI, KSENIA, MD

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J. Directorio de proveedores de salud mental

Provider Gender: Female
License number: A123879
NPI: 1487882742
Provider English Spoken: Yes
Provider Language(s) Spoken: Russian
Cultural Competency:
COMMUNITY RESEARCH
FOUNDATION INC
1963 4TH AVE
SAN DIEGO, CA 92101-2394
Phone: (619) 233-3432
Fax: (619) 233-7022
After Hours Phone: (619)
233-3432
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

NAWROCKI, KSENIA, MD

Provider Gender: Female
License number: A123879
NPI: 1487882742
Provider English Spoken: Yes
Provider Language(s) Spoken:
Russian
Cultural Competency:
COMMUNITY RESEARCH
FOUNDATION INC
1465 30TH ST STE K
SAN DIEGO, CA 92154-3497

Phone: (619) 275-0822
Fax: (619) 696-9573
After Hours Phone: (619)
275-0822
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M,W 9AM-8PM, TU,TH,F
9AM-5PM

NAWROCKI, KSENIA, MD

Provider Gender: Female
License number: A123879
NPI: 1487882742
Provider English Spoken: Yes
Provider Language(s) Spoken:
Russian
Cultural Competency:
COMMUNITY RESEARCH
FOUNDATION INC
1568 6TH AVE
SAN DIEGO, CA 92101-3216
Phone: (619) 696-0822
Fax: (619) 696-9573
After Hours Phone: (619)
696-0822
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Russian
TDD: No
Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-6PM

NAWROCKI, KSENIA, MD

Provider Gender: Female
License number: A123879
NPI: 1487882742
Provider English Spoken: Yes
Provider Language(s) Spoken:
Russian
Cultural Competency:
COMMUNITY RESEARCH
FOUNDATION INC
892 27TH ST
SAN DIEGO, CA 92154-1444
Phone: (619) 275-0822
Fax: (619) 696-9573
After Hours Phone: (619)
275-0822
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours:

NAWROCKI, KSENIA, MD

Provider Gender: Female
License number: A123879
NPI: 1487882742
Provider English Spoken: Yes

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J. Directorio de proveedores de salud mental

Provider Language(s) Spoken:

Russian

Cultural Competency:

COMMUNITY RESEARCH

FOUNDATION INC

743 10TH AVE

SAN DIEGO, CA 92101-6673

Phone: (619) 239-4663

Fax: (619) 239-3045

After Hours Phone: (619)

239-4663

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Russian

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours:

NAZARIO, JACOBETH, PSY

Provider Gender: Female

License number: PSY32092

NPI: 1326648684

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

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

NAZARIO, JACOBETH, PSY

Provider Gender: Female

License number: PSY32092

NPI: 1326648684

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

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

NAZARIO, JACOBETH, PSY

Provider Gender: Female

License number: PSY32092

NPI: 1326648684

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

1550 BROADWAY STE 2

SAN DIEGO, CA 92101-5713

Phone: (619) 515-2338

Fax: (619) 702-8535

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

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

NAZARIO, JACOBETH, PSY

Provider Gender: Female

License number: PSY32092

NPI: 1326648684

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

3544 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619) 515-2424
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

NAZARIO, JACOBETH, PSY
Provider Gender: Female
License number: PSY32092
NPI: 1326648684
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,

Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

NAZARIO, JACOBETH, PSY
Provider Gender: Female
License number: PSY32092
NPI: 1326648684
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

NAZARIO, JACOBETH, PSY
Provider Gender: Female
License number: PSY32092
NPI: 1326648684
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

NAZARIO, JACOBETH, PSY
Provider Gender: Female
License number: PSY32092
NPI: 1326648684
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

NAZARIO, JACOBETH, PSY
 Provider Gender: Female
 License number: PSY32092
 NPI: 1326648684
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:
 After Hours Phone: (619)
 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

NAZARIO, JACOBETH, PSY
 Provider Gender: Female
 License number: PSY32092
 NPI: 1326648684
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

NAZARIO, JACOBETH, PSY
 Provider Gender: Female

License number: PSY32092
 NPI: 1326648684
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

NAZARIO, JACOBETH, PSY
 Provider Gender: Female
 License number: PSY32092
 NPI: 1326648684
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

NELSON, THEODORA, MD

Provider Gender: Female
 License number: G75021
 NPI: 1326130584
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619) 662-4100
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu
 TDD: No

Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours:

NING, GRACE J , PSY

Provider Gender: Female
 License number: 27293
 NPI: 1598911315
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 SAN DIEGO FAMILY CARE
 4290 POLK AVE
 SAN DIEGO, CA 92105-1524
 Phone: (619) 563-0250
 Fax: (619) 563-0015
 After Hours Phone: (619) 563-0250
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Farsi, Vietnamese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM, SA 8AM-2PM

NING, GRACE J , PSY

Provider Gender: Female
 License number: 27293
 NPI: 1598911315
 Provider English Spoken: Yes

Provider Language(s) Spoken:
 Cultural Competency:
 SAN DIEGO FAMILY CARE
 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111-6307
 Phone: (858) 810-8700
 Fax: (858) 633-4680
 After Hours Phone: (858) 810-8700
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Mandarin, Farsi, Spanish, Vietnamese, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM, SA 8AM-2PM

NOUHI, NUSHA, PSY

Provider Gender: Female
 License number: 27670
 NPI: 1942433917
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Farsi
 Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:
 After Hours Phone: (619) 515-2520
 Website:
 www.beaconhealthoptions.com

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p> <p>NOUHI, NUSHA, PSY <i>Provider Gender:</i> Female <i>License number:</i> 27670 <i>NPI:</i> 1942433917 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p> <p>NOUHI, NUSHA, PSY <i>Provider Gender:</i> Female <i>License number:</i> 27670 <i>NPI:</i> 1942433917 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST SAN DIEGO, CA 92102-4715 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes</p>	<p>Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p> <p>NOUHI, NUSHA, PSY <i>Provider Gender:</i> Female <i>License number:</i> 27670 <i>NPI:</i> 1942433917 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p> <p>NOUHI, NUSHA, PSY <i>Provider Gender:</i> Female <i>License number:</i> 27670 <i>NPI:</i> 1942433917 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com</p>	<p>Farsi <i>Cultural Competency:</i> SAN DIEGO FAMILY CARE 7011 LINDA VISTA RD SAN DIEGO, CA 92111-6307 <i>Phone:</i> (858) 810-8700 <i>Fax:</i> (858) 633-4680 <i>After Hours Phone:</i> (858) 810-8700 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Mandarin, Farsi, Spanish, Vietnamese, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM, SA 8AM-2PM</p> <p>NOUHI, NUSHA, PSY <i>Provider Gender:</i> Female <i>License number:</i> 27670 <i>NPI:</i> 1942433917 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com</p>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p> <p>NOUHI, NUSHA, PSY <i>Provider Gender:</i> Female <i>License number:</i> 27670 <i>NPI:</i> 1942433917 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120 <i>Phone:</i> (619) 515-2424 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2424 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>Farsi <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4065 3RD AVE SAN DIEGO, CA 92103-2184 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i></p>
<p>NOUHI, NUSHA, PSY <i>Provider Gender:</i> Female <i>License number:</i> 27670 <i>NPI:</i> 1942433917 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i></p>	<p>NOUHI, NUSHA, PSY <i>Provider Gender:</i> Female <i>License number:</i> 27670 <i>NPI:</i> 1942433917 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1250 6TH AVE STE 100 SAN DIEGO, CA 92101-4368 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338</p>	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p><i>Restrictions</i> <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM</p>	<p><i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>
<p>NOUHI, NUSHA, PSY <i>Provider Gender:</i> Female <i>License number:</i> 27670 <i>NPI:</i> 1942433917 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8535 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender</p>	<p>NOUHI, NUSHA, PSY <i>Provider Gender:</i> Female <i>License number:</i> 27670 <i>NPI:</i> 1942433917 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 2204 NATIONAL AVE SAN DIEGO, CA 92113-3615 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>NOUHI, NUSHA, PSY <i>Provider Gender:</i> Female <i>License number:</i> 27670 <i>NPI:</i> 1942433917 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi <i>Cultural Competency:</i> SAN DIEGO FAMILY CARE 4290 POLK AVE SAN DIEGO, CA 92105-1524 <i>Phone:</i> (619) 563-0250 <i>Fax:</i> (619) 563-0015 <i>After Hours Phone:</i> (619) 563-0250</p>
<p>NOUHI, NUSHA, PSY <i>Provider Gender:</i> Female <i>License number:</i> 27670 <i>NPI:</i> 1942433917 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi <i>Cultural Competency:</i> SAN DIEGO FAMILY CARE 4290 POLK AVE SAN DIEGO, CA 92105-1524 <i>Phone:</i> (619) 563-0250 <i>Fax:</i> (619) 563-0015 <i>After Hours Phone:</i> (619) 563-0250</p>	<p>NOUHI, NUSHA, PSY <i>Provider Gender:</i> Female <i>License number:</i> 27670 <i>NPI:</i> 1942433917 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi <i>Cultural Competency:</i> SAN DIEGO FAMILY CARE 4290 POLK AVE SAN DIEGO, CA 92105-1524 <i>Phone:</i> (619) 563-0250 <i>Fax:</i> (619) 563-0015 <i>After Hours Phone:</i> (619) 563-0250</p>	

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J. Directorio de proveedores de salud mental

<p><i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Farsi, Vietnamese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM, SA 8AM-2PM</p> <p>NOUHI, NUSHA, PSY <i>Provider Gender:</i> Female <i>License number:</i> 27670 <i>NPI:</i> 1942433917 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions</p>	<p><i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-W,F 8:30AM-5PM</p> <p>NWANGANGA, OKECHUKU R , CSW <i>Provider Gender:</i> Male <i>License number:</i> 27072 <i>NPI:</i> 1285984450 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 2204 NATIONAL AVE SAN DIEGO, CA 92113-3615 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p> <p>NWANGANGA, OKECHUKU R , CSW <i>Provider Gender:</i> Male <i>License number:</i> 27072 <i>NPI:</i> 1285984450</p>	<p><i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p> <p>NWANGANGA, OKECHUKU R , CSW <i>Provider Gender:</i> Male <i>License number:</i> 27072 <i>NPI:</i> 1285984450 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120 <i>Phone:</i> (619) 515-2424 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2424</p>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p><i>Restrictions</i> <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> NWANGANGA, OKECHUKU R , CSW <i>Provider Gender:</i> Male <i>License number:</i> 27072 <i>NPI:</i> 1285984450 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p><i>NPI:</i> 1285984450 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8535 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM</p>
<p>NWANGANGA, OKECHUKU R , CSW <i>Provider Gender:</i> Male <i>License number:</i> 27072 <i>NPI:</i> 1285984450 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4065 3RD AVE SAN DIEGO, CA 92103-2184 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender</p>	<p><i>Restrictions</i> <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM NWANGANGA, OKECHUKU R , CSW <i>Provider Gender:</i> Male <i>License number:</i> 27072</p>	<p>NWANGANGA, OKECHUKU R , CSW <i>Provider Gender:</i> Male <i>License number:</i> 27072 <i>NPI:</i> 1285984450 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104</p>

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J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM

NWANGANGA, OKECHUKU R , CSW

Provider Gender: Male
License number: 27072
NPI: 1285984450
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,

Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

NWANGANGA, OKECHUKU R , CSW

Provider Gender: Male
License number: 27072
NPI: 1285984450
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
140 ELM ST
SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619) 515-2520
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

NWANGANGA, OKECHUKU R , CSW

Provider Gender: Male
License number: 27072
NPI: 1285984450
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

NWANGANGA, OKECHUKU R , CSW

Provider Gender: Male
License number: 27072
NPI: 1285984450
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

NWANGANGA, OKECHUKU R , CSW

Provider Gender: Male
License number: 27072
NPI: 1285984450
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

OBRYAN, KELLY, PSY

Provider Gender: Female
License number: 24966
NPI: 1093882698
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

OBRYAN, KELLY, PSY

Provider Gender: Female
License number: 24966
NPI: 1093882698
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

OBRYAN, KELLY, PSY

Provider Gender: Female
License number: 24966
NPI: 1093882698
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4065 3RD AVE
SAN DIEGO, CA 92103-2184

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)
515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours:

OBRYAN, KELLY, PSY

Provider Gender: Female

License number: 24966

NPI: 1093882698

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

OBRYAN, KELLY, PSY

Provider Gender: Female

License number: 24966

NPI: 1093882698

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

OBRYAN, KELLY, PSY

Provider Gender: Female

License number: 24966

NPI: 1093882698

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

2204 NATIONAL AVE

SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

OBRYAN, KELLY, PSY

Provider Gender: Female

License number: 24966

NPI: 1093882698

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

OBRYAN, KELLY, PSY
 Provider Gender: Female
 License number: 24966
 NPI: 1093882698
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
 Phone: (619) 515-2338
 Fax: (619) 702-8535
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

OBRYAN, KELLY, PSY
 Provider Gender: Female
 License number: 24966
 NPI: 1093882698
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2424
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

OBRYAN, KELLY, PSY
 Provider Gender: Female

License number: 24966
 NPI: 1093882698
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:
 After Hours Phone: (619)
 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

OBRYAN, KELLY, PSY
 Provider Gender: Female
 License number: 24966
 NPI: 1093882698
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

OBRYAN, KELLY, PSY

Provider Gender: Female
 License number: 24966
 NPI: 1093882698
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

OCAMPO, ELAINE, NPA

Provider Gender: Female
 License number: 95003427
 NPI: 1063856805
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 SAN DIEGO FAMILY CARE
 4290 POLK AVE
 SAN DIEGO, CA 92105-1524
 Phone: (619) 563-0250
 Fax: (619) 563-0015
 After Hours Phone: (619)
 563-0250
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Farsi,
 Vietnamese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM, SA
 8AM-2PM

OCAMPO, ELAINE, NPA

Provider Gender: Female
 License number: 95003427
 NPI: 1063856805

Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 SAN DIEGO FAMILY CARE
 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111-6307
 Phone: (858) 810-8700
 Fax: (858) 633-4680
 After Hours Phone: (858)
 810-8700
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Mandarin, Farsi, Spanish,
 Vietnamese, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM, SA
 8AM-2PM

OJHA, PRITI, MD

Provider Gender: Female
 License number: A139807
 NPI: 1760897284
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 SAN DIEGO FAMILY CARE
 4305 UNIVERSITY AVE
 SAN DIEGO, CA 92105-1645
 Phone: (858) 280-2058
 Fax: (619) 563-0015
 After Hours Phone: (858)
 280-2058
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Site English Spoken: Yes

Site Language(s) Spoken:

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

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

OJHA, PRITI, MD

Provider Gender: Female

License number: A139807

NPI: 1760897284

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

SAN DIEGO FAMILY CARE

7011 LINDA VISTA RD

SAN DIEGO, CA 92111-6307

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858)

810-8700

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Mandarin, Farsi, Spanish,

Vietnamese, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for Accessibility information

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

OJHA, PRITI, MD

Provider Gender: Female

License number: A139807

NPI: 1760897284

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

SAN DIEGO FAMILY CARE

6973 LINDA VISTA RD

SAN DIEGO, CA 92111-6342

Phone: (858) 810-8787

Fax: (858) 279-0377

After Hours Phone: (858)

810-8787

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Mandarin, Spanish, Vietnamese,

Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM, SA 8AM-1PM

OJHA, PRITI, MD

Provider Gender: Female

License number: A139807

NPI: 1760897284

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619) 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for Accessibility information

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

OJHA, PRITI, MD

Provider Gender: Female

License number: A139807

NPI: 1760897284

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

SAN DIEGO FAMILY CARE

4290 POLK AVE

SAN DIEGO, CA 92105-1524

Phone: (619) 563-0250

Fax: (619) 563-0015

After Hours Phone: (619)

563-0250

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Farsi,

Vietnamese

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM, SA 8AM-2PM</p> <p>OJHA, PRITI, MD <i>Provider Gender:</i> Female <i>License number:</i> A139807 <i>NPI:</i> 1760897284 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> SAN YSIDRO HEALTH CENTER 950 S EUCLID AVE SAN DIEGO, CA 92114-6201 <i>Phone:</i> (619) 662-4100 <i>Fax:</i> <i>After Hours Phone:</i> (619) 662-4100 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i></p> <p>OLIVEIRA, SHANNON J , MFT <i>Provider Gender:</i> Female <i>License number:</i> 100161 <i>NPI:</i> 1386874626 <i>Provider English Spoken:</i> Yes</p>	<p><i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> OLIVEIRA, SHANNON 2535 CAMINO DEL RIO S STE 230 SAN DIEGO, CA 92108-3795 <i>Phone:</i> (707) 738-3453 <i>Fax:</i> <i>After Hours Phone:</i> (707) 738-3453 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i></p> <p>OLIVER, ELIZABETH, CSW <i>Provider Gender:</i> Female <i>License number:</i> 66862 <i>NPI:</i> 1326296351 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p> <p>OLIVER, ELIZABETH, CSW <i>Provider Gender:</i> Female <i>License number:</i> 66862 <i>NPI:</i> 1326296351 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

OLIVER, ELIZABETH, CSW

Provider Gender: Female

License number: 66862

NPI: 1326296351

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

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

OLIVER, ELIZABETH, CSW

Provider Gender: Female

License number: 66862

NPI: 1326296351

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1250 6TH AVE STE 100

SAN DIEGO, CA 92101-4368

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

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

OLIVER, ELIZABETH, CSW

Provider Gender: Female

License number: 66862

NPI: 1326296351

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

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

OLIVER, ELIZABETH, CSW

Provider Gender: Female

License number: 66862

NPI: 1326296351

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4065 3RD AVE

SAN DIEGO, CA 92103-2184

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

Hours:

OLIVER, ELIZABETH, CSW

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 66862
NPI: 1326296351
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
515-2424
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

OLIVER, ELIZABETH, CSW
Provider Gender: Female
License number: 66862
NPI: 1326296351
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713

Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

OLIVER, ELIZABETH, CSW
Provider Gender: Female
License number: 66862
NPI: 1326296351
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

OLIVER, ELIZABETH, CSW
Provider Gender: Female
License number: 66862
NPI: 1326296351
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
140 ELM ST
SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:

After Hours Phone: (619)
515-2520
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

OLIVER, ELIZABETH, CSW
Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 66862
 NPI: 1326296351
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

OLIVER, ELIZABETH, CSW

Provider Gender: Female
 License number: 66862
 NPI: 1326296351
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

OMORODIN, AISHA, MD

Provider Gender: Female
 License number: A169651
 NPI: 1629500301
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

OMORODIN, AISHA, MD

Provider Gender: Female
 License number: A169651
 NPI: 1629500301
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

OMORODIN, AISHA, MD

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: A169651
NPI: 1629500301
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM

OMORODIN, AISHA, MD

Provider Gender: Female
License number: A169651
NPI: 1629500301
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

OMORODIN, AISHA, MD

Provider Gender: Female
License number: A169651
NPI: 1629500301
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
515-2424
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

OMORODIN, AISHA, MD

Provider Gender: Female
License number: A169651
NPI: 1629500301
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4065 3RD AVE
SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

OMORODIN, AISHA, MD

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: A169651
NPI: 1629500301
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

OMORODIN, AISHA, MD

Provider Gender: Female
License number: A169651
NPI: 1629500301
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

OMORODIN, AISHA, MD

Provider Gender: Female
License number: A169651
NPI: 1629500301
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM

OMORODIN, AISHA, MD

Provider Gender: Female
License number: A169651
NPI: 1629500301
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

OMORODIN, AISHA, MD

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: A169651
NPI: 1629500301
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
140 ELM ST
SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
515-2520
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

OMORODIN, AISHA, MD

Provider Gender: Female
License number: A169651
NPI: 1629500301
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
2204 NATIONAL AVE
SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

ORBE, KERIN, MD

Provider Gender: Female
License number: 20A17225
NPI: 1114256690
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM

ORTEGA, MARIA G , MFT

Provider Gender: Female
License number: 49264
NPI: 1154545739
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

ORTIZ, MARIA, PSY

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Gender: Female
License number: 30953
NPI: 1497980775
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100
Fax: 662-4100
After Hours Phone: (619) 662-4100
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours:

PAI, SARAH A , NPA

Provider Gender: Female
License number: 23711
NPI: 1255762167
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: SAN DIEGO FAMILY CARE
 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111-6307

Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Mandarin, Farsi, Spanish, Vietnamese, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM, SA 8AM-2PM

PAI, SARAH A , NPA

Provider Gender: Female
License number: 23711
NPI: 1255762167
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: SAN DIEGO AMERICAN INDIAN HEALTH CENTER
 2630 1ST AVE
 SAN DIEGO, CA 92103-6599
Phone: (619) 234-2158
Fax: (619) 234-1979
After Hours Phone: (619) 234-2158
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age:
Gender Restriction: No Gender

Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

PATES, HUGH, PSY

Provider Gender: Male
License number: 9576
NPI: 1457468233
Provider English Spoken: Yes
Provider Language(s) Spoken: Latin
Cultural Competency: CONCEPT HEALTHCARE PSYCHOLOGY GROUP
 4901 MORENA BLVD STE 109
 SAN DIEGO, CA 92117-3370
Phone: (866) 284-0482
Fax: (888) 977-1204
After Hours Phone: (866) 284-0482
Website: www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Latin
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

PATTON, MICHAEL A , CSW

Provider Gender: Male
License number: 18244
NPI: 1184756702
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

INTEGRATED HEALTH
PARTNERS - ST VINCENT DE
PAUL VILLAGE INC
1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638
Phone: (619) 233-8500
Fax: (619) 687-1067
After Hours Phone: (619)
233-8500
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM, TH
8:30AM-9PM

PELLECCHIA, KRISTYN G , NPA

Provider Gender: Female
License number: 21354
NPI: 1780981266
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
SENIOR MEDICAL
ASSOCIATES INC
2810 CAMINO DEL RIO S STE
102
SAN DIEGO, CA 92108-3819
Phone: (619) 299-1419
Fax: (858) 461-6008
After Hours Phone: (619)
299-1419
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

PERRY, KATHERINE, NPA

Provider Gender: Female
License number: 95014964
NPI: 1215543426
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
SAN DIEGO AMERICAN INDIAN
HEALTH CENTER
2630 1ST AVE
SAN DIEGO, CA 92103-6599
Phone: (619) 234-2158
Fax: (619) 234-1979
After Hours Phone: (619)
234-2158
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

PHAN, HY V , MD

Provider Gender: Male

License number: C56033
NPI: 1144373408
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
COMMUNITY RESEARCH
FOUNDATION INC
1568 6TH AVE
SAN DIEGO, CA 92101-3216
Phone: (619) 696-0822
Fax: (619) 696-9573
After Hours Phone: (619)
696-0822
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-6PM

PHAN, HY V , MD

Provider Gender: Male
License number: C56033
NPI: 1144373408
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
COMMUNITY RESEARCH
FOUNDATION INC
1465 30TH ST STE K
SAN DIEGO, CA 92154-3497
Phone: (619) 275-0822
Fax: (619) 696-9573
After Hours Phone: (619)
275-0822

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M,W 9AM-8PM, TU,TH,F
9AM-5PM

PHAN, HY V , MD

Provider Gender: Male
License number: C56033
NPI: 1144373408
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
COMMUNITY RESEARCH
FOUNDATION INC
892 27TH ST
SAN DIEGO, CA 92154-1444
Phone: (619) 275-0822
Fax: (619) 696-9573
After Hours Phone: (619)
275-0822
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for

Accessibility information
Hours:
PHAN, HY V , MD
Provider Gender: Male
License number: C56033
NPI: 1144373408
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
COMMUNITY RESEARCH
FOUNDATION INC
1963 4TH AVE
SAN DIEGO, CA 92101-2394
Phone: (619) 233-3432
Fax: (619) 233-7022
After Hours Phone: (619)
233-3432
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

PHAN, HY V , MD

Provider Gender: Male
License number: C56033
NPI: 1144373408
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
COMMUNITY RESEARCH
FOUNDATION INC
743 10TH AVE
SAN DIEGO, CA 92101-6673

Phone: (619) 239-4663
Fax: (619) 239-3045
After Hours Phone: (619)
239-4663
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours:

PHAN, HY V , MD

Provider Gender: Male
License number: C56033
NPI: 1144373408
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
COMMUNITY RESEARCH
FOUNDATION INC
10717 CAMINO RUIZ STE 207
SAN DIEGO, CA 92126-2364
Phone: (858) 695-2211
Fax: (858) 695-3521
After Hours Phone: (858)
695-2211
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>No Please contact provider for Accessibility information Hours: M-F 9:30AM-6PM</p>	<p>FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST SAN DIEGO, CA 92102-4715 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com</p>	<p>Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM</p>
<p>PINEDO, YANELI, CSW Provider Gender: Male License number: 91103 NPI: 1710361712 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 140 ELM ST SAN DIEGO, CA 92101-2602 Phone: (619) 515-2520 Fax: After Hours Phone: (619) 515-2520 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM</p>	<p>Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>PINEDO, YANELI, CSW Provider Gender: Male License number: 91103 NPI: 1710361712 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information</p>
<p>PINEDO, YANELI, CSW Provider Gender: Male License number: 91103 NPI: 1710361712 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency:</p>	<p>PINEDO, YANELI, CSW Provider Gender: Male License number: 91103 NPI: 1710361712 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes</p>	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

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

PINEDO, YANELI, CSW

Provider Gender: Male

License number: 91103

NPI: 1710361712

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

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

PINEDO, YANELI, CSW

Provider Gender: Male

License number: 91103

NPI: 1710361712

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4065 3RD AVE

SAN DIEGO, CA 92103-2184

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

Hours:

PINEDO, YANELI, CSW

Provider Gender: Male

License number: 91103

NPI: 1710361712

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1250 6TH AVE STE 100

SAN DIEGO, CA 92101-4368

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

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

PINEDO, YANELI, CSW

Provider Gender: Male

License number: 91103

NPI: 1710361712

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

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

PINEDO, YANELI, CSW

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Gender: Male
License number: 91103
NPI: 1710361712
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM

PINEDO, YANELI, CSW

Provider Gender: Male
License number: 91103
NPI: 1710361712
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

PINEDO, YANELI, CSW

Provider Gender: Male
License number: 91103
NPI: 1710361712
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2424
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

PINEDO, YANELI, CSW

Provider Gender: Male
License number: 91103
NPI: 1710361712
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

PRASEK, LAUREN, NPA

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 95004145
 NPI: 1932566031
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:
 After Hours Phone: (619)
 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

PRASEK, LAUREN, NPA

Provider Gender: Female
 License number: 95004145
 NPI: 1932566031
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

PRASEK, LAUREN, NPA

Provider Gender: Female
 License number: 95004145
 NPI: 1932566031
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619)
 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours:

PRASEK, LAUREN, NPA

Provider Gender: Female
 License number: 95004145
 NPI: 1932566031
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

PRASEK, LAUREN, NPA

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 95004145
 NPI: 1932566031
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2424
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

PRASEK, LAUREN, NPA

Provider Gender: Female
 License number: 95004145
 NPI: 1932566031
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

PRASEK, LAUREN, NPA

Provider Gender: Female
 License number: 95004145
 NPI: 1932566031
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

PRASEK, LAUREN, NPA

Provider Gender: Female
 License number: 95004145
 NPI: 1932566031
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

PRASEK, LAUREN, NPA

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 95004145
NPI: 1932566031
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

PRASEK, LAUREN, NPA
Provider Gender: Female
License number: 95004145
NPI: 1932566031
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

PRASEK, LAUREN, NPA
Provider Gender: Female
License number: 95004145
NPI: 1932566031
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM

PRASEK, LAUREN, NPA
Provider Gender: Female
License number: 95004145
NPI: 1932566031
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

PROCTOR, MELISSA S , CSW
Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 62650
 NPI: 1336188655
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

PROCTOR, MELISSA S , CSW
 Provider Gender: Female
 License number: 62650
 NPI: 1336188655
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520
 Fax:
 After Hours Phone: (619)
 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

PROCTOR, MELISSA S , CSW
 Provider Gender: Female
 License number: 62650
 NPI: 1336188655
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2424
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

PROCTOR, MELISSA S , CSW
 Provider Gender: Female
 License number: 62650
 NPI: 1336188655
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

PROCTOR, MELISSA S , CSW
 Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 62650
 NPI: 1336188655
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

PROCTOR, MELISSA S , CSW
 Provider Gender: Female
 License number: 62650
 NPI: 1336188655
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184

Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619)
 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours:

PROCTOR, MELISSA S , CSW
 Provider Gender: Female
 License number: 62650
 NPI: 1336188655
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-W,F 8:30AM-5PM

PROCTOR, MELISSA S , CSW
 Provider Gender: Female
 License number: 62650
 NPI: 1336188655
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

PROCTOR, MELISSA S , CSW
 Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 62650
 NPI: 1336188655
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

PROCTOR, MELISSA S , CSW
 Provider Gender: Female
 License number: 62650
 NPI: 1336188655
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

PROCTOR, MELISSA S , CSW
 Provider Gender: Female
 License number: 62650
 NPI: 1336188655
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

PROCTOR, MELISSA S , CSW
 Provider Gender: Female
 License number: 62650
 NPI: 1336188655
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
 Phone: (619) 515-2338
 Fax: (619) 702-8535
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

PROOSASELTS, YULIYA, MD
 Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: A133675
 NPI: 1952747875
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Russian
 Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

PROOSASELTS, YULIYA, MD
 Provider Gender: Female
 License number: A133675
 NPI: 1952747875
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Russian
 Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184

Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours:

PROOSASELTS, YULIYA, MD
 Provider Gender: Female
 License number: A133675
 NPI: 1952747875
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Russian
 Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
 Phone: (619) 515-2338
 Fax: (619) 702-8535
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian,

Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-TH 8:30AM-5PM

PROOSASELTS, YULIYA, MD
 Provider Gender: Female
 License number: A133675
 NPI: 1952747875
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Russian
 Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>PROOSASELTS, YULIYA, MD <i>Provider Gender:</i> Female <i>License number:</i> A133675 <i>NPI:</i> 1952747875 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Russian <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 140 ELM ST SAN DIEGO, CA 92101-2602 <i>Phone:</i> (619) 515-2520 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2520 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p>	<p>3544 30TH ST SAN DIEGO, CA 92104-4120 <i>Phone:</i> (619) 515-2424 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2424 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>
<p>PROOSASELTS, YULIYA, MD <i>Provider Gender:</i> Female <i>License number:</i> A133675 <i>NPI:</i> 1952747875 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Russian <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO</p>	<p>PROOSASELTS, YULIYA, MD <i>Provider Gender:</i> Female <i>License number:</i> A133675 <i>NPI:</i> 1952747875 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Russian <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i></p>	<p>PROOSASELTS, YULIYA, MD <i>Provider Gender:</i> Female <i>License number:</i> A133675 <i>NPI:</i> 1952747875 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Russian <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

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

PROOSASELTS, YULIYA, MD

Provider Gender: Female

License number: A133675

NPI: 1952747875

Provider English Spoken: Yes

Provider Language(s) Spoken:

Russian

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4874 POLK AVE

SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

PROOSASELTS, YULIYA, MD

Provider Gender: Female

License number: A133675

NPI: 1952747875

Provider English Spoken: Yes

Provider Language(s) Spoken:

Russian

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

Yes

Please contact provider for
Accessibility information

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

PROOSASELTS, YULIYA, MD

Provider Gender: Female

License number: A133675

NPI: 1952747875

Provider English Spoken: Yes

Provider Language(s) Spoken:

Russian

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1250 6TH AVE STE 100

SAN DIEGO, CA 92101-4368

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

Yes

Please contact provider for
Accessibility information

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

PROOSASELTS, YULIYA, MD

Provider Gender: Female

License number: A133675

NPI: 1952747875

Provider English Spoken: Yes

Provider Language(s) Spoken:

Russian

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

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

QUESTIN, RODGER, PSY

Provider Gender: Male
License number: 31181
NPI: 1003246364
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
SAN YSIDRO HEALTH CENTER
950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours:

QUIROZ, NORMA, MFT

Provider Gender: Female
License number: 50504
NPI: 1902945199
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO

1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

QUIROZ, NORMA, MFT

Provider Gender: Female
License number: 50504
NPI: 1902945199
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi,

Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-W,F 8:30AM-5PM

RABBAN, DIANA, CSW

Provider Gender: Female
License number: 72987
NPI: 1033426374
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-W,F 8:30AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

RADOJEVIC, NATASHA, PSY

Provider Gender: Female
License number: PSYD28495
NPI: 1821365008
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
SAN DIEGO FAMILY CARE
7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858)
810-8700
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Farsi, Spanish,
Vietnamese, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM, SA
8AM-2PM

RAMOS, ELIZABETH, CSW

Provider Gender: Female
License number: 73374
NPI: 1992046890
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

RAMOS, ELIZABETH, CSW

Provider Gender: Female
License number: 73374
NPI: 1992046890
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,

Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

RAMOS, ELIZABETH, CSW

Provider Gender: Female
License number: 73374
NPI: 1992046890
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>RAMOS, ELIZABETH, CSW <i>Provider Gender:</i> Female <i>License number:</i> 73374 <i>NPI:</i> 1992046890 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120 <i>Phone:</i> (619) 515-2424 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2424 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>4065 3RD AVE SAN DIEGO, CA 92103-2184 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i></p>	<p>American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p>
<p>RAMOS, ELIZABETH, CSW <i>Provider Gender:</i> Female <i>License number:</i> 73374 <i>NPI:</i> 1992046890 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO</p>	<p>RAMOS, ELIZABETH, CSW <i>Provider Gender:</i> Female <i>License number:</i> 73374 <i>NPI:</i> 1992046890 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i></p>	<p>RAMOS, ELIZABETH, CSW <i>Provider Gender:</i> Female <i>License number:</i> 73374 <i>NPI:</i> 1992046890 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8535 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

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

RAMOS, ELIZABETH, CSW

Provider Gender: Female

License number: 73374

NPI: 1992046890

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

2204 NATIONAL AVE

SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

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

RAMOS, ELIZABETH, CSW

Provider Gender: Female

License number: 73374

NPI: 1992046890

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

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

RAMOS, ELIZABETH, CSW

Provider Gender: Female

License number: 73374

NPI: 1992046890

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

140 ELM ST

SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520

Fax:

After Hours Phone: (619)

515-2520

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

RAMOS, ELIZABETH, CSW

Provider Gender: Female

License number: 73374

NPI: 1992046890

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accessibility information
Hours: M-W,F 8:30AM-5PM

RAMOS, ELIZABETH, CSW

Provider Gender: Female
License number: 73374
NPI: 1992046890
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

REGHABI, NASEEM, PSY

Provider Gender: Female
License number: 21940
NPI: 1225573421
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF

SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-W,F 8:30AM-5PM

REID, EMILY, NPA

Provider Gender: Female
License number: 95002766
NPI: 1083081467
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
LA MAESTRA COMMUNITY HEALTH CENTERS
4157 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1609
Phone: (619) 285-7097
Fax: (619) 564-8140
After Hours Phone: (619) 285-7097
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

Spanish
TDD: No
Min/Max Age: 19/64
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours:

REID, EMILY, NPA

Provider Gender: Female
License number: 95002766
NPI: 1083081467
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
LA MAESTRA COMMUNITY HEALTH CENTERS
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608
Phone: (619) 280-4213
Fax: (619) 281-6738
After Hours Phone: (619) 280-4213
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5:30PM

RENE, RACHELLE, PSY

Provider Gender: Female
License number: 23993

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

NPI: 1629108188

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

SAN YSIDRO HEALTH CENTER

950 S EUCLID AVE

SAN DIEGO, CA 92114-6201

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Arabic, Farsi, Hindi, Kannada,

Maithili, Sinhala, Sinhalese,

Spanish, Urdu

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours:

RENERIA, SABRINA, MD

Provider Gender: Female

License number: A145894

NPI: 1285029421

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

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

RINGEL, BRENDA L , MD

Provider Gender: Female

License number: A65800

NPI: 1689869976

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

EXODUS RECOVERY, INC.

2950 EL CAJON BLVD STE 4

SAN DIEGO, CA 92104-1205

Phone: (619) 528-1752

Fax: (619) 528-1756

After Hours Phone: (619)

528-1752

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-4:30PM

ROBITZ, RACHEL A , MD

Provider Gender: Female

License number: A127641

NPI: 1700140159

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

SAN YSIDRO HEALTH CENTER

950 S EUCLID AVE

SAN DIEGO, CA 92114-6201

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Arabic, Farsi, Hindi, Kannada,

Maithili, Sinhala, Sinhalese,

Spanish, Urdu

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours:

RODRIGUEZ, CHRISTINE, PSY

Provider Gender: Female

License number: 30472

NPI: 1568656619

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

2204 NATIONAL AVE

SAN DIEGO, CA 92113-3615

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

RODRIGUEZ, CHRISTINE, PSY

Provider Gender: Female

License number: 30472

NPI: 1568656619

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax: (619) 702-8536

After Hours Phone: (619)

515-2424

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

RODRIGUEZ, CHRISTINE, PSY

Provider Gender: Female

License number: 30472

NPI: 1568656619

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

RODRIGUEZ, CHRISTINE, PSY

Provider Gender: Female

License number: 30472

NPI: 1568656619

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

RODRIGUEZ, CHRISTINE, PSY

Provider Gender: Female

License number: 30472

NPI: 1568656619

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

RODRIGUEZ, CHRISTINE, PSY

Provider Gender: Female

License number: 30472

NPI: 1568656619

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

RODRIGUEZ, CHRISTINE, PSY

Provider Gender: Female

License number: 30472

NPI: 1568656619

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

RODRIGUEZ, CHRISTINE, PSY

Provider Gender: Female

License number: 30472

NPI: 1568656619

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1250 6TH AVE STE 100

SAN DIEGO, CA 92101-4368

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

RODRIGUEZ, CHRISTINE, PSY

Provider Gender: Female

License number: 30472

NPI: 1568656619

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4874 POLK AVE

SAN DIEGO, CA 92105-2026

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

RODRIGUEZ, CHRISTINE, PSY

Provider Gender: Female

License number: 30472

NPI: 1568656619

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

140 ELM ST

SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520

Fax:

After Hours Phone: (619)

515-2520

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

RODRIGUEZ, CHRISTINE, PSY

Provider Gender: Female

License number: 30472

NPI: 1568656619

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4065 3RD AVE

SAN DIEGO, CA 92103-2184

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours:

RODRIGUEZ, CHRISTINE, PSY

Provider Gender: Female

License number: 30472

NPI: 1568656619

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1550 BROADWAY STE 2

SAN DIEGO, CA 92101-5713

Phone: (619) 515-2338

Fax: (619) 702-8535

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

ROSENFARB, BARBARA, CSW

Provider Gender: Female

License number: 28590

NPI: 1447477781

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1550 BROADWAY STE 2

SAN DIEGO, CA 92101-5713

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>Phone: (619) 515-2338 Fax: (619) 702-8535 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-TH 8:30AM-5PM</p>	<p>TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM</p>	<p>License number: 28590 NPI: 1447477781 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST SAN DIEGO, CA 92102-4715 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>
<p>ROSENFARB, BARBARA, CSW Provider Gender: Female License number: 28590 NPI: 1447477781 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese</p>	<p>ROSENFARB, BARBARA, CSW Provider Gender: Female License number: 28590 NPI: 1447477781 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 2204 NATIONAL AVE SAN DIEGO, CA 92113-3615 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>ROSENFARB, BARBARA, CSW Provider Gender: Female License number: 28590 NPI: 1447477781 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143</p>
<p>ROSENFARB, BARBARA, CSW Provider Gender: Female</p>	<p>ROSENFARB, BARBARA, CSW Provider Gender: Female</p>	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>License number: 28590 NPI: 1447477781 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>
<p>ROSENFARB, BARBARA, CSW Provider Gender: Female License number: 28590 NPI: 1447477781 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120 Phone: (619) 515-2424 Fax: (619) 702-8536 After Hours Phone: (619) 515-2424 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese</p>	<p>ROSENFARB, BARBARA, CSW Provider Gender: Female License number: 28590 NPI: 1447477781 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-W,F 8:30AM-5PM</p>	<p>ROSENFARB, BARBARA, CSW Provider Gender: Female License number: 28590 NPI: 1447477781 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4065 3RD AVE SAN DIEGO, CA 92103-2184</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>Phone: (619) 515-2300 Fax: After Hours Phone: (619) 515-2300 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours:</p>	<p>TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM</p>	<p>License number: 28590 NPI: 1447477781 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>
<p>ROSENFARB, BARBARA, CSW Provider Gender: Female License number: 28590 NPI: 1447477781 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 140 ELM ST SAN DIEGO, CA 92101-2602 Phone: (619) 515-2520 Fax: After Hours Phone: (619) 515-2520 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese</p>	<p>ROSENFARB, BARBARA, CSW Provider Gender: Female License number: 28590 NPI: 1447477781 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1250 6TH AVE STE 100 SAN DIEGO, CA 92101-4368 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>ROSE, RICHARD S , MD Provider Gender: Male License number: G21963 NPI: 1033206552 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: SENIOR MEDICAL ASSOCIATES INC 2810 CAMINO DEL RIO S STE 102 SAN DIEGO, CA 92108-3819</p>
<p>ROSENFARB, BARBARA, CSW Provider Gender: Female</p>	<p>ROSENFARB, BARBARA, CSW Provider Gender: Female</p>	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 299-1419
Fax: (858) 461-6008
After Hours Phone: (619) 299-1419
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

ROZELL, KATHY, CSW
Provider Gender: Female
License number: 25068
NPI: 1578603973
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM

ROZELL, KATHY, CSW
Provider Gender: Female
License number: 25068
NPI: 1578603973
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
2204 NATIONAL AVE
SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

ROZELL, KATHY, CSW
Provider Gender: Female
License number: 25068
NPI: 1578603973

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
515-2424
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

ROZELL, KATHY, CSW
Provider Gender: Female
License number: 25068
NPI: 1578603973
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p> <p>ROZELL, KATHY, CSW <i>Provider Gender:</i> Female <i>License number:</i> 25068 <i>NPI:</i> 1578603973 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 140 ELM ST SAN DIEGO, CA 92101-2602 <i>Phone:</i> (619) 515-2520 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2520 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions</p>	<p><i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p> <p>ROZELL, KATHY, CSW <i>Provider Gender:</i> Female <i>License number:</i> 25068 <i>NPI:</i> 1578603973 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM</p> <p>ROZELL, KATHY, CSW <i>Provider Gender:</i> Female <i>License number:</i> 25068 <i>NPI:</i> 1578603973 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST SAN DIEGO, CA 92102-4715 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes</p>	<p><i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8535 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM</p> <p>ROZELL, KATHY, CSW <i>Provider Gender:</i> Female <i>License number:</i> 25068 <i>NPI:</i> 1578603973 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST SAN DIEGO, CA 92102-4715 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes</p>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>Accessibility information Hours: M-F 8AM-5PM</p> <p>ROZELL, KATHY, CSW Provider Gender: Female License number: 25068 NPI: 1578603973 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4065 3RD AVE SAN DIEGO, CA 92103-2184 Phone: (619) 515-2300 Fax: After Hours Phone: (619) 515-2300 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>4094 4TH AVE SAN DIEGO, CA 92103-2143 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>
<p>ROZELL, KATHY, CSW Provider Gender: Female License number: 25068 NPI: 1578603973 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for</p>	<p>ROZELL, KATHY, CSW Provider Gender: Female License number: 25068 NPI: 1578603973 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1250 6TH AVE STE 100 SAN DIEGO, CA 92101-4368 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi,</p>	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

SACHS, MELISSA R , CSW
Provider Gender: Female
License number: 76968
NPI: 1649760356
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

SACHS, MELISSA R , CSW
Provider Gender: Female
License number: 76968
NPI: 1649760356
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

SACHS, MELISSA R , CSW
Provider Gender: Female
License number: 76968
NPI: 1649760356
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
140 ELM ST
SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
515-2520
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

SACHS, MELISSA R , CSW
Provider Gender: Female
License number: 76968
NPI: 1649760356
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-TH 8:30AM-5PM

SACHS, MELISSA R , CSW

Provider Gender: Female
 License number: 76968
 NPI: 1649760356
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No

Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

SACHS, MELISSA R , CSW

Provider Gender: Female

License number: 76968
 NPI: 1649760356
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
 Phone: (619) 515-2300
 Fax:

After Hours Phone: (619) 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No

Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours:

SACHS, MELISSA R , CSW

Provider Gender: Female
 License number: 76968
 NPI: 1649760356
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2424
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

SACHS, MELISSA R , CSW

Provider Gender: Female
 License number: 76968
 NPI: 1649760356
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p> <p>SACHS, MELISSA R , CSW Provider Gender: Female License number: 76968 NPI: 1649760356 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p> <p>SACHS, MELISSA R , CSW Provider Gender: Female</p>	<p>License number: 76968 NPI: 1649760356 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 2204 NATIONAL AVE SAN DIEGO, CA 92113-3615 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p> <p>SACHS, MELISSA R , CSW Provider Gender: Female License number: 76968 NPI: 1649760356 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST SAN DIEGO, CA 92102-4715</p>	<p>Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p> <p>SALGUERO GALLAND, MARIO L , MD Provider Gender: Male License number: A122101 NPI: 1487947826 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: LA MAESTRA COMMUNITY HEALTH CENTERS 4157 FAIRMOUNT AVE SAN DIEGO, CA 92105-1609 Phone: (619) 285-7097 Fax: (619) 564-8140 After Hours Phone: (619) 285-7097 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Spanish</p>
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J. Directorio de proveedores de salud mental

TDD: No
Min/Max Age: 19/64
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours:

SALGUERO GALLAND, MARIO L, MD

Provider Gender: Male
License number: A122101
NPI: 1487947826
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: LA MAESTRA COMMUNITY HEALTH CENTERS
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608
Phone: (619) 280-4213
Fax: (619) 281-6738
After Hours Phone: (619) 280-4213
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5:30PM

SAMADI, ESTHER, MD Provider Gender: Female

License number: A113657
NPI: 1396986204
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

SAMADI, ESTHER, MD Provider Gender: Female License number: A113657 NPI: 1396986204 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 2204 NATIONAL AVE SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

SAMADI, ESTHER, MD Provider Gender: Female License number: A113657 NPI: 1396986204 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120 Phone: (619) 515-2424 Fax: (619) 702-8536 After Hours Phone: (619) 515-2424 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

SAMADI, ESTHER, MD

Provider Gender: Female
 License number: A113657
 NPI: 1396986204
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours:

SAMADI, ESTHER, MD

Provider Gender: Female

License number: A113657
 NPI: 1396986204
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

SANGHADIA, MUKESH, MD

Provider Gender: Male
 License number: C56113
 NPI: 1366550246
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 COMMUNITY RESEARCH FOUNDATION INC
 995 GATEWAY CENTER WAY
 SAN DIEGO, CA 92102-4500

Phone: (619) 398-2156
 Fax: (619) 398-2165
 After Hours Phone: (619) 398-2156
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

SCHANOWITZ, JEFF Y , PSY

Provider Gender: Male
 License number: 20362
 NPI: 1679683007
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 SCHANOWITZ, JEFF
 2525 CAMINO DEL RIO S STE 245
 SAN DIEGO, CA 92108-3775
 Phone: (619) 252-3713
 Fax: (619) 810-0620
 After Hours Phone: (619) 252-3713
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>No Please contact provider for Accessibility information Hours: M-SU 8AM-8PM</p>	<p>2630 1ST AVE SAN DIEGO, CA 92103-6599 Phone: (619) 234-2158 Fax: (619) 234-1979 After Hours Phone: (619) 234-2158 Website: www.beaconhealthoptions.com</p>	<p>TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>
<p>SCHLIMME, LUKE F , CSW Provider Gender: Male License number: 69443 NPI: 1316253529 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: SCHLIMME, LUKE 2231 CAMINO DEL RIO S STE 308 SAN DIEGO, CA 92108-3612 Phone: (619) 202-1538 Fax: (619) 260-3054 After Hours Phone: (619) 202-1538 Website: www.beaconhealthoptions.com</p>	<p>Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M-F 8AM-5PM</p>	<p>SEPULVEDA, JOE, MD Provider Gender: Male License number: A113283 NPI: 1306165402 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com</p>
<p>Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: SA,SU 7AM-10PM, M-F 5PM-10PM</p>	<p>SEPULVEDA, JOE, MD Provider Gender: Male License number: A113283 NPI: 1306165402 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 2204 NATIONAL AVE SAN DIEGO, CA 92113-3615 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com</p>	<p>Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM</p>
<p>SCOTT, KELLY, NPA Provider Gender: Female License number: 95015026 NPI: 1013420801 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: SAN DIEGO AMERICAN INDIAN HEALTH CENTER</p>	<p>Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese</p>	<p>SEPULVEDA, JOE, MD</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Gender: Male
License number: A113283
NPI: 1306165402
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

SEPULVEDA, JOE, MD

Provider Gender: Male
License number: A113283
NPI: 1306165402
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-W,F 8:30AM-5PM

SEPULVEDA, JOE, MD

Provider Gender: Male
License number: A113283
NPI: 1306165402
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian,

Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours:

SEPULVEDA, JOE, MD

Provider Gender: Male
License number: A113283
NPI: 1306165402
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>SEPULVEDA, JOE, MD <i>Provider Gender:</i> Male <i>License number:</i> A113283 <i>NPI:</i> 1306165402 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1250 6TH AVE STE 100 SAN DIEGO, CA 92101-4368 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>4725 MARKET ST SAN DIEGO, CA 92102-4715 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>
<p>SEPULVEDA, JOE, MD <i>Provider Gender:</i> Male <i>License number:</i> A113283 <i>NPI:</i> 1306165402 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO</p>	<p>SEPULVEDA, JOE, MD <i>Provider Gender:</i> Male <i>License number:</i> A113283 <i>NPI:</i> 1306165402 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120 <i>Phone:</i> (619) 515-2424 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2424 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i></p>	<p>SEPULVEDA, JOE, MD <i>Provider Gender:</i> Male <i>License number:</i> A113283 <i>NPI:</i> 1306165402 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8535 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

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

SEPULVEDA, JOE, MD

Provider Gender: Male

License number: A113283

NPI: 1306165402

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

140 ELM ST

SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520

Fax:

After Hours Phone: (619)

515-2520

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

SEPULVEDA, JOE, MD

Provider Gender: Male

License number: A113283

NPI: 1306165402

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

Yes

Please contact provider for
Accessibility information

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

SHEARED, JORDAN S , CSW

Provider Gender: Female

License number: ASW74739

NPI: 1699121749

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

Yes

Please contact provider for
Accessibility information

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

SIMPSON, JENNIFER, CSW

Provider Gender: Female

License number: 82678

NPI: 1740765866

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

2204 NATIONAL AVE

SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

Yes

Please contact provider for
Accessibility information

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

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

SIMPSON, JENNIFER, CSW

Provider Gender: Female
License number: 82678
NPI: 1740765866
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

SIMPSON, JENNIFER, CSW

Provider Gender: Female
License number: 82678
NPI: 1740765866
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-W,F 8:30AM-5PM

SIMPSON, JENNIFER, CSW

Provider Gender: Female
License number: 82678
NPI: 1740765866
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM

SIMPSON, JENNIFER, CSW

Provider Gender: Female
License number: 82678
NPI: 1740765866
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

SIMPSON, JENNIFER, CSW

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 82678
 NPI: 1740765866
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

SIMPSON, JENNIFER, CSW

Provider Gender: Female
 License number: 82678
 NPI: 1740765866
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

SIMPSON, JENNIFER, CSW

Provider Gender: Female
 License number: 82678
 NPI: 1740765866
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

SIMPSON, JENNIFER, CSW

Provider Gender: Female
 License number: 82678
 NPI: 1740765866
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

SIMPSON, JENNIFER, CSW

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 82678
 NPI: 1740765866
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

SIMPSON, JENNIFER, CSW
 Provider Gender: Female
 License number: 82678
 NPI: 1740765866
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520
 Fax:
 After Hours Phone: (619)
 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

SIMPSON, JENNIFER, CSW
 Provider Gender: Female
 License number: 82678
 NPI: 1740765866
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2424
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

SINNO, BASSAM, MD
 Provider Gender: Male
 License number: C37831
 NPI: 1982767893
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Arabic
 Cultural Competency:
 SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
 Phone: (619) 662-4100

Fax:
 After Hours Phone: (619)
 662-4100
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Arabic, Farsi, Hindi, Kannada,
 Maithili, Sinhala, Sinhalese,
 Spanish, Urdu
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours:

SIPIN, ELVIRA P, CSW
 Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: LCS15308
NPI: 1477759892
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

SIPIN, ELVIRA P , CSW

Provider Gender: Female
License number: LCS15308
NPI: 1477759892
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
515-2424
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

SIPIN, ELVIRA P , CSW

Provider Gender: Female
License number: LCS15308
NPI: 1477759892
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
2204 NATIONAL AVE
SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

SIPIN, ELVIRA P , CSW

Provider Gender: Female
License number: LCS15308
NPI: 1477759892
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

SIPIN, ELVIRA P , CSW

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: LCS15308
NPI: 1477759892
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM

SIPIN, ELVIRA P , CSW

Provider Gender: Female
License number: LCS15308
NPI: 1477759892
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

SIPIN, ELVIRA P , CSW

Provider Gender: Female
License number: LCS15308
NPI: 1477759892
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

SIPIN, ELVIRA P , CSW

Provider Gender: Female
License number: LCS15308
NPI: 1477759892
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

SIPIN, ELVIRA P , CSW

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: LCS15308
NPI: 1477759892
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

SIPIN, ELVIRA P , CSW
Provider Gender: Female
License number: LCS15308
NPI: 1477759892
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
 515-2520
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

SMITH, STEPHANIE, PSY
Provider Gender: Female
License number: 30779
NPI: 1346700325
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
 662-4100
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Arabic, Farsi, Hindi, Kannada,
 Maithili, Sinhala, Sinhalese,
 Spanish, Urdu
TDD: No

Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours:

SOLTANI, MARYAM, MD
Provider Gender: Female
License number: A139075
NPI: 1518372267
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 INTEGRATED HEALTH
 PARTNERS - ST VINCENT DE
 PAUL VILLAGE INC
 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101-7638
Phone: (619) 233-8500
Fax: (619) 687-1067
After Hours Phone: (619)
 233-8500
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-W,F 8:30AM-5PM, TH
 8:30AM-9PM

SOLTANI, MARYAM, MD
Provider Gender: Female
License number: A139075
NPI: 1518372267

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NESTOR COMMUNITY HEALTH CENTER
 1016 OUTER RD
 SAN DIEGO, CA 92154-1351
Phone: (619) 429-3733
Fax: (619) 628-5550
After Hours Phone: (619) 429-3733
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
 No
 Please contact provider for Accessibility information
Hours: M,TU,TH 8AM-8PM, W,F 8AM-5PM, SA 8AM-12PM

SPAHR, CHRISTIE, MFT
Provider Gender: Female
License number: 51792
NPI: 1295085736
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

SPAHR, CHRISTIE, MFT
Provider Gender: Female
License number: 51792
NPI: 1295085736
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
 Yes

Please contact provider for Accessibility information
Hours: M-W,F 8:30AM-5PM

SPAHR, CHRISTIE, MFT
Provider Gender: Female
License number: 51792
NPI: 1295085736
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for Accessibility information
Hours:

SPINELLI, LAUREN, CSW
Provider Gender: Female
License number: 82862
NPI: 1437630787
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 SAN DIEGO FAMILY CARE

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Farsi, Spanish,
Vietnamese, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM, SA
8AM-2PM

SPINELLI, LAUREN, CSW
Provider Gender: Female
License number: 82862
NPI: 1437630787
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
SAN DIEGO FAMILY CARE
6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342
Phone: (858) 810-8787
Fax: (858) 279-0377
After Hours Phone: (858) 810-8787
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Spanish, Vietnamese,
Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM, SA
8AM-1PM

STEVENSON, MARC E , CSW
Provider Gender: Male
License number: 70064
NPI: 1356795637
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
INTEGRATED HEALTH
PARTNERS - ST VINCENT DE
PAUL VILLAGE INC
1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638
Phone: (619) 233-8500
Fax: (619) 687-1067
After Hours Phone: (619) 233-8500
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM, TH
8:30AM-9PM

STEWART, ANDREA M , MFT
Provider Gender: U

License number: 45174
NPI: 1508993122
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
140 ELM ST
SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619) 515-2520
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

STEWART, ANDREA M , MFT
Provider Gender: U
License number: 45174
NPI: 1508993122
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

STEWART, ANDREA M , MFT

Provider Gender: U

License number: 45174

NPI: 1508993122

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

STEWART, ANDREA M , MFT

Provider Gender: U

License number: 45174

NPI: 1508993122

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4874 POLK AVE

SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

STEWART, ANDREA M , MFT

Provider Gender: U

License number: 45174

NPI: 1508993122

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

STEWART, ANDREA M , MFT

Provider Gender: U

License number: 45174

NPI: 1508993122

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

2204 NATIONAL AVE

SAN DIEGO, CA 92113-3615

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>License number: 45174 NPI: 1508993122 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120 Phone: (619) 515-2424 Fax: (619) 702-8536 After Hours Phone: (619) 515-2424 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>
<p>STEWART, ANDREA M , MFT Provider Gender: U License number: 45174 NPI: 1508993122 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese</p>	<p>STEWART, ANDREA M , MFT Provider Gender: U License number: 45174 NPI: 1508993122 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>STEWART, ANDREA M , MFT Provider Gender: U License number: 45174 NPI: 1508993122 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST SAN DIEGO, CA 92102-4715</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

STEWART, ANDREA M , MFT
 Provider Gender: U
 License number: 45174
 NPI: 1508993122
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

STRAUSS, KATHLEEN L , PSY
 Provider Gender: Female
 License number: 15765
 NPI: 1154362184
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 STRAUSS, KATHLEEN
 3914 3RD AVE
 SAN DIEGO, CA 92103-3003
 Phone: (619) 291-4808
 Fax: (619) 291-4426
 After Hours Phone: (619)
 291-4808
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 TDD: No
 Min/Max Age: 19/64
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 9AM-5PM

SUHIR, ERIN, NPA
 Provider Gender: Female
 License number: 95008203
 NPI: 1528426947
 Provider English Spoken: Yes
 Provider Language(s) Spoken:

Cultural Competency:
 LA MAESTRA COMMUNITY
 HEALTH CENTERS
 4157 FAIRMOUNT AVE
 SAN DIEGO, CA 92105-1609
 Phone: (619) 285-7097
 Fax: (619) 564-8140
 After Hours Phone: (619)
 285-7097
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish
 TDD: No
 Min/Max Age: 19/64
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours:

SUHIR, ERIN, NPA
 Provider Gender: Female
 License number: 95008203
 NPI: 1528426947
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 LA MAESTRA COMMUNITY
 HEALTH CENTERS
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105-1608
 Phone: (619) 280-4213
 Fax: (619) 281-6738
 After Hours Phone: (619)
 280-4213
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Spanish
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5:30PM

SULLIVAN, JOHN P , MD

Provider Gender: Male
 License number: A106680
 NPI: 1851597389
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: COMMUNITY RESEARCH FOUNDATION INC
 1465 30TH ST STE K
 SAN DIEGO, CA 92154-3497
 Phone: (619) 275-0822
 Fax: (619) 696-9573
 After Hours Phone: (619) 275-0822
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Russian
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M,W 9AM-8PM, TU,TH,F 9AM-5PM

SULLIVAN, JOHN P , MD

Provider Gender: Male

License number: A106680
 NPI: 1851597389
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: COMMUNITY RESEARCH FOUNDATION INC
 1963 4TH AVE
 SAN DIEGO, CA 92101-2394
 Phone: (619) 233-3432
 Fax: (619) 233-7022
 After Hours Phone: (619) 233-3432
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Russian
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-6PM

SULLIVAN, JOHN P , MD

Provider Gender: Male
 License number: A106680
 NPI: 1851597389
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: COMMUNITY RESEARCH FOUNDATION INC
 1568 6TH AVE
 SAN DIEGO, CA 92101-3216
 Phone: (619) 696-0822
 Fax: (619) 696-9573
 After Hours Phone: (619) 696-0822

Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Russian
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-6PM

SULLIVAN, JOHN P , MD

Provider Gender: Male
 License number: A106680
 NPI: 1851597389
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: COMMUNITY RESEARCH FOUNDATION INC
 892 27TH ST
 SAN DIEGO, CA 92154-1444
 Phone: (619) 275-0822
 Fax: (619) 696-9573
 After Hours Phone: (619) 275-0822
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Russian
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Hours:

SULLIVAN, JOHN P , MD

Provider Gender: Male

License number: A106680

NPI: 1851597389

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

COMMUNITY RESEARCH

FOUNDATION INC

743 10TH AVE

SAN DIEGO, CA 92101-6673

Phone: (619) 239-4663

Fax: (619) 239-3045

After Hours Phone: (619)

239-4663

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Russian

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours:

SWEENEY, ZSA ZSA, NPA

Provider Gender: Female

License number: 95007730

NPI: 1003159344

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

LA MAESTRA COMMUNITY

HEALTH CENTERS

4157 FAIRMOUNT AVE

SAN DIEGO, CA 92105-1609

Phone: (619) 285-7097

Fax: (619) 564-8140

After Hours Phone: (619)

285-7097

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

TDD: No

Min/Max Age: 19/64

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours:

SWEENEY, ZSA ZSA, NPA

Provider Gender: Female

License number: 95007730

NPI: 1003159344

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

LA MAESTRA COMMUNITY

HEALTH CENTERS

4060 FAIRMOUNT AVE

SAN DIEGO, CA 92105-1608

Phone: (619) 280-4213

Fax: (619) 281-6738

After Hours Phone: (619)

280-4213

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

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

TAHBAZ, ASH, MFT

Provider Gender: U

License number: 87601

NPI: 1205294543

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

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

TAHBAZ, ASH, MFT

Provider Gender: U

License number: 87601

NPI: 1205294543

Provider English Spoken: Yes

Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-W,F 8:30AM-5PM

TAHBAZ, ASH, MFT

Provider Gender: U
License number: 87601
NPI: 1205294543
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

TAHBAZ, ASH, MFT

Provider Gender: U
License number: 87601
NPI: 1205294543
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for

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

Accessibility information
Hours: M-F 8AM-5PM

TAHBAZ, ASH, MFT

Provider Gender: U
License number: 87601
NPI: 1205294543
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

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

TAHBAZ, ASH, MFT

Provider Gender: U
License number: 87601
NPI: 1205294543
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

TAHBAZ, ASH, MFT

Provider Gender: U
License number: 87601
NPI: 1205294543
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,

Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

TAHBAZ, ASH, MFT

Provider Gender: U
License number: 87601
NPI: 1205294543
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
515-2424
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

TAHBAZ, ASH, MFT

Provider Gender: U
License number: 87601
NPI: 1205294543
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
140 ELM ST
SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
515-2520
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

TAHBAZ, ASH, MFT

Provider Gender: U
License number: 87601
NPI: 1205294543
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

TAHBAZ, ASH, MFT

Provider Gender: U
 License number: 87601
 NPI: 1205294543
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

TAYLOR, TASHA K , MD

Provider Gender: Female
 License number: A82187
 NPI: 1528144433
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
 Phone: (619) 662-4100
 Fax:

After Hours Phone: (619)
 662-4100
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Arabic, Farsi, Hindi, Kannada,
 Maithili, Sinhala, Sinhalese,
 Spanish, Urdu
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours:

THICKSTUN, MARY SUSAN, CSW

Provider Gender: Female

License number: 21573
 NPI: 1437354875
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520

Fax:
 After Hours Phone: (619)
 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

THICKSTUN, MARY SUSAN, CSW

Provider Gender: Female
 License number: 21573
 NPI: 1437354875
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

THICKSTUN, MARY SUSAN, CSW

Provider Gender: Female
License number: 21573
NPI: 1437354875
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,

Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM

THICKSTUN, MARY SUSAN, CSW

Provider Gender: Female
License number: 21573
NPI: 1437354875
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:

Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

THICKSTUN, MARY SUSAN, CSW

Provider Gender: Female
License number: 21573
NPI: 1437354875
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

THICKSTUN, MARY SUSAN, CSW

Provider Gender: Female
License number: 21573
NPI: 1437354875
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

4874 POLK AVE
SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

**THICKSTUN, MARY SUSAN,
CSW**
Provider Gender: Female
License number: 21573
NPI: 1437354875
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4065 3RD AVE
SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

**THICKSTUN, MARY SUSAN,
CSW**
Provider Gender: Female
License number: 21573
NPI: 1437354875
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM
**THICKSTUN, MARY SUSAN,
CSW**
Provider Gender: Female
License number: 21573
NPI: 1437354875
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
515-2424
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

**THICKSTUN, MARY SUSAN,
CSW**
Provider Gender: Female
License number: 21573
NPI: 1437354875
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

**THICKSTUN, MARY SUSAN,
 CSW**
 Provider Gender: Female
 License number: 21573
 NPI: 1437354875
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
 Phone: (619) 515-2338
 Fax: (619) 702-8535
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes

Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

**THICKSTUN, MARY SUSAN,
 CSW**
 Provider Gender: Female
 License number: 21573
 NPI: 1437354875
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for

Accessibility information
 Hours: M-F 8:30AM-5PM
THIESSEN, BRUCE L , PSY
 Provider Gender: U
 License number: 14259
 NPI: 1841541984
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

THIESSEN, BRUCE L , PSY
 Provider Gender: U
 License number: 14259
 NPI: 1841541984
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

THIESSEN, BRUCE L , PSY
Provider Gender: U
License number: 14259
NPI: 1841541984
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,

Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

THIESSEN, BRUCE L , PSY
Provider Gender: U
License number: 14259
NPI: 1841541984
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

THIESSEN, BRUCE L , PSY
Provider Gender: U
License number: 14259
NPI: 1841541984
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM

THIESSEN, BRUCE L , PSY
Provider Gender: U
License number: 14259
NPI: 1841541984
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105-2026

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619) 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

THIESSEN, BRUCE L , PSY

Provider Gender: U

License number: 14259

NPI: 1841541984

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

140 ELM ST

SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520

Fax:

After Hours Phone: (619)

515-2520

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

THIESSEN, BRUCE L , PSY

Provider Gender: U

License number: 14259

NPI: 1841541984

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

2204 NATIONAL AVE

SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

THIESSEN, BRUCE L , PSY

Provider Gender: U

License number: 14259

NPI: 1841541984

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax: (619) 702-8536

After Hours Phone: (619)

515-2424

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

THIESSEN, BRUCE L , PSY

Provider Gender: U

License number: 14259

NPI: 1841541984

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

THIESSEN, BRUCE L , PSY
 Provider Gender: U
 License number: 14259
 NPI: 1841541984
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

THOMAS, DALIA M , CSW
 Provider Gender: Female
 License number: LCSW82132
 NPI: 1104151372
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
 Phone: (619) 662-4100
 Fax:

After Hours Phone: (619)
 662-4100
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Arabic, Farsi, Hindi, Kannada,
 Maithili, Sinhala, Sinhalese,
 Spanish, Urdu
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours:

TIMONY, THERESA, NPA
 Provider Gender: Female
 License number: NP95007497

NPI: 1689818015
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 SAN DIEGO FAMILY CARE
 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111-6307
 Phone: (858) 810-8700
 Fax: (858) 633-4680
 After Hours Phone: (858)
 810-8700
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Mandarin, Farsi, Spanish,
 Vietnamese, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM, SA
 8AM-2PM

TONG, GARRICK, MD
 Provider Gender: Male
 License number: A102192
 NPI: 1831361278
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish, Yue Chinese
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p><i>Restrictions</i> <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p> <p>TONG, GARRICK, MD <i>Provider Gender:</i> Male <i>License number:</i> A102192 <i>NPI:</i> 1831361278 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Yue Chinese <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120 <i>Phone:</i> (619) 515-2424 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2424 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p><i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Yue Chinese <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1250 6TH AVE STE 100 SAN DIEGO, CA 92101-4368 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>
<p>TONG, GARRICK, MD <i>Provider Gender:</i> Male <i>License number:</i> A102192 <i>NPI:</i> 1831361278 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Yue Chinese <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender</p>	<p><i>Restrictions</i> <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p> <p>TONG, GARRICK, MD <i>Provider Gender:</i> Male <i>License number:</i> A102192 <i>NPI:</i> 1831361278</p>	<p>TONG, GARRICK, MD <i>Provider Gender:</i> Male <i>License number:</i> A102192 <i>NPI:</i> 1831361278 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Yue Chinese <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

TONG, GARRICK, MD

Provider Gender: Male
 License number: A102192
 NPI: 1831361278
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish, Yue Chinese
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:
 After Hours Phone: (619)
 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,

Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

TONG, GARRICK, MD

Provider Gender: Male
 License number: A102192
 NPI: 1831361278
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish, Yue Chinese
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
 Phone: (619) 515-2338
 Fax: (619) 702-8535
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

TONG, GARRICK, MD

Provider Gender: Male
 License number: A102192
 NPI: 1831361278
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish, Yue Chinese
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

TONG, GARRICK, MD

Provider Gender: Male
 License number: A102192
 NPI: 1831361278
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish, Yue Chinese
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-W,F 8:30AM-5PM

TONG, GARRICK, MD
Provider Gender: Male
License number: A102192
NPI: 1831361278
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish, Yue Chinese
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

TONG, GARRICK, MD
Provider Gender: Male
License number: A102192
NPI: 1831361278
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish, Yue Chinese
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information

Hours:
TONG, GARRICK, MD
Provider Gender: Male
License number: A102192
NPI: 1831361278
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish, Yue Chinese
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM
TORRES, LAURA, CSW
Provider Gender: Female
License number: 65059
NPI: 1568612943
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

TORRES, LAURA, CSW
 Provider Gender: Female
 License number: 65059
 NPI: 1568612943
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,

Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

TORRES, LAURA, CSW
 Provider Gender: Female
 License number: 65059
 NPI: 1568612943
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-W,F 8:30AM-5PM

TORRES, LAURA, CSW
 Provider Gender: Female
 License number: 65059
 NPI: 1568612943
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

TORRES, LAURA, CSW
 Provider Gender: Female
 License number: 65059
 NPI: 1568612943
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

TORRES, LAURA, CSW

Provider Gender: Female
License number: 65059
NPI: 1568612943
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

TORRES, LAURA, CSW

Provider Gender: Female
License number: 65059
NPI: 1568612943
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
140 ELM ST
SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
515-2520
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
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American Sign Language (ASL):
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American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

TORRES, LAURA, CSW

Provider Gender: Female

License number: 65059
NPI: 1568612943
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4065 3RD AVE
SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
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Hours:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

TORRES, LAURA, CSW

Provider Gender: Female
License number: 65059
NPI: 1568612943
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
2204 NATIONAL AVE
SAN DIEGO, CA 92113-3615

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

TORRES, LAURA, CSW

Provider Gender: Female
 License number: 65059
 NPI: 1568612943
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

TORRES, LAURA, CSW

Provider Gender: Female
 License number: 65059
 NPI: 1568612943
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2424
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

TORRES, LAURA, CSW

Provider Gender: Female

License number: 65059
 NPI: 1568612943
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

TRIANA, JENNIFER, CSW

Provider Gender: Female
 License number: 88589
 NPI: 1073844460
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

TRIANA, JENNIFER, CSW
Provider Gender: Female
License number: 88589
NPI: 1073844460
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
140 ELM ST
SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
515-2520
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,

Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

TRIANA, JENNIFER, CSW
Provider Gender: Female
License number: 88589
NPI: 1073844460
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
2204 NATIONAL AVE
SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

TRIANA, JENNIFER, CSW
Provider Gender: Female
License number: 88589
NPI: 1073844460
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
515-2424
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

TRIANA, JENNIFER, CSW
Provider Gender: Female
License number: 88589
NPI: 1073844460
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

TRIANA, JENNIFER, CSW
Provider Gender: Female
License number: 88589
NPI: 1073844460
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM

TRIANA, JENNIFER, CSW
Provider Gender: Female
License number: 88589
NPI: 1073844460
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM
TRIANA, JENNIFER, CSW
Provider Gender: Female
License number: 88589
NPI: 1073844460
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

TRIANA, JENNIFER, CSW
Provider Gender: Female
License number: 88589
NPI: 1073844460
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

TRIANA, JENNIFER, CSW
Provider Gender: Female
License number: 88589
NPI: 1073844460
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

TRIANA, JENNIFER, CSW
Provider Gender: Female
License number: 88589
NPI: 1073844460
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for

Accessibility information
Hours: M-F 8:30AM-5PM
TRIANA, JENNIFER, CSW
Provider Gender: Female
License number: 88589
NPI: 1073844460
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4065 3RD AVE
SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:
TROYER, EMILY, PSY
Provider Gender: Female
License number: A149101
NPI: 1326484437
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
515-2424
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

TROYER, EMILY, PSY
Provider Gender: Female
License number: A149101
NPI: 1326484437
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

TROYER, EMILY, PSY
Provider Gender: Female
License number: A149101
NPI: 1326484437
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
2204 NATIONAL AVE
SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

TROYER, EMILY, PSY
Provider Gender: Female
License number: A149101
NPI: 1326484437
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4065 3RD AVE
SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

TROYER, EMILY, PSY
Provider Gender: Female
License number: A149101
NPI: 1326484437
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

TROYER, EMILY, PSY

Provider Gender: Female
License number: A149101
NPI: 1326484437
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM

TROYER, EMILY, PSY

Provider Gender: Female
License number: A149101
NPI: 1326484437
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

TROYER, EMILY, PSY

Provider Gender: Female

License number: A149101
NPI: 1326484437
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
140 ELM ST
SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520

Fax:
After Hours Phone: (619)
515-2520
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

TROYER, EMILY, PSY

Provider Gender: Female
License number: A149101
NPI: 1326484437
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

TROYER, EMILY, PSY

Provider Gender: Female
 License number: A149101
 NPI: 1326484437
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

TROYER, EMILY, PSY

Provider Gender: Female
 License number: A149101
 NPI: 1326484437
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

TROYER, EMILY, PSY

Provider Gender: Female

License number: A149101
 NPI: 1326484437
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
 Phone: (619) 515-2338
 Fax: (619) 702-8535
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

TUCKER, MEGAN, PSY

Provider Gender: Female
 License number: 27333
 NPI: 1861877516
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 LA MAESTRA COMMUNITY
 HEALTH CENTERS
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105-1608

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 280-4213
 Fax: (619) 281-6738
 After Hours Phone: (619) 280-4213
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5:30PM

VALENZUELA, GLORIA M , CSW

Provider Gender: Female
 License number: 22926
 NPI: 1679653380
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619) 662-4100
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu
 TDD: No
 Min/Max Age:

Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours:

VIERLING, SABRINA C , PSY

Provider Gender: Female
 License number: 26117
 NPI: 1215288238
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 SAN DIEGO FAMILY CARE
 4305 UNIVERSITY AVE
 SAN DIEGO, CA 92105-1645
 Phone: (858) 280-2058
 Fax: (619) 563-0015
 After Hours Phone: (858) 280-2058
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM, SA 8AM-2PM

WAUGH, BRANDON, CSW

Provider Gender: Male
 License number: 83457
 NPI: 1619459187
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338

Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

WAUGH, BRANDON, CSW

Provider Gender: Male
 License number: 83457
 NPI: 1619459187
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

WAUGH, BRANDON, CSW

Provider Gender: Male
License number: 83457
NPI: 1619459187
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
140 ELM ST
SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
515-2520
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM
WAUGH, BRANDON, CSW
Provider Gender: Male
License number: 83457
NPI: 1619459187
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
515-2424
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

WAUGH, BRANDON, CSW

Provider Gender: Male
License number: 83457
NPI: 1619459187
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

WAUGH, BRANDON, CSW

Provider Gender: Male
License number: 83457
NPI: 1619459187
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,

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J. Directorio de proveedores de salud mental

Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

WAUGH, BRANDON, CSW

Provider Gender: Male
 License number: 83457
 NPI: 1619459187
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours:

WAUGH, BRANDON, CSW

Provider Gender: Male
 License number: 83457
 NPI: 1619459187
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
 Phone: (619) 515-2338
 Fax: (619) 702-8535
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-TH 8:30AM-5PM

WAUGH, BRANDON, CSW

Provider Gender: Male
 License number: 83457
 NPI: 1619459187
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

WAUGH, BRANDON, CSW

Provider Gender: Male
 License number: 83457
 NPI: 1619459187
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>License number: 77233 NPI: 1982848594 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM</p>	<p>Phone: (619) 515-2338 Fax: (619) 702-8535 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-TH 8:30AM-5PM</p>
<p>WAUGH, BRANDON, CSW Provider Gender: Male License number: 83457 NPI: 1619459187 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM</p>	<p>WEAVER, JHOSMARA A , CSW Provider Gender: Female License number: 77233 NPI: 1982848594 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713</p>	<p>WEAVER, JHOSMARA A , CSW Provider Gender: Female License number: 77233 NPI: 1982848594 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1250 6TH AVE STE 100 SAN DIEGO, CA 92101-4368 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese</p>
<p>WEAVER, JHOSMARA A , CSW Provider Gender: Female</p>		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>License number: 77233 NPI: 1982848594 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120 Phone: (619) 515-2424 Fax: (619) 702-8536 After Hours Phone: (619) 515-2424 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-W,F 8:30AM-5PM</p>	<p>Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-W,F 8:30AM-5PM</p>
<p>WEAVER, JHOSMARA A , CSW Provider Gender: Female License number: 77233 NPI: 1982848594 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>WEAVER, JHOSMARA A , CSW Provider Gender: Female License number: 77233 NPI: 1982848594 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104</p>	<p>WEAVER, JHOSMARA A , CSW Provider Gender: Female License number: 77233 NPI: 1982848594 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese</p>
<p>WEAVER, JHOSMARA A , CSW Provider Gender: Female</p>		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>License number: 77233 NPI: 1982848594 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST SAN DIEGO, CA 92102-4715 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>
<p>WEAVER, JHOSMARA A , CSW Provider Gender: Female License number: 77233 NPI: 1982848594 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 140 ELM ST SAN DIEGO, CA 92101-2602 Phone: (619) 515-2520 Fax: 515-2520 After Hours Phone: (619) 515-2520 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM</p>	<p>WEAVER, JHOSMARA A , CSW Provider Gender: Female License number: 77233 NPI: 1982848594 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143</p>	<p>WEAVER, JHOSMARA A , CSW Provider Gender: Female License number: 77233 NPI: 1982848594 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 2204 NATIONAL AVE SAN DIEGO, CA 92113-3615 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese</p>
<p>WEAVER, JHOSMARA A , CSW Provider Gender: Female</p>		

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J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

WEBSTER, KRISTIN K , CSW

Provider Gender: Female
 License number: LCSW16118
 NPI: 1902336837
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

WEBSTER, KRISTIN K , CSW

Provider Gender: Female

License number: LCSW16118
 NPI: 1902336837
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:

After Hours Phone: (619) 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

WEBSTER, KRISTIN K , CSW

Provider Gender: Female
 License number: LCSW16118
 NPI: 1902336837
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713

Phone: (619) 515-2338
 Fax: (619) 702-8535
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-TH 8:30AM-5PM

WEBSTER, KRISTIN K , CSW

Provider Gender: Female
 License number: LCSW16118
 NPI: 1902336837
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

WEBSTER, KRISTIN K , CSW

Provider Gender: Female
 License number: LCSW16118
 NPI: 1902336837
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

WEBSTER, KRISTIN K , CSW

Provider Gender: Female

License number: LCSW16118
 NPI: 1902336837
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338

Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

WEBSTER, KRISTIN K , CSW

Provider Gender: Female
 License number: LCSW16118
 NPI: 1902336837
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184

Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours:

WEBSTER, KRISTIN K , CSW

Provider Gender: Female
 License number: LCSW16118
 NPI: 1902336837
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-W,F 8:30AM-5PM

WEBSTER, KRISTIN K , CSW

Provider Gender: Female
 License number: LCSW16118
 NPI: 1902336837
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

WEBSTER, KRISTIN K , CSW

Provider Gender: Female

License number: LCSW16118
 NPI: 1902336837
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2424
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

WEBSTER, KRISTIN K , CSW

Provider Gender: Female
 License number: LCSW16118
 NPI: 1902336837
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

WEBSTER, KRISTIN K , CSW

Provider Gender: Female
 License number: LCSW16118
 NPI: 1902336837
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No	License number: 99311	Website:
Min/Max Age:	NPI: 1619375649	www.beaconhealthoptions.com
Gender Restriction: No Gender Restrictions	Provider English Spoken: Yes	Accepting New Patients: Yes
American Sign Language (ASL): Yes	Provider Language(s) Spoken: Cultural Competency:	Site English Spoken: Yes
Please contact provider for Accessibility information	SAN DIEGO FAMILY CARE	Site Language(s) Spoken: Mandarin, Spanish, Vietnamese, Yue Chinese
Hours: M-F 8:30AM-5PM	7011 LINDA VISTA RD	TDD: No
	SAN DIEGO, CA 92111-6307	Min/Max Age:
	Phone: (858) 810-8700	Gender Restriction: No Gender Restrictions
	Fax: (858) 633-4680	American Sign Language (ASL): No
	After Hours Phone: (858) 810-8700	Please contact provider for Accessibility information
WEEDEN, MIRIAN, MFT	Website:	Hours: M-F 8AM-5PM, SA 8AM-1PM
Provider Gender: Female	www.beaconhealthoptions.com	
License number: LMFT94339	Accepting New Patients: Yes	
NPI: 1821364712	Site English Spoken: Yes	
Provider English Spoken: Yes	Site Language(s) Spoken: Mandarin, Farsi, Spanish, Vietnamese, Yue Chinese	
Provider Language(s) Spoken: Arabic	TDD: No	
Cultural Competency:	Min/Max Age:	
SAN YSIDRO HEALTH CENTER	Gender Restriction: No Gender Restrictions	
950 S EUCLID AVE	American Sign Language (ASL): No	
SAN DIEGO, CA 92114-6201	Please contact provider for Accessibility information	
Phone: (619) 662-4100	Hours: M-F 8AM-5PM, SA 8AM-2PM	
Fax:		
After Hours Phone: (619) 662-4100		
Website:		
www.beaconhealthoptions.com		
Accepting New Patients: Yes		
Site English Spoken: Yes		
Site Language(s) Spoken: Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu		
TDD: No		
Min/Max Age:		
Gender Restriction: No Gender Restrictions		
American Sign Language (ASL): No		
Please contact provider for Accessibility information		
Hours:		
WEST, ALIXANDRA, CSW		
Provider Gender: Female		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM, TH
8:30AM-9PM

WIGLE, CHARLES E , MFT

Provider Gender: Male
License number: MFC29757
NPI: 1407911878
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM

WIJAYARATNE, IMANIE S , PSY

Provider Gender: Female
License number: 25044
NPI: 1932358355
Provider English Spoken: Yes
Provider Language(s) Spoken:

Sinhala, Sinhalese
Cultural Competency:
SAN YSIDRO HEALTH CENTER
950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
662-4100
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Arabic, Farsi, Hindi, Kannada,
Maithili, Sinhala, Sinhalese,
Spanish, Urdu
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours:

WILHOIT, LAURA, PSY

Provider Gender: Female
License number: 26656
NPI: 1649497637
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
COMMUNITY RESEARCH
FOUNDATION INC
928 BROADWAY
SAN DIEGO, CA 92101-5514
Phone: (619) 977-3716
Fax: (619) 481-3075
After Hours Phone: (619)
977-3716
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-4:30PM

WILHOIT, LAURA, PSY

Provider Gender: Female
License number: 26656
NPI: 1649497637
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
SAN DIEGO FAMILY CARE
6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342
Phone: (858) 810-8787
Fax: (858) 279-0377
After Hours Phone: (858)
810-8787
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Spanish, Vietnamese,
Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM, SA

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

8AM-1PM

WILHOIT, LAURA, PSY

Provider Gender: Female
License number: 26656
NPI: 1649497637
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish

Cultural Competency:

SAN DIEGO FAMILY CARE

7011 LINDA VISTA RD

SAN DIEGO, CA 92111-6307

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858)

810-8700

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Mandarin, Farsi, Spanish,

Vietnamese, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

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

8AM-2PM

WILHOIT, LAURA, PSY

Provider Gender: Female

License number: 26656

NPI: 1649497637

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

COMMUNITY RESEARCH

FOUNDATION INC

995 GATEWAY CENTER WAY
SAN DIEGO, CA 92102-4500

Phone: (619) 398-2156

Fax: (619) 398-2165

After Hours Phone: (619)

398-2156

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

WILLIAMS, SHANTRICE M , NPA

Provider Gender: Female

License number: 19664

NPI: 1578865549

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

SAN YSIDRO HEALTH CENTER

950 S EUCLID AVE

SAN DIEGO, CA 92114-6201

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Arabic, Farsi, Hindi, Kannada,

Maithili, Sinhala, Sinhalese,

Spanish, Urdu

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours:

WILSON, NICOLE M , CSW

Provider Gender: Female

License number: 94855

NPI: 1033576400

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

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

WINGFIELD, CAROLYN, PSY

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Gender: Female
License number: 28716
NPI: 1013316520
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
ACCESS PSYCHOLOGY
SERVICES, PC
750 B ST STE 2870
SAN DIEGO, CA 92101-8132
Phone: (619) 722-0014
Fax: (619) 327-4174
After Hours Phone: (619)
722-0014
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 9AM-5PM

WINTER, JEFFERY C , PSY
Provider Gender: Male
License number: 6795
NPI: 1396904850
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MOUNTAIN HEALTH AND
COMMUNITY SERVICES INC
4690 EL CAJON BLVD
SAN DIEGO, CA 92115-4403
Phone: (619) 445-6200
Fax: (619) 824-9076
After Hours Phone: (619)
445-6200

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Armenian
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

WINTER, JEFFERY C , PSY
Provider Gender: Male
License number: 6795
NPI: 1396904850
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MOUNTAIN HEALTH AND
COMMUNITY SERVICES INC
316 25TH ST
SAN DIEGO, CA 92102-3016
Phone: (619) 445-6200
Fax: (619) 238-5551
After Hours Phone: (619)
445-6200

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Armenian
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

WITT, ANNETTE, CSW
Provider Gender: Female
License number: 15770
NPI: 1912263468
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

WITT, ANNETTE, CSW
Provider Gender: Female
License number: 15770
NPI: 1912263468
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4065 3RD AVE

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

SAN DIEGO, CA 92103-2184
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours:

WITT, ANNETTE, CSW

Provider Gender: Female
 License number: 15770
 NPI: 1912263468
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,

Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

WITT, ANNETTE, CSW

Provider Gender: Female
 License number: 15770
 NPI: 1912263468
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

WITT, ANNETTE, CSW

Provider Gender: Female
 License number: 15770
 NPI: 1912263468
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

WITT, ANNETTE, CSW

Provider Gender: Female
 License number: 15770
 NPI: 1912263468
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

WITT, ANNETTE, CSW
Provider Gender: Female
License number: 15770
NPI: 1912263468
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
515-2424
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

WITT, ANNETTE, CSW
Provider Gender: Female
License number: 15770
NPI: 1912263468
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

WITT, ANNETTE, CSW
Provider Gender: Female

License number: 15770
NPI: 1912263468
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

WITT, ANNETTE, CSW
Provider Gender: Female
License number: 15770
NPI: 1912263468
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

WITT, ANNETTE, CSW

Provider Gender: Female
 License number: 15770
 NPI: 1912263468
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:
 After Hours Phone: (619)
 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

WITT, ANNETTE, CSW

Provider Gender: Female
 License number: 15770
 NPI: 1912263468
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-W,F 8:30AM-5PM

WOLFE, TINA L , PSY

Provider Gender: Female

License number: PSY28694
 NPI: 1346398922
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 MOUNTAIN HEALTH AND
 COMMUNITY SERVICES INC
 4690 EL CAJON BLVD
 SAN DIEGO, CA 92115-4403
 Phone: (619) 445-6200
 Fax: (619) 824-9076
 After Hours Phone: (619)
 445-6200
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Armenian
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

WOLFE, TINA L , PSY

Provider Gender: Female
 License number: PSY28694
 NPI: 1346398922
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 MOUNTAIN HEALTH AND
 COMMUNITY SERVICES INC
 316 25TH ST
 SAN DIEGO, CA 92102-3016
 Phone: (619) 445-6200
 Fax: (619) 238-5551
 After Hours Phone: (619)
 445-6200

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Armenian <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p> <p>WOLF, CELIA C , NPA <i>Provider Gender:</i> Female <i>License number:</i> 95001899 <i>NPI:</i> 1245635564 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes</p>	<p>Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p> <p>WOLF, CELIA C , NPA <i>Provider Gender:</i> Female <i>License number:</i> 95001899 <i>NPI:</i> 1245635564 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p> <p>WOLF, CELIA C , NPA <i>Provider Gender:</i> Female <i>License number:</i> 95001899 <i>NPI:</i> 1245635564 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i></p>	<p>SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-W,F 8:30AM-5PM</p> <p>WOLF, CELIA C , NPA <i>Provider Gender:</i> Female <i>License number:</i> 95001899 <i>NPI:</i> 1245635564 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i></p>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

WOLF, CELIA C , NPA

Provider Gender: Female

License number: 95001899

NPI: 1245635564

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for

Accessibility information

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

WOLF, CELIA C , NPA

Provider Gender: Female

License number: 95001899

NPI: 1245635564

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1250 6TH AVE STE 100

SAN DIEGO, CA 92101-4368

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for

Accessibility information

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

WOLF, CELIA C , NPA

Provider Gender: Female

License number: 95001899

NPI: 1245635564

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4065 3RD AVE

SAN DIEGO, CA 92103-2184

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)
515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours:

WOLF, CELIA C , NPA

Provider Gender: Female

License number: 95001899

NPI: 1245635564

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

2204 NATIONAL AVE

SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p> <p>WOLF, CELIA C , NPA Provider Gender: Female License number: 95001899 NPI: 1245635564 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713 Phone: (619) 515-2338 Fax: (619) 702-8535 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM</p> <p>WOLF, CELIA C , NPA Provider Gender: Female</p>	<p>License number: 95001899 NPI: 1245635564 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p> <p>WOLF, CELIA C , NPA Provider Gender: Female License number: 95001899 NPI: 1245635564 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 140 ELM ST SAN DIEGO, CA 92101-2602</p>	<p>Phone: (619) 515-2520 Fax: After Hours Phone: (619) 515-2520 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM</p> <p>WOLF, CELIA C , NPA Provider Gender: Female License number: 95001899 NPI: 1245635564 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120 Phone: (619) 515-2424 Fax: (619) 702-8536 After Hours Phone: (619) 515-2424 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese</p>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

WOOD, KEEGAN, NPA

Provider Gender: Male
 License number: NP95006887
 NPI: 1417471459
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

WOOD, KEEGAN, NPA

Provider Gender: Male

License number: NP95006887
 NPI: 1417471459
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

WOOD, KEEGAN, NPA

Provider Gender: Male
 License number: NP95006887
 NPI: 1417471459
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

WOOD, KEEGAN, NPA

Provider Gender: Male
 License number: NP95006887
 NPI: 1417471459
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

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J. Directorio de proveedores de salud mental

<p>TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM</p> <p>WOOD, KEEGAN, NPA Provider Gender: Male License number: NP95006887 NPI: 1417471459 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 140 ELM ST SAN DIEGO, CA 92101-2602 Phone: (619) 515-2520 Fax: After Hours Phone: (619) 515-2520 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM</p> <p>WOOD, KEEGAN, NPA Provider Gender: Male</p>	<p>License number: NP95006887 NPI: 1417471459 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p> <p>WOOD, KEEGAN, NPA Provider Gender: Male License number: NP95006887 NPI: 1417471459 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120</p>	<p>Phone: (619) 515-2424 Fax: (619) 702-8536 After Hours Phone: (619) 515-2424 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p> <p>WOOD, KEEGAN, NPA Provider Gender: Male License number: NP95006887 NPI: 1417471459 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 2204 NATIONAL AVE SAN DIEGO, CA 92113-3615 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese</p>
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J. Directorio de proveedores de salud mental

<p>TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p> <p>WOOD, KEEGAN, NPA Provider Gender: Male License number: NP95006887 NPI: 1417471459 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713 Phone: (619) 515-2338 Fax: (619) 702-8535 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-TH 8:30AM-5PM</p> <p>WOOD, KEEGAN, NPA Provider Gender: Male</p>	<p>License number: NP95006887 NPI: 1417471459 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-W,F 8:30AM-5PM</p> <p>WOOLLEY, LAUREN, PSY Provider Gender: Female License number: 23740 NPI: 1952785784 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: SAN DIEGO FAMILY CARE 7011 LINDA VISTA RD SAN DIEGO, CA 92111-6307 Phone: (858) 810-8700 Fax: (858) 633-4680 After Hours Phone: (858) 810-8700</p>	<p>Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Mandarin, Farsi, Spanish, Vietnamese, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M-F 8AM-5PM, SA 8AM-2PM</p> <p>WOOLLEY, LAUREN, PSY Provider Gender: Female License number: 23740 NPI: 1952785784 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: SAN DIEGO FAMILY CARE 6973 LINDA VISTA RD SAN DIEGO, CA 92111-6342 Phone: (858) 810-8787 Fax: (858) 279-0377 After Hours Phone: (858) 810-8787 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Mandarin, Spanish, Vietnamese, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No</p>
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J. Directorio de proveedores de salud mental

Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM, SA
8AM-1PM

WOOLLEY, LAUREN, PSY

Provider Gender: Female
License number: 23740
NPI: 1952785784
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
SAN DIEGO FAMILY CARE
4290 POLK AVE
SAN DIEGO, CA 92105-1524
Phone: (619) 563-0250
Fax: (619) 563-0015
After Hours Phone: (619)
563-0250
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Farsi,
Vietnamese

TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM, SA
8AM-2PM

YALYSHAVA, VOLHA, CSW

Provider Gender: Female
License number: LCSW69810
NPI: 1821392002
Provider English Spoken: Yes
Provider Language(s) Spoken:
Russian
Cultural Competency:
FAMILY HEALTH CENTERS OF

SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
515-2424
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

YALYSHAVA, VOLHA, CSW

Provider Gender: Female
License number: LCSW69810
NPI: 1821392002
Provider English Spoken: Yes
Provider Language(s) Spoken:
Russian
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

YALYSHAVA, VOLHA, CSW

Provider Gender: Female
License number: LCSW69810
NPI: 1821392002
Provider English Spoken: Yes
Provider Language(s) Spoken:
Russian
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
140 ELM ST
SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
515-2520
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accessibility information

Hours: M-F 8AM-5PM

YALYSHAVA, VOLHA, CSW

Provider Gender: Female

License number: LCSW69810

NPI: 1821392002

Provider English Spoken: Yes

Provider Language(s) Spoken:

Russian

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

2204 NATIONAL AVE

SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

YALYSHAVA, VOLHA, CSW

Provider Gender: Female

License number: LCSW69810

NPI: 1821392002

Provider English Spoken: Yes

Provider Language(s) Spoken:

Russian

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

YALYSHAVA, VOLHA, CSW

Provider Gender: Female

License number: LCSW69810

NPI: 1821392002

Provider English Spoken: Yes

Provider Language(s) Spoken:

Russian

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1250 6TH AVE STE 100

SAN DIEGO, CA 92101-4368

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

YALYSHAVA, VOLHA, CSW

Provider Gender: Female

License number: LCSW69810

NPI: 1821392002

Provider English Spoken: Yes

Provider Language(s) Spoken:

Russian

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4065 3RD AVE

SAN DIEGO, CA 92103-2184

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Please contact provider for
Accessibility information
Hours:

YALYSHAVA, VOLHA, CSW

Provider Gender: Female
License number: LCSW69810
NPI: 1821392002
Provider English Spoken: Yes
Provider Language(s) Spoken:
Russian
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

YALYSHAVA, VOLHA, CSW

Provider Gender: Female
License number: LCSW69810
NPI: 1821392002
Provider English Spoken: Yes
Provider Language(s) Spoken:
Russian

Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

YALYSHAVA, VOLHA, CSW

Provider Gender: Female
License number: LCSW69810
NPI: 1821392002
Provider English Spoken: Yes
Provider Language(s) Spoken:
Russian
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

YALYSHAVA, VOLHA, CSW

Provider Gender: Female
License number: LCSW69810
NPI: 1821392002
Provider English Spoken: Yes
Provider Language(s) Spoken:
Russian
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>Yes Please contact provider for Accessibility information Hours: M-W,F 8:30AM-5PM</p>	<p>Spanish Cultural Competency: SAN YSIDRO HEALTH CENTER 950 S EUCLID AVE SAN DIEGO, CA 92114-6201 Phone: (619) 662-4100 Fax: After Hours Phone: (619) 662-4100 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours:</p>	<p>Site English Spoken: Yes Site Language(s) Spoken: Russian TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M-F 8:30AM-6PM</p>
<p>YALYSHAVA, VOLHA, CSW Provider Gender: Female License number: LCSW69810 NPI: 1821392002 Provider English Spoken: Yes Provider Language(s) Spoken: Russian Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>ZARANKOW, BEATA, MD Provider Gender: Female License number: C53656 NPI: 1902995384 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: COMMUNITY RESEARCH FOUNDATION INC 1568 6TH AVE SAN DIEGO, CA 92101-3216 Phone: (619) 696-0822 Fax: (619) 696-9573 After Hours Phone: (619) 696-0822 Website: www.beaconhealthoptions.com Accepting New Patients: Yes</p>	<p>ZARANKOW, BEATA, MD Provider Gender: Female License number: C53656 NPI: 1902995384 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: COMMUNITY RESEARCH FOUNDATION INC 1465 30TH ST STE K SAN DIEGO, CA 92154-3497 Phone: (619) 275-0822 Fax: (619) 696-9573 After Hours Phone: (619) 275-0822 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Russian TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M,W 9AM-8PM, TU,TH,F 9AM-5PM</p>
<p>ZAPATEL, JUAN PABLO, CSW Provider Gender: Male License number: 78174 NPI: 1043446644 Provider English Spoken: Yes Provider Language(s) Spoken:</p>	<p>ZARANKOW, BEATA, MD Provider Gender: Female License number: C53656 NPI: 1902995384 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: COMMUNITY RESEARCH FOUNDATION INC 1568 6TH AVE SAN DIEGO, CA 92101-3216 Phone: (619) 696-0822 Fax: (619) 696-9573 After Hours Phone: (619) 696-0822 Website: www.beaconhealthoptions.com Accepting New Patients: Yes</p>	<p>ZARANKOW, BEATA, MD Provider Gender: Female License number: C53656 NPI: 1902995384 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: COMMUNITY RESEARCH FOUNDATION INC 1465 30TH ST STE K SAN DIEGO, CA 92154-3497 Phone: (619) 275-0822 Fax: (619) 696-9573 After Hours Phone: (619) 275-0822 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Russian TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M,W 9AM-8PM, TU,TH,F 9AM-5PM</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

ZARANKOW, BEATA, MD

Provider Gender: Female
License number: C53656
NPI: 1902995384
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
COMMUNITY RESEARCH
FOUNDATION INC
892 27TH ST
SAN DIEGO, CA 92154-1444
Phone: (619) 275-0822
Fax: (619) 696-9573
After Hours Phone: (619)
275-0822
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours:

ZARANKOW, BEATA, MD

Provider Gender: Female
License number: C53656
NPI: 1902995384
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
COMMUNITY RESEARCH
FOUNDATION INC
743 10TH AVE
SAN DIEGO, CA 92101-6673

Phone: (619) 239-4663
Fax: (619) 239-3045
After Hours Phone: (619)
239-4663
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours:

ZARANKOW, BEATA, MD

Provider Gender: Female
License number: C53656
NPI: 1902995384
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
COMMUNITY RESEARCH
FOUNDATION INC
1963 4TH AVE
SAN DIEGO, CA 92101-2394
Phone: (619) 233-3432
Fax: (619) 233-7022
After Hours Phone: (619)
233-3432
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

ZAYAS, GILBERTO, MD

Provider Gender: Male
License number: A136760
NPI: 1508174970
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

ZAYAS, GILBERTO, MD

Provider Gender: Male
License number: A136760
NPI: 1508174970
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Language(s) Spoken: Spanish
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

ZAYAS, GILBERTO, MD
Provider Gender: Male
License number: A136760
NPI: 1508174970
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300

Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours:

ZAYAS, GILBERTO, MD
Provider Gender: Male
License number: A136760
NPI: 1508174970
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender

Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

ZAYAS, GILBERTO, MD
Provider Gender: Male
License number: A136760
NPI: 1508174970
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

ZAYAS, GILBERTO, MD
Provider Gender: Male
License number: A136760
NPI: 1508174970

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8535 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM</p> <p>ZAYAS, GILBERTO, MD <i>Provider Gender:</i> Male <i>License number:</i> A136760 <i>NPI:</i> 1508174970 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 140 ELM ST SAN DIEGO, CA 92101-2602</p>	<p><i>Phone:</i> (619) 515-2520 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2520 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p> <p>ZAYAS, GILBERTO, MD <i>Provider Gender:</i> Male <i>License number:</i> A136760 <i>NPI:</i> 1508174970 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian,</p>	<p>Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-W,F 8:30AM-5PM</p> <p>ZAYAS, GILBERTO, MD <i>Provider Gender:</i> Male <i>License number:</i> A136760 <i>NPI:</i> 1508174970 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120 <i>Phone:</i> (619) 515-2424 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2424 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>ZAYAS, GILBERTO, MD <i>Provider Gender:</i> Male <i>License number:</i> A136760 <i>NPI:</i> 1508174970 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST SAN DIEGO, CA 92102-4715 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>4094 4TH AVE SAN DIEGO, CA 92103-2143 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>
<p>ZAYAS, GILBERTO, MD <i>Provider Gender:</i> Male <i>License number:</i> A136760 <i>NPI:</i> 1508174970 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i></p>	<p>ZAYAS, GILBERTO, MD <i>Provider Gender:</i> Male <i>License number:</i> A136760 <i>NPI:</i> 1508174970 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i></p>	<p>ZUREK, BEDEANIA R , CSW <i>Provider Gender:</i> Female <i>License number:</i> LCSW74215 <i>NPI:</i> 1942375811 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> NESTOR COMMUNITY HEALTH CENTER 1016 OUTER RD SAN DIEGO, CA 92154-1351 <i>Phone:</i> (619) 429-3733 <i>Fax:</i> (619) 628-5550 <i>After Hours Phone:</i> (619) 429-3733 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish <i>TDD:</i> No <i>Min/Max Age:</i> 13/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M,TU,TH 8AM-8PM, W,F 8AM-5PM, SA 8AM-12PM</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

SAN MARCOS

ADERONKE, AKANDE, NPA

Provider Gender: Female
License number: 21597
NPI: 1083980247
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
COGNITIVE HEALTH SOLUTIONS INC
960 W SAN MARCOS BLVD
SAN MARCOS, CA 92078-1100
Phone: (858) 227-0887
Fax: (858) 430-9611
After Hours Phone: (858) 227-0887
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 9AM-6PM

ALTAMIRANO, LEON, PSY

Provider Gender: Male
License number: 23734
NPI: 1619271517
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
NORTH COUNTY HEALTH SERVICES
150 VALPRED A RD

SAN MARCOS, CA 92069-2973

Phone: (760) 736-6700
Fax: (760) 736-6753
After Hours Phone: (760) 736-6700
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-6PM, SA 8AM-5PM

BUCHMANN, RYAN D , MFT

Provider Gender: Male
License number: 50774
NPI: 1063639102
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
BUCHMANN, RYAN (1063639102)
330 RANCHEROS DR STE 222
SAN MARCOS, CA 92069-2940
Phone: (760) 566-8760
Fax: (760) 820-2461
After Hours Phone: (760) 566-8760
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender

Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: TU-F 10AM-6PM, SA 1PM-5PM

CAI, SHEILA X , MD

Provider Gender: Female
License number: C149845
NPI: 1780625012
Provider English Spoken: Yes
Provider Language(s) Spoken: Chinese
Cultural Competency:
NORTH COUNTY HEALTH SERVICES
150 VALPRED A RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6700
Fax: (760) 736-6753
After Hours Phone: (760) 736-6700
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-6PM, SA 8AM-5PM

CHALMERS, VIRGINIA, CSW

Provider Gender: Female
License number: 28053
NPI: 1265613715

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 150 VALPRED A RD
 SAN MARCOS, CA 92069-2973
Phone: (760) 736-6700
Fax: (760) 736-6753
After Hours Phone: (760) 736-6700
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-6PM, SA 8AM-5PM

CHENG, JIM, NPA

Provider Gender: Male
License number: 22852
NPI: 1790122638
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 150 VALPRED A RD
 SAN MARCOS, CA 92069-2973
Phone: (760) 736-6700
Fax: (760) 736-6753
After Hours Phone: (760) 736-6700

Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-6PM, SA 8AM-5PM

COOK, SHERYL G , PSY

Provider Gender: Female
License number: 15449
NPI: 1750420816
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 COGNITIVE HEALTH SOLUTIONS INC
 960 W SAN MARCOS BLVD
 SAN MARCOS, CA 92078-1100
Phone: (858) 227-0887
Fax: (858) 430-9611
After Hours Phone: (858) 227-0887
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for

Accessibility information
Hours: M-F 9AM-6PM

CORNER, EMILY, MFT

Provider Gender: Female
License number: 102353
NPI: 1093225823
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 150 VALPRED A RD
 SAN MARCOS, CA 92069-2973
Phone: (760) 736-6700
Fax: (760) 736-6753
After Hours Phone: (760) 736-6700
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-6PM, SA 8AM-5PM

CORTIZO, ROSA, PSY

Provider Gender: Female
License number: 22278
NPI: 1952316648
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 NORTH COUNTY HEALTH SERVICES

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J. Directorio de proveedores de salud mental

150 VALPRED A RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6700
Fax: (760) 736-6753
After Hours Phone: (760)
736-6700
Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-F 8AM-6PM, SA
8AM-5PM

ESPOSITO, NICOLE E , MD

Provider Gender: Female

License number: A91107

NPI: 1497880579

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

COGNITIVE HEALTH

SOLUTIONS INC

960 W SAN MARCOS BLVD

SAN MARCOS, CA 92078-1100

Phone: (858) 227-0887

Fax: (858) 430-9611

After Hours Phone: (858)

227-0887

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Russian

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-F 9AM-6PM

FLYNN (NEWMAN), DANIELLE I , PSY

Provider Gender: U

License number: 26184

NPI: 1477785137

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NORTH COUNTY HEALTH

SERVICES

150 VALPRED A RD

SAN MARCOS, CA 92069-2973

Phone: (760) 736-6700

Fax: (760) 736-6753

After Hours Phone: (760)

736-6700

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-F 8AM-6PM, SA
8AM-5PM

FREEMAN, WANDA, NPA

Provider Gender: Female

License number: 95003903

NPI: 1659504264

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NORTH COUNTY HEALTH

SERVICES

150 VALPRED A RD

SAN MARCOS, CA 92069-2973

Phone: (760) 736-6700

Fax: (760) 736-6753

After Hours Phone: (760)

736-6700

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-F 8AM-6PM, SA
8AM-5PM

GEORGIEV, MARY JO C , PSY

Provider Gender: Female

License number: 17954

NPI: 1518996875

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

COGNITIVE HEALTH

SOLUTIONS INC

960 W SAN MARCOS BLVD

SAN MARCOS, CA 92078-1100

Phone: (858) 227-0887

Fax: (858) 430-9611

After Hours Phone: (858)

227-0887

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Russian <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 9AM-6PM</p>	<p><i>Hours:</i> M-F 8AM-6PM, SA 8AM-5PM</p> <p>HARDIN INGRAM, ANDREA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 28677 <i>NPI:</i> 1801947692 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: COGNITIVE HEALTH SOLUTIONS INC 960 W SAN MARCOS BLVD SAN MARCOS, CA 92078-1100 <i>Phone:</i> (858) 227-0887 <i>Fax:</i> (858) 430-9611 <i>After Hours Phone:</i> (858) 227-0887 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Russian <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 9AM-6PM</p>	<p>SAN MARCOS, CA 92069-2973 <i>Phone:</i> (760) 736-6700 <i>Fax:</i> (760) 736-6753 <i>After Hours Phone:</i> (760) 736-6700 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish, Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-6PM, SA 8AM-5PM</p>
<p>GEORGIEV, MARY JO C , PSY <i>Provider Gender:</i> Female <i>License number:</i> 17954 <i>NPI:</i> 1518996875 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: NORTH COUNTY HEALTH SERVICES 150 VALPRED RD SAN MARCOS, CA 92069-2973 <i>Phone:</i> (760) 736-6700 <i>Fax:</i> (760) 736-6753 <i>After Hours Phone:</i> (760) 736-6700 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish, Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information</p>	<p>JENSEN, BRIAN M , PSY <i>Provider Gender:</i> Male <i>License number:</i> 26041 <i>NPI:</i> 1518138049 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: NORTH COUNTY HEALTH SERVICES 150 VALPRED RD</p>	<p>KOGOUT, OXANA A , NPA <i>Provider Gender:</i> Female <i>License number:</i> 95004052 <i>NPI:</i> 1477910214 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Russian <i>Cultural Competency:</i> COGNITIVE HEALTH SOLUTIONS INC 960 W SAN MARCOS BLVD SAN MARCOS, CA 92078-1100 <i>Phone:</i> (858) 227-0887 <i>Fax:</i> (858) 430-9611 <i>After Hours Phone:</i> (858) 227-0887 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Russian <i>TDD:</i> No</p>

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J. Directorio de proveedores de salud mental

Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 9AM-6PM

KRAPES, MICHAEL B , PSY

Provider Gender: Male
License number: 25077
NPI: 1215233028
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NORTH COUNTY HEALTH SERVICES
150 VALPRED A RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6700
Fax: (760) 736-6753
After Hours Phone: (760) 736-6700
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-6PM, SA 8AM-5PM

MAUHILI, KENNA, PSY

Provider Gender: Female
License number: 23713
NPI: 1386949360

Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: COGNITIVE HEALTH SOLUTIONS INC
960 W SAN MARCOS BLVD
SAN MARCOS, CA 92078-1100
Phone: (858) 227-0887
Fax: (858) 430-9611
After Hours Phone: (858) 227-0887
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 9AM-6PM

MONTEZ, REBECCA, CSW

Provider Gender: Female
License number: 26869
NPI: 1396047809
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NORTH COUNTY HEALTH SERVICES
150 VALPRED A RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6700
Fax: (760) 736-6753
After Hours Phone: (760) 736-6700
Website: www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-6PM, SA 8AM-5PM

SIMMONS, LILIANA C , NPA

Provider Gender: Female
License number: 177800
NPI: 1396113254
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NORTH COUNTY HEALTH SERVICES
150 VALPRED A RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6700
Fax: (760) 736-6753
After Hours Phone: (760) 736-6700
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information

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J. Directorio de proveedores de salud mental

Hours: M-F 8AM-6PM, SA
8AM-5PM

SIMMONS, SUZANNE, NPA

Provider Gender: Female
License number: 95016129
NPI: 1245733450
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
150 VALPRED A RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6700
Fax: (760) 736-6753
After Hours Phone: (760)
736-6700
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-6PM, SA
8AM-5PM

SIMPSON, ERIC, PSY

Provider Gender: Male
License number: 28885
NPI: 1710110416
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
150 VALPRED A RD

SAN MARCOS, CA 92069-2973
Phone: (760) 736-6700
Fax: (760) 736-6753
After Hours Phone: (760)
736-6700
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-6PM, SA
8AM-5PM

SUNDER, RAJAGOPAL K , MD

Provider Gender: Male
License number: 94223
NPI: 1972572824
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi
Cultural Competency:
COGNITIVE HEALTH
SOLUTIONS INC
960 W SAN MARCOS BLVD
SAN MARCOS, CA 92078-1100
Phone: (858) 227-0887
Fax: (858) 430-9611
After Hours Phone: (858)
227-0887
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Russian
TDD: No

Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 9AM-6PM

TAYLOR, CORRDERO A , CSW

Provider Gender: Male
License number: 71284
NPI: 1346501533
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
150 VALPRED A RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6700
Fax: (760) 736-6753
After Hours Phone: (760)
736-6700
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-6PM, SA
8AM-5PM

TORRES, HECTOR M , PSY

Provider Gender: Male
License number: 13309
NPI: 1720265614

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 150 VALPRED A RD
 SAN MARCOS, CA 92069-2973
Phone: (760) 736-6700
Fax: (760) 736-6753
After Hours Phone: (760) 736-6700
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-6PM, SA 8AM-5PM

WALKER, SHAYNA T , MD
Provider Gender: Female
License number: A107393
NPI: 1760688295
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 150 VALPRED A RD
 SAN MARCOS, CA 92069-2973
Phone: (760) 736-6700
Fax: (760) 736-6753
After Hours Phone: (760) 736-6700

Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-6PM, SA 8AM-5PM

WELCH, MEGAN, MFT
Provider Gender: Female
License number: 113763
NPI: 1689117400
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 150 VALPRED A RD
 SAN MARCOS, CA 92069-2973
Phone: (760) 736-6700
Fax: (760) 736-6753
After Hours Phone: (760) 736-6700
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for

Accessibility information
Hours: M-F 8AM-6PM, SA 8AM-5PM

SANTEE

BARMAK, SHANT, PSY
Provider Gender: Male
License number: 24998
NPI: 1235408972
Provider English Spoken: Yes
Provider Language(s) Spoken: Armenian
Cultural Competency:
 MOUNTAIN HEALTH AND COMMUNITY SERVICES INC
 120 TOWN CENTER PKWY
 SANTEE, CA 92071-5801
Phone: (619) 445-6200
Fax: (619) 873-3476
After Hours Phone: (619) 445-6200
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Armenian
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CHAMBERS, NICOLE, PSY
Provider Gender: Female
License number: PSY30966
NPI: 1821297029
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

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J. Directorio de proveedores de salud mental

MOUNTAIN HEALTH AND
COMMUNITY SERVICES INC
120 TOWN CENTER PKWY
SANTEE, CA 92071-5801
Phone: (619) 445-6200
Fax: (619) 873-3476
After Hours Phone: (619)
445-6200
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Armenian
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

FRITZ, JENNIFER K , PSY
Provider Gender: Female
License number: PSY24350
NPI: 1013071497
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MOUNTAIN HEALTH AND
COMMUNITY SERVICES INC
120 TOWN CENTER PKWY
SANTEE, CA 92071-5801
Phone: (619) 445-6200
Fax: (619) 873-3476
After Hours Phone: (619)
445-6200
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Armenian

TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

MANESS, PAULA J , PSY
Provider Gender: Female
License number: 23787
NPI: 1437312097
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MOUNTAIN HEALTH AND
COMMUNITY SERVICES INC
120 TOWN CENTER PKWY
SANTEE, CA 92071-5801
Phone: (619) 445-6200
Fax: (619) 873-3476
After Hours Phone: (619)
445-6200
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Armenian
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

SWARTZ, SUSAN V , MFT
Provider Gender: Female
License number: 42894
NPI: 1265550362

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MOUNTAIN HEALTH AND
COMMUNITY SERVICES INC
120 TOWN CENTER PKWY
SANTEE, CA 92071-5801
Phone: (619) 445-6200
Fax: (619) 873-3476
After Hours Phone: (619)
445-6200
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Armenian
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

WINTER, JEFFERY C , PSY
Provider Gender: Male
License number: 6795
NPI: 1396904850
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MOUNTAIN HEALTH AND
COMMUNITY SERVICES INC
120 TOWN CENTER PKWY
SANTEE, CA 92071-5801
Phone: (619) 445-6200
Fax: (619) 873-3476
After Hours Phone: (619)
445-6200
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

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J. Directorio de proveedores de salud mental

Site English Spoken: Yes
Site Language(s) Spoken:
 Armenian
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

WOLFE, TINA L , PSY

Provider Gender: Female
License number: PSY28694
NPI: 1346398922
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 MOUNTAIN HEALTH AND
 COMMUNITY SERVICES INC
 120 TOWN CENTER PKWY
 SANTEE, CA 92071-5801
Phone: (619) 445-6200
Fax: (619) 873-3476
After Hours Phone: (619)
 445-6200
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Armenian
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

ABDULLAH, KERI, PSY
Provider Gender: Female
License number: 29990
NPI: 1699840587
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3845 SPRING DR
 SPRING VALLEY, CA
 91977-1030
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M,TU 8:30AM-5PM, W
 1PM-5PM

ABDULLAH, KERI, PSY
Provider Gender: Female
License number: 29990
NPI: 1699840587
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8788 JAMACHA RD

SPRING VALLEY, CA
 91977-4035
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

AGUIRRE, LEAH B , CSW

Provider Gender: Female
License number: 74440
NPI: 1306151998
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

SPRING VALLEY

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J. Directorio de proveedores de salud mental

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

AGUIRRE, LEAH B , CSW

Provider Gender: Female

License number: 74440

NPI: 1306151998

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

3845 SPRING DR
SPRING VALLEY, CA

91977-1030

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M,TU 8:30AM-5PM, W 1PM-5PM

AGUIRRE, WENDY, CSW

Provider Gender: Female

License number: 74219

NPI: 1205946282

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA

91977-4035

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

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

ALTERS, DENNIS, MD

Provider Gender: Male

License number: G36206

NPI: 1457371635

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

3845 SPRING DR
SPRING VALLEY, CA

91977-1030

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M,TU 8:30AM-5PM, W 1PM-5PM

ALTERS, DENNIS, MD

Provider Gender: Male

License number: G36206

NPI: 1457371635

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA

91977-4035

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p><i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M,TU 8:30AM-5PM, W 1PM-5PM</p>	<p><i>Provider Gender:</i> Female <i>License number:</i> A139241 <i>NPI:</i> 1114347291 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>
<p>ALVAREZ, DIANA P , CSW <i>Provider Gender:</i> Female <i>License number:</i> 81025 <i>NPI:</i> 1013200617 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i></p>	<p>ANDERSON, NICOLE M , CSW <i>Provider Gender:</i> Female <i>License number:</i> LCSW28443 <i>NPI:</i> 1679766380 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M,TU 8:30AM-5PM, W 1PM-5PM</p>	<p>ARIELLA, LYNDA R , PSY <i>Provider Gender:</i> Female <i>License number:</i> 19450 <i>NPI:</i> 1073518965 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030</p>
	<p>ARAGON, DARINKA M , MD</p>	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M,TU 8:30AM-5PM, W 1PM-5PM</p>	<p>Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>1PM-5PM</p>
<p>ARIELLA, LYNDA R , PSY Provider Gender: Female License number: 19450 NPI: 1073518965 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese</p>	<p>ASH, VIVIAN, CSW Provider Gender: Female License number: 14619 NPI: 1033623293 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M,TU 8:30AM-5PM, W</p>	<p>ASH, VIVIAN, CSW Provider Gender: Female License number: 14619 NPI: 1033623293 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>
<p>ASUNCION, JENNIFER, CSW Provider Gender: Male License number: LCSW75956 NPI: 1083056279 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO</p>	<p>ASUNCION, JENNIFER, CSW Provider Gender: Male License number: LCSW75956 NPI: 1083056279 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO</p>	<p>ASUNCION, JENNIFER, CSW Provider Gender: Male License number: LCSW75956 NPI: 1083056279 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO</p>

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J. Directorio de proveedores de salud mental

3845 SPRING DR
SPRING VALLEY, CA
91977-1030

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M,TU 8:30AM-5PM, W
1PM-5PM

ASUNCION, JENNIFER, CSW

Provider Gender: Male

License number: LCSW75956

NPI: 1083056279

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

ATALLAH, HANI M , MD

Provider Gender: Male

License number: 132530

NPI: 1104169655

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3845 SPRING DR
SPRING VALLEY, CA

91977-1030

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

Yes

Please contact provider for
Accessibility information
Hours: M,TU 8:30AM-5PM, W
1PM-5PM

AUCOIN, DOUGLAS, CSW

Provider Gender: Male

License number: 24707

NPI: 1699007609

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA

91977-4035

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

AUCOIN, DOUGLAS, CSW

Provider Gender: Male

License number: 24707

NPI: 1699007609

Provider English Spoken: Yes

Provider Language(s) Spoken:

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3845 SPRING DR
 SPRING VALLEY, CA
 91977-1030
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M,TU 8:30AM-5PM, W
 1PM-5PM

AVILA, RADOMIR M , CSW
Provider Gender: Male
License number: 75520
NPI: 1487937330
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Portuguese, Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035

Phone: (619) 515-2338
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 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

AVILA, RADOMIR M , CSW
Provider Gender: Male
License number: 75520
NPI: 1487937330
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Portuguese, Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
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Website:
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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,

Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M,TU 8:30AM-5PM, W
 1PM-5PM

BARCELOS ANTONIO, TIAGO, CSW
Provider Gender: Male
License number: 90529
NPI: 1194159871
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
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Accepting New Patients: Yes
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 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for

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J. Directorio de proveedores de salud mental

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

BARCELOS ANTONIO, TIAGO, CSW

Provider Gender: Male
License number: 90529
NPI: 1194159871
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
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American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M,TU 8:30AM-5PM, W
1PM-5PM

BARTHOLOMEW, SARAH C , CSW

Provider Gender: Female
License number: 86542
NPI: 1720339708
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
8788 JAMACHA RD
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American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

BARTHOLOMEW, SARAH C , CSW

Provider Gender: Female
License number: 86542
NPI: 1720339708
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
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American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M,TU 8:30AM-5PM, W
1PM-5PM

BENNETT, RACHEL Q , CSW

Provider Gender: Female
License number: 76466
NPI: 1558659797
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3845 SPRING DR
SPRING VALLEY, CA
91977-1030
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After Hours Phone: (619)
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Website:
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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,

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J. Directorio de proveedores de salud mental

Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M,TU 8:30AM-5PM, W
1PM-5PM

BENNETT, RACHEL Q , CSW

Provider Gender: Female

License number: 76466

NPI: 1558659797

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

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Website:

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

BERKSON, BARRIE, CSW

Provider Gender: Female

License number: 63313

NPI: 1922305465

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

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91977-4035

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515-2338

Website:

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

BERKSON, BARRIE, CSW

Provider Gender: Female

License number: 63313

NPI: 1922305465

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

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Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M,TU 8:30AM-5PM, W
1PM-5PM

BIRNBAUM, DEBORAH, MD

Provider Gender: Female

License number: 20A11387

NPI: 1639308265

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

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Website:

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Accepting New Patients: Yes

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J. Directorio de proveedores de salud mental

Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

BIRNBAUM, DEBORAH, MD

Provider Gender: Female
License number: 20A11387
NPI: 1639308265
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
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 SPRING VALLEY, CA
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 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes

Please contact provider for
 Accessibility information
Hours: M,TU 8:30AM-5PM, W
 1PM-5PM

BOND, ALAN, PSY

Provider Gender: Male
License number: PSY25805
NPI: 1881927184
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

BOND, ALAN, PSY

Provider Gender: Male
License number: PSY25805
NPI: 1881927184
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3845 SPRING DR
 SPRING VALLEY, CA
 91977-1030
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Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M,TU 8:30AM-5PM, W
 1PM-5PM

BORREGO, DIANA E , NPA

Provider Gender: Female
License number: 95005019
NPI: 1184012866
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
Phone: (619) 515-2338
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 515-2338

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J. Directorio de proveedores de salud mental

<p><i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p><i>Restrictions</i> <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M,TU 8:30AM-5PM, W 1PM-5PM</p> <p>BUBY, MYRA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 23172 <i>NPI:</i> 1093747511 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M,TU 8:30AM-5PM, W 1PM-5PM</p>	<p><i>License number:</i> 23172 <i>NPI:</i> 1093747511 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M,TU 8:30AM-5PM, W 1PM-5PM</p>
<p>BORREGO, DIANA E , NPA <i>Provider Gender:</i> Female <i>License number:</i> 95005019 <i>NPI:</i> 1184012866 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender</p>	<p>BUBY, MYRA, CSW <i>Provider Gender:</i> Female</p>	<p>BURGOS, EDNA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 85597 <i>NPI:</i> 1134591167 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD</p>

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J. Directorio de proveedores de salud mental

SPRING VALLEY, CA
91977-4035
Phone: (619) 515-2338
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Website:
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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

**BUTERBAUGH, KRISTY L ,
CSW**
Provider Gender: Female
License number: 65477
NPI: 1346615838
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
8788 JAMACHA RD
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Website:
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Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

CABREJOS, CLAUDIO, MD
Provider Gender: Male
License number: A71653
NPI: 1033133483
Provider English Spoken: Yes
Provider Language(s) Spoken:
Portuguese, Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
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American Sign Language, Farsi,
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Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

CABREJOS, CLAUDIO, MD
Provider Gender: Male
License number: A71653
NPI: 1033133483
Provider English Spoken: Yes
Provider Language(s) Spoken:
Portuguese, Spanish
Cultural Competency:
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American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M,TU 8:30AM-5PM, W
1PM-5PM

CARDENAS, ALONSO, MD
Provider Gender: Male
License number: A137940
NPI: 1811212145
Provider English Spoken: Yes

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J. Directorio de proveedores de salud mental

Provider Language(s) Spoken: *Cultural Competency:*
 FAMILY HEALTH CENTERS OF SAN DIEGO
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 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

CARILLO, KRYSTAL I , CSW
Provider Gender: Female
License number: 80068
NPI: 1871906735
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3845 SPRING DR
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 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M,TU 8:30AM-5PM, W 1PM-5PM

CARINO DIOKNO, RHODA, PSY
Provider Gender: Female
License number: 28073
NPI: 1629109483
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3845 SPRING DR
 SPRING VALLEY, CA
 91977-1030
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No

Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M,TU 8:30AM-5PM, W 1PM-5PM

CARINO DIOKNO, RHODA, PSY
Provider Gender: Female
License number: 28073
NPI: 1629109483
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

CASTELLANOS, TERESITA D , CSW <i>Provider Gender:</i> Female <i>License number:</i> 82782 <i>NPI:</i> 1598165441 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM	3845 SPRING DR SPRING VALLEY, CA 91977-1030 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M,TU 8:30AM-5PM, W 1PM-5PM	<i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M,TU 8:30AM-5PM, W 1PM-5PM
CHEN, ANGELA, MFT <i>Provider Gender:</i> Female <i>License number:</i> LMFT40923 <i>NPI:</i> 1811027956 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO	CHRISTENSEN, MELISSA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 69616 <i>NPI:</i> 1922313394 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com	CHRISTENSEN, MELISSA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 69616 <i>NPI:</i> 1922313394 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM	<i>NPI:</i> 1780031831 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM	<i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M,TU 8:30AM-5PM, W 1PM-5PM
COMBS, LAURI, CSW <i>Provider Gender:</i> Female <i>License number:</i> LCSW75330 <i>NPI:</i> 1538398979 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M,TU 8:30AM-5PM, W 1PM-5PM	CROCKFORD, DANE, PSY <i>Provider Gender:</i> Male <i>License number:</i> 28313 <i>NPI:</i> 1780031831 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030	DALONSO, SANDRA L , CSW <i>Provider Gender:</i> Female <i>License number:</i> 82240 <i>NPI:</i> 1841797644 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi,
CROCKFORD, DANE, PSY <i>Provider Gender:</i> Male <i>License number:</i> 28313		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	1PM-5PM DAN, WENDY L , CSW Provider Gender: Female License number: 26015 NPI: 1700224037 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M,TU 8:30AM-5PM, W 1PM-5PM
DALONSO, SANDRA L , CSW Provider Gender: Female License number: 82240 NPI: 1841797644 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M,TU 8:30AM-5PM, W	DAN, WENDY L , CSW Provider Gender: Female License number: 26015 NPI: 1700224037 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency:	DIAZ, LIZETH, CSW Provider Gender: Female License number: 97277 NPI: 1124457023 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p><i>Restrictions</i> <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M,TU 8:30AM-5PM, W 1PM-5PM</p>	<p><i>License number:</i> G57276 <i>NPI:</i> 1548318348 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>
<p>DIAZ, LIZETH, CSW <i>Provider Gender:</i> Female <i>License number:</i> 97277 <i>NPI:</i> 1124457023 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M,TU 8:30AM-5PM, W 1PM-5PM</p>	<p>DOBOS, DAVID, MD <i>Provider Gender:</i> Male <i>License number:</i> G57276 <i>NPI:</i> 1548318348 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M,TU 8:30AM-5PM, W 1PM-5PM</p>	<p>DRISCOLL, MICHAEL S , CSW <i>Provider Gender:</i> Male <i>License number:</i> 93951 <i>NPI:</i> 1659761880 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035</p>
<p>DOBOS, DAVID, MD <i>Provider Gender:</i> Male</p>	<p>DOBOS, DAVID, MD <i>Provider Gender:</i> Male</p>	

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J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 Yes

Please contact provider for
 Accessibility information

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

DUNFORD, KATELYN C , MFT

Provider Gender: Female

License number: 126626

NPI: 1437517497

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
 SAN DIEGO

8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
 Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 Yes

Please contact provider for
 Accessibility information

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

DUNFORD, KATELYN C , MFT

Provider Gender: Female

License number: 126626

NPI: 1437517497

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
 SAN DIEGO

3845 SPRING DR
 SPRING VALLEY, CA
 91977-1030

Phone: (619) 515-2338

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 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 Yes

Please contact provider for
 Accessibility information

Hours: M, TU 8:30AM-5PM, W
 1PM-5PM

DWYER, GEORGE, CSW

Provider Gender: Male

License number: 70988

NPI: 1437606126

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
 SAN DIEGO

8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)
 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 Yes

Please contact provider for
 Accessibility information

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

DWYER, GEORGE, CSW

Provider Gender: Male

License number: 70988

NPI: 1437606126

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
 SAN DIEGO

3845 SPRING DR

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

SPRING VALLEY, CA
91977-1030
Phone: (619) 515-2338
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515-2338
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Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M,TU 8:30AM-5PM, W
1PM-5PM

ERBE, EDWARD J , MD

Provider Gender: Male
License number: G76886
NPI: 1952318289
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
8788 JAMACHA RD
SPRING VALLEY, CA
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Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

FAJARDO, JACQUELINE M , CSW

Provider Gender: Female
License number: 87322
NPI: 1215342118
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035
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Fax: (619) 702-8536
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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):

Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

FAJARDO, JACQUELINE M , CSW

Provider Gender: Female
License number: 87322
NPI: 1215342118
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3845 SPRING DR
SPRING VALLEY, CA
91977-1030
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American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M,TU 8:30AM-5PM, W
1PM-5PM

FEDEROFF, MONICA, MD

Provider Gender: Female
License number: A164677

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J. Directorio de proveedores de salud mental

<p>NPI: 1912404492 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M,TU 8:30AM-5PM, W 1PM-5PM</p>	<p><i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>
<p>FEDEROFF, MONICA, MD <i>Provider Gender:</i> Female <i>License number:</i> A164677 NPI: 1912404492 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035</p>	<p>FLORES, MARY LUPE, CSW <i>Provider Gender:</i> Female <i>License number:</i> 19815 NPI: 1134147457 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M,TU 8:30AM-5PM, W 1PM-5PM</p>	<p>FLORES, MARY LUPE, CSW <i>Provider Gender:</i> Female <i>License number:</i> 19815 NPI: 1134147457 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M,TU 8:30AM-5PM, W 1PM-5PM</p>

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J. Directorio de proveedores de salud mental

<p>FRANCO, RODRIGO, CSW <i>Provider Gender:</i> Male <i>License number:</i> 71548 <i>NPI:</i> 1952736043 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M, TU 8:30AM-5PM, W 1PM-5PM</p>	<p>8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p> <p>FUKUI, TOMONORI, MD <i>Provider Gender:</i> Male <i>License number:</i> 75713 <i>NPI:</i> 1366519670 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Japanese, Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes</p>	<p><i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p> <p>FUKUI, TOMONORI, MD <i>Provider Gender:</i> Male <i>License number:</i> 75713 <i>NPI:</i> 1366519670 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Japanese, Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i></p>
<p>FRANCO, RODRIGO, CSW <i>Provider Gender:</i> Male <i>License number:</i> 71548 <i>NPI:</i> 1952736043 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO</p>	<p>8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes</p>	<p><i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i></p>

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J. Directorio de proveedores de salud mental

<p>Yes Please contact provider for Accessibility information Hours: M,TU 8:30AM-5PM, W 1PM-5PM</p>	<p><i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO</p>	<p><i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i></p>
<p>GALAPON, DIXIE L , PSY <i>Provider Gender:</i> Female <i>License number:</i> 16711 <i>NPI:</i> 1174646301 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information Hours: M,TU 8:30AM-5PM, W 1PM-5PM</p>	<p>8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information Hours: M,TU 8:30AM-5PM, W 1PM-5PM</p>
<p>GALAPON, DIXIE L , PSY <i>Provider Gender:</i> Female <i>License number:</i> 16711 <i>NPI:</i> 1174646301</p>	<p>GAUD, KRISTINA G , MD <i>Provider Gender:</i> Female <i>License number:</i> 170667 <i>NPI:</i> 1508151598 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030</p>	<p>GAUD, KRISTINA G , MD <i>Provider Gender:</i> Female <i>License number:</i> 170667 <i>NPI:</i> 1508151598 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi,</p>

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J. Directorio de proveedores de salud mental

Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	1PM-5PM	3845 SPRING DR SPRING VALLEY, CA 91977-1030 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M, TU 8:30AM-5PM, W 1PM-5PM
GLASSMAN, JAGA NATH, MD Provider Gender: Male License number: G55004 NPI: 1558409771 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	GLASSMAN, JAGA NATH, MD Provider Gender: Male License number: G55004 NPI: 1558409771 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	GLEASON, SHEILA, PSY Provider Gender: Female License number: 13685 NPI: 1366641813 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes

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J. Directorio de proveedores de salud mental

<p><i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>Yes Please contact provider for Accessibility information <i>Hours:</i> M, TU 8:30AM-5PM, W 1PM-5PM</p>	<p><i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M, TU 8:30AM-5PM, W 1PM-5PM</p>
<p>GONZALES, JULIANA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 83254 <i>NPI:</i> 1821487406 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>GONZALES, JULIANA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 83254 <i>NPI:</i> 1821487406 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>GONZALEZ, ANDREA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 97593 <i>NPI:</i> 1326346198 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035</p>

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J. Directorio de proveedores de salud mental

<p>Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>GUTIERREZ, APRIL P , CSW Provider Gender: Female License number: 86166 NPI: 1356749949 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>
<p>GOTTUNG, CHRISTINA, CSW Provider Gender: Female License number: 87716 NPI: 1134597123 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese</p>	<p>GUTIERREZ, APRIL P , CSW Provider Gender: Female License number: 86166 NPI: 1356749949 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M, TU 8:30AM-5PM, W 1PM-5PM</p>	<p>GUZMAN, KENIA, MFT Provider Gender: Female License number: 77167 NPI: 1427326776 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO</p>

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J. Directorio de proveedores de salud mental

<p>3845 SPRING DR SPRING VALLEY, CA 91977-1030 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M,TU 8:30AM-5PM, W 1PM-5PM</p>	<p><i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M,TU 8:30AM-5PM, W 1PM-5PM</p>	<p>Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>
<p>HARRIMAN, CORAL, PSY <i>Provider Gender:</i> Female <i>License number:</i> 26098 <i>NPI:</i> 1417373069 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes</p>	<p>HARRIMAN, CORAL, PSY <i>Provider Gender:</i> Female <i>License number:</i> 26098 <i>NPI:</i> 1417373069 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i></p>	<p>HAYDEN WADE, HELEN, PSY <i>Provider Gender:</i> Female <i>License number:</i> PSY19313 <i>NPI:</i> 1366951105 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M,TU 8:30AM-5PM, W 1PM-5PM</p> <p>HAYDEN WADE, HELEN, PSY <i>Provider Gender:</i> Female <i>License number:</i> PSY19313 <i>NPI:</i> 1366951105 <i>Provider English Spoken:</i> Yes</p>

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J. Directorio de proveedores de salud mental

Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8788 JAMACHA RD
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 91977-4035
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

HEDMAN, TERI LEE, CSW

Provider Gender: U
License number: 74947
NPI: 1154811636
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
Phone: (619) 515-2338
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Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

HORN BROOK, JESSICA, CSW

Provider Gender: Female
License number: 26598
NPI: 1134401805
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8788 JAMACHA RD
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Site English Spoken: Yes
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 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender

Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

HUBER, REBECCA, MD

Provider Gender: Female
License number: A133711
NPI: 1174960686
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3845 SPRING DR
 SPRING VALLEY, CA
 91977-1030
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 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M, TU 8:30AM-5PM, W
 1PM-5PM

HUBER, REBECCA, MD

Provider Gender: Female
License number: A133711

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J. Directorio de proveedores de salud mental

<p>NPI: 1174960686 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p><i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>
<p>HUDSON, KATE, CSW <i>Provider Gender:</i> Female <i>License number:</i> 83712 <i>NPI:</i> 1194159384 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035</p>	<p>ISHIDA, YO, CSW <i>Provider Gender:</i> Female <i>License number:</i> 29526 <i>NPI:</i> 1225154081 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M, TU 8:30AM-5PM, W 1PM-5PM</p>	<p>ISHIDA, YO, CSW <i>Provider Gender:</i> Female <i>License number:</i> 29526 <i>NPI:</i> 1225154081 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M, TU 8:30AM-5PM, W 1PM-5PM</p>

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J. Directorio de proveedores de salud mental

<p>JALAN, DEVESH, MD <i>Provider Gender:</i> Male <i>License number:</i> A167754 <i>NPI:</i> 1083092134 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>SPRING VALLEY, CA 91977-1030 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M,TU 8:30AM-5PM, W 1PM-5PM</p>	<p><i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>
<p>JALAN, DEVESH, MD <i>Provider Gender:</i> Male <i>License number:</i> A167754 <i>NPI:</i> 1083092134 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR</p>	<p>JAMES, CHRISTINE E , MD <i>Provider Gender:</i> Female <i>License number:</i> 20A13931 <i>NPI:</i> 1679834022 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for</p>	<p>JAMES, CHRISTINE E , MD <i>Provider Gender:</i> Female <i>License number:</i> 20A13931 <i>NPI:</i> 1679834022 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for</p>

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J. Directorio de proveedores de salud mental

Accessibility information

Hours: M,TU 8:30AM-5PM, W 1PM-5PM

JASSO-RAMIREZ, MARTHA, CSW

Provider Gender: Female

License number: 26493

NPI: 1871772020

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619) 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

JASSO-RAMIREZ, MARTHA, CSW

Provider Gender: Female

License number: 26493

NPI: 1871772020

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

3845 SPRING DR
SPRING VALLEY, CA
91977-1030

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619) 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M,TU 8:30AM-5PM, W 1PM-5PM

JENSEN, DEXTER, MD

Provider Gender: Male

License number: A67960

NPI: 1740465541

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

3845 SPRING DR
SPRING VALLEY, CA
91977-1030

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619) 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M,TU 8:30AM-5PM, W 1PM-5PM

JONES, ADELE, PSY

Provider Gender: Female

License number: 25311

NPI: 1558602490

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

3845 SPRING DR
SPRING VALLEY, CA
91977-1030

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619) 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

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J. Directorio de proveedores de salud mental

Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M,TU 8:30AM-5PM, W
1PM-5PM

JONES, ADELE, PSY

Provider Gender: Female

License number: 25311

NPI: 1558602490

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035

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515-2338

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Accepting New Patients: Yes

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Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

JONES, ATAVIA L , CSW

Provider Gender: Female

License number: LCSW76796

NPI: 1952734899

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

8788 JAMACHA RD
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Site English Spoken: Yes

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American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

JONES, MICHAEL A , CSW

Provider Gender: Male

License number: LCS 22452

NPI: 1548205719

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035

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Fax: (619) 702-8536

After Hours Phone: (619)
515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

JONES, MICHAEL A , CSW

Provider Gender: Male

License number: LCS 22452

NPI: 1548205719

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

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After Hours Phone: (619)
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Website:

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Accepting New Patients: Yes

Site English Spoken: Yes

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J. Directorio de proveedores de salud mental

Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M,TU 8:30AM-5PM, W
1PM-5PM

KEI, JUSTIN, MD

Provider Gender: Male

License number: A138266

NPI: 1396150041

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3845 SPRING DR

SPRING VALLEY, CA

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After Hours Phone: (619)

515-2338

Website:

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Yes

Please contact provider for
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Hours: M,TU 8:30AM-5PM, W
1PM-5PM

KEI, JUSTIN, MD

Provider Gender: Male

License number: A138266

NPI: 1396150041

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

8788 JAMACHA RD

SPRING VALLEY, CA

91977-4035

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for

Accessibility information

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

KLOBERDANZ, KELSEY L , NPA

Provider Gender: Female

License number: 95005293

NPI: 1235672502

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

8788 JAMACHA RD

SPRING VALLEY, CA

91977-4035

Phone: (619) 515-2338

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Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for

Accessibility information

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

KLOBERDANZ, KELSEY L , NPA

Provider Gender: Female

License number: 95005293

NPI: 1235672502

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3845 SPRING DR

SPRING VALLEY, CA

91977-1030

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M,TU 8:30AM-5PM, W 1PM-5PM</p>	<p>Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M,TU 8:30AM-5PM, W 1PM-5PM</p>	<p>Hours: M-F 8:30AM-5PM KOH, STEVE H , MD Provider Gender: Male License number: A103468 NPI: 1467650473 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>
<p>KNIGHT, MARK ANTHONY, MD Provider Gender: Male License number: A94460 NPI: 1851573554 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information</p>	<p>KNIGHT, MARK ANTHONY, MD Provider Gender: Male License number: A94460 NPI: 1851573554 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information</p>	<p>KOH, STEVE H , MD Provider Gender: Male License number: A103468 NPI: 1467650473 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO</p>

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J. Directorio de proveedores de salud mental

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 91977-1030
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 American Sign Language, Farsi,
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 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M,TU 8:30AM-5PM, W
 1PM-5PM

KYLE, MARCIE, CSW

Provider Gender: Female
 License number: LCSW78555
 NPI: 1174981500
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3845 SPRING DR
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 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):

Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

LEBLANC, ASHLEY B , CSW

Provider Gender: Female
 License number: 83136
 NPI: 1275905622
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
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 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
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 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

LIDSTONE, PAVEN, MD

Provider Gender: Female
 License number: 161149
 NPI: 1942662093
 Provider English Spoken: Yes
 Provider Language(s) Spoken:

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J. Directorio de proveedores de salud mental

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TDD: No
Min/Max Age:
Gender Restriction: No Gender
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American Sign Language (ASL):
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LIDSTONE, PAVEN, MD
Provider Gender: Female
License number: 161149
NPI: 1942662093
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Provider Language(s) Spoken:
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Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

LIM, SANDRA S , MD
Provider Gender: Female
License number: 20A13075
NPI: 1083963094
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
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TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender

Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

LIM, SANDRA S , MD
Provider Gender: Female
License number: 20A13075
NPI: 1083963094
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
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TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M,TU 8:30AM-5PM, W
 1PM-5PM

LIPPERT, HEATHER M , CSW
Provider Gender: Female
License number: 22526

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J. Directorio de proveedores de salud mental

NPI: 1093991663
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3845 SPRING DR
 SPRING VALLEY, CA
 91977-1030
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M,TU 8:30AM-5PM, W
 1PM-5PM

LIPPERT, HEATHER M , CSW
 Provider Gender: Female
 License number: 22526
 NPI: 1093991663
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035

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 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

LOEB, CINDY, CSW
 Provider Gender: Female
 License number: 75333
 NPI: 1619108511
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
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 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

LOEB, CINDY, CSW
 Provider Gender: Female
 License number: 75333
 NPI: 1619108511
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
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 Min/Max Age:
 Gender Restriction: No Gender
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J. Directorio de proveedores de salud mental

<p>LYDIARD, JESSICA, MD <i>Provider Gender:</i> Female <i>License number:</i> A171775 <i>NPI:</i> 1841731296 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>SPRING VALLEY, CA 91977-1030 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M,TU 8:30AM-5PM, W 1PM-5PM</p>	<p><i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>
<p>LYDIARD, JESSICA, MD <i>Provider Gender:</i> Female <i>License number:</i> A171775 <i>NPI:</i> 1841731296 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR</p>	<p>LYONS, KEITH E , CSW <i>Provider Gender:</i> Male <i>License number:</i> 92724 <i>NPI:</i> 1538704002 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes</p>	<p>MACMASTER, LINDSAY, PSY <i>Provider Gender:</i> Female <i>License number:</i> 25570 <i>NPI:</i> 1659520179 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for</p>

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J. Directorio de proveedores de salud mental

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

MACMASTER, LINDSAY, PSY

Provider Gender: Female
License number: 25570
NPI: 1659520179
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
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Gender Restriction: No Gender
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American Sign Language (ASL):
Yes
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Hours: M,TU 8:30AM-5PM, W
1PM-5PM

MAHONEY, PATRICIA A , CSW

Provider Gender: Female
License number: 22296
NPI: 1700200888
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

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MAHONEY, PATRICIA A , CSW

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MAIETTA, KATHLEEN H , CSW

Provider Gender: Female
License number: 88399
NPI: 1487128617
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
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J. Directorio de proveedores de salud mental

<p><i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M,TU 8:30AM-5PM, W 1PM-5PM</p>	<p><i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p><i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M,TU 8:30AM-5PM, W 1PM-5PM</p>
<p>MAIETTA, KATHLEEN H , CSW <i>Provider Gender:</i> Female <i>License number:</i> 88399 <i>NPI:</i> 1487128617 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>MARTIR, MICHEL, CSW <i>Provider Gender:</i> Female <i>License number:</i> 73174 <i>NPI:</i> 1356528434 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030</p>	<p>MCADAMS, HILDA, NPA <i>Provider Gender:</i> Female <i>License number:</i> 14201 <i>NPI:</i> 1396838082 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i></p>
<p>MARTIR, MICHEL, CSW <i>Provider Gender:</i> Female <i>License number:</i> 73174 <i>NPI:</i> 1356528434</p>	<p>MARTIR, MICHEL, CSW <i>Provider Gender:</i> Female <i>License number:</i> 73174 <i>NPI:</i> 1356528434</p>	<p>MARTIR, MICHEL, CSW <i>Provider Gender:</i> Female <i>License number:</i> 73174 <i>NPI:</i> 1356528434</p>

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J. Directorio de proveedores de salud mental

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

MCADAMS, HILDA, NPA

Provider Gender: Female

License number: 14201

NPI: 1396838082

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

3845 SPRING DR
SPRING VALLEY, CA
91977-1030

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619) 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for

Accessibility information

Hours: M,TU 8:30AM-5PM, W 1PM-5PM

MCHENRY, KELLY, CSW

Provider Gender: Female

License number: 29689

NPI: 1851544340

Provider English Spoken: Yes

Provider Language(s) Spoken:

American Sign Language

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619) 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

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

MCHENRY, KELLY, CSW

Provider Gender: Female

License number: 29689

NPI: 1851544340

Provider English Spoken: Yes

Provider Language(s) Spoken:

American Sign Language

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

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SPRING VALLEY, CA
91977-1030

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619) 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M,TU 8:30AM-5PM, W 1PM-5PM

MEJIA, RITA I, MFT

Provider Gender: Female

License number: 99697

NPI: 1952741506

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

3845 SPRING DR
SPRING VALLEY, CA
91977-1030

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M,TU 8:30AM-5PM, W 1PM-5PM</p>	<p>Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>1PM-5PM MENDEZ, ANDRES G , PSY Provider Gender: Male License number: 28907 NPI: 1841482692 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>
<p>MEJIA, RITA I , MFT Provider Gender: Female License number: 99697 NPI: 1952741506 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi,</p>	<p>MENDEZ, ANDRES G , PSY Provider Gender: Male License number: 28907 NPI: 1841482692 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M,TU 8:30AM-5PM, W</p>	<p>MERRILL, SARAH M , CSW Provider Gender: Female License number: 79014 NPI: 1639403884 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO</p>

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J. Directorio de proveedores de salud mental

3845 SPRING DR
 SPRING VALLEY, CA
 91977-1030
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M,TU 8:30AM-5PM, W
 1PM-5PM

MERRILL, SARAH M , CSW
 Provider Gender: Female
 License number: 79014
 NPI: 1639403884
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes

Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

MILLICAN, RUTH, PSY
 Provider Gender: Female
 License number: 25354
 NPI: 1346472305
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes

Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

MILLICAN, RUTH, PSY
 Provider Gender: Female
 License number: 25354
 NPI: 1346472305
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
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 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M,TU 8:30AM-5PM, W
 1PM-5PM

MODAD, ALBERT, PSY
 Provider Gender: Female
 License number: 29697
 NPI: 1629453691
 Provider English Spoken: Yes
 Provider Language(s) Spoken:

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J. Directorio de proveedores de salud mental

Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3845 SPRING DR
SPRING VALLEY, CA
91977-1030
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Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M,TU 8:30AM-5PM, W
1PM-5PM

MODAD, ALBERT, PSY
Provider Gender: Female
License number: 29697
NPI: 1629453691
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
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8788 JAMACHA RD
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91977-4035
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Fax: (619) 702-8536
After Hours Phone: (619)
515-2338

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

**MORALES MORENO,
MINERVA, CSW**
Provider Gender: Female
License number: 63550
NPI: 1841337565
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

**MORALES MORENO,
MINERVA, CSW**
Provider Gender: Female
License number: 63550
NPI: 1841337565
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
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SPRING VALLEY, CA
91977-1030
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M,TU 8:30AM-5PM, W
1PM-5PM

MORRISON, TYLER E , MD

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J. Directorio de proveedores de salud mental

<p><i>Provider Gender:</i> Male <i>License number:</i> A144917 <i>NPI:</i> 1912391814 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Japanese <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p> <p>MORRISON, TYLER E , MD <i>Provider Gender:</i> Male <i>License number:</i> A144917 <i>NPI:</i> 1912391814 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Japanese <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR</p>	<p>SPRING VALLEY, CA 91977-1030 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> No Gender Restrictions <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M,TU 8:30AM-5PM, W 1PM-5PM</p> <p>MUNOZ, VIVIANA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 66637 <i>NPI:</i> 1497987713 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes</p>	<p><i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> No Gender Restrictions <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M,TU 8:30AM-5PM, W 1PM-5PM</p> <p>NADEAU MANNING, JULIE, CSW <i>Provider Gender:</i> Female <i>License number:</i> 25094 <i>NPI:</i> 1275609760 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> No Gender Restrictions <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i></p>
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J. Directorio de proveedores de salud mental

<p>Yes Please contact provider for Accessibility information Hours: M,TU 8:30AM-5PM, W 1PM-5PM</p>	<p><i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO</p>	<p><i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i></p>
<p>NADEAU MANNING, JULIE, CSW</p>	<p>8788 JAMACHA RD SPRING VALLEY, CA 91977-4035</p>	<p>www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes</p>
<p><i>Provider Gender:</i> Female <i>License number:</i> 25094 <i>NPI:</i> 1275609760 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i></p>	<p><i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i></p>	<p>www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No</p>
<p>FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035</p>	<p><i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i></p>	<p><i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes</p>
<p><i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i></p>	<p>www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No</p>	<p>Please contact provider for Accessibility information Hours: M,TU 8:30AM-5PM, W 1PM-5PM</p>
<p><i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No</p>	<p><i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes</p>	<p>NOUHI, NUSHA, PSY <i>Provider Gender:</i> Female <i>License number:</i> 27670 <i>NPI:</i> 1942433917 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi <i>Cultural Competency:</i></p>
<p>FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030</p>	<p><i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i></p>	<p>FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i></p>
<p><i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No</p>	<p><i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes</p>	<p>www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i></p>
<p>NAZARIO, JACOBETH, PSY <i>Provider Gender:</i> Female <i>License number:</i> PSY32092 <i>NPI:</i> 1326648684</p>	<p>NAZARIO, JACOBETH, PSY <i>Provider Gender:</i> Female <i>License number:</i> PSY32092 <i>NPI:</i> 1326648684 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030</p>	<p><i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i></p>

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J. Directorio de proveedores de salud mental

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M,TU 8:30AM-5PM, W 1PM-5PM

NOUHI, NUSHA, PSY

Provider Gender: Female

License number: 27670

NPI: 1942433917

Provider English Spoken: Yes

Provider Language(s) Spoken: Farsi

Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA

91977-4035
Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619) 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL):

Yes

Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

NWANGANGA, OKECHUKU R , CSW

Provider Gender: Male

License number: 27072

NPI: 1285984450

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA

91977-4035

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

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

NWANGANGA, OKECHUKU R , CSW

Provider Gender: Male

License number: 27072

NPI: 1285984450

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

3845 SPRING DR

SPRING VALLEY, CA

91977-1030

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

Hours: M,TU 8:30AM-5PM, W

1PM-5PM

OBRYAN, KELLY, PSY

Provider Gender: Female

License number: 24966

NPI: 1093882698

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

3845 SPRING DR

SPRING VALLEY, CA

91977-1030

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J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
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 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M,TU 8:30AM-5PM, W
 1PM-5PM

OBRYAN, KELLY, PSY

Provider Gender: Female
 License number: 24966
 NPI: 1093882698
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8788 JAMACHA RD
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 American Sign Language, Farsi,

Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

OLIVER, ELIZABETH, CSW

Provider Gender: Female
 License number: 66862
 NPI: 1326296351
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
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 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

OMORODIN, AISHA, MD

Provider Gender: Female
 License number: A169651
 NPI: 1629500301
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3845 SPRING DR
 SPRING VALLEY, CA
 91977-1030
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 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M,TU 8:30AM-5PM, W
 1PM-5PM

OMORODIN, AISHA, MD

Provider Gender: Female
 License number: A169651
 NPI: 1629500301
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

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J. Directorio de proveedores de salud mental

<p>8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p><i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M,TU 8:30AM-5PM, W 1PM-5PM</p>	<p>Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>
<p>PRASEK, LAUREN, NPA <i>Provider Gender:</i> Female <i>License number:</i> 95004145 <i>NPI:</i> 1932566031 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes</p>	<p>PRASEK, LAUREN, NPA <i>Provider Gender:</i> Female <i>License number:</i> 95004145 <i>NPI:</i> 1932566031 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes</p>	<p>PRESLEY, ARNOLD S , PSY <i>Provider Gender:</i> Male <i>License number:</i> 23795 <i>NPI:</i> 1205017688 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> CONCEPT HEALTHCARE PSYCHOLOGY GROUP 325 KEMPTON ST SPRING VALLEY, CA 91977-5810 <i>Phone:</i> (866) 284-0482 <i>Fax:</i> (888) 977-1204 <i>After Hours Phone:</i> (866) 284-0482 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM</p>
		<p>PROCTOR, MELISSA S , CSW <i>Provider Gender:</i> Female <i>License number:</i> 62650 <i>NPI:</i> 1336188655 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF</p>

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J. Directorio de proveedores de salud mental

<p>SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M,TU 8:30AM-5PM, W 1PM-5PM</p>	<p>American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M,TU 8:30AM-5PM, W 1PM-5PM</p>
<p>PROCTOR, MELISSA S , CSW Provider Gender: Female License number: 62650 NPI: 1336188655 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes</p>	<p>PROOSASELTS, YULIYA, MD Provider Gender: Female License number: A133675 NPI: 1952747875 Provider English Spoken: Yes Provider Language(s) Spoken: Russian Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions</p>	<p>PROOSASELTS, YULIYA, MD Provider Gender: Female License number: A133675 NPI: 1952747875 Provider English Spoken: Yes Provider Language(s) Spoken: Russian Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p> <p>RAMOS, ELIZABETH, CSW Provider Gender: Female License number: 73374</p>

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J. Directorio de proveedores de salud mental

<p>NPI: 1992046890 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M,TU 8:30AM-5PM, W 1PM-5PM</p>	<p>SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p>American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M,TU 8:30AM-5PM, W 1PM-5PM</p>
<p>RAMOS, ELIZABETH, CSW <i>Provider Gender:</i> Female <i>License number:</i> 73374 NPI: 1992046890 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD</p>	<p>RODRIGUEZ, CHRISTINE, PSY <i>Provider Gender:</i> Female <i>License number:</i> 30472 NPI: 1568656619 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i></p>	<p>RODRIGUEZ, CHRISTINE, PSY <i>Provider Gender:</i> Female <i>License number:</i> 30472 NPI: 1568656619 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for</p>

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J. Directorio de proveedores de salud mental

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

ROSENFARB, BARBARA, CSW

Provider Gender: Female
License number: 28590
NPI: 1447477781
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3845 SPRING DR
SPRING VALLEY, CA
91977-1030
Phone: (619) 515-2338
Fax: (619) 702-8536
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515-2338
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M,TU 8:30AM-5PM, W
1PM-5PM

ROSENFARB, BARBARA, CSW

Provider Gender: Female
License number: 28590
NPI: 1447477781
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

FAMILY HEALTH CENTERS OF
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Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

ROZELL, KATHY, CSW

Provider Gender: Female
License number: 25068
NPI: 1578603973
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3845 SPRING DR
SPRING VALLEY, CA
91977-1030
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515-2338
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www.beaconhealthoptions.com

Accepting New Patients: Yes
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Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
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Hours: M,TU 8:30AM-5PM, W
1PM-5PM

ROZELL, KATHY, CSW

Provider Gender: Female
License number: 25068
NPI: 1578603973
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
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515-2338
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Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p><i>Provider Language(s) Spoken:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030</p>	<p><i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M,TU 8:30AM-5PM, W 1PM-5PM</p>
<p>SACHS, MELISSA R , CSW <i>Provider Gender:</i> Female <i>License number:</i> 76968 <i>NPI:</i> 1649760356 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions</p>	<p><i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M,TU 8:30AM-5PM, W 1PM-5PM</p>	<p>SEPULVEDA, JOE, MD <i>Provider Gender:</i> Male <i>License number:</i> A113283 <i>NPI:</i> 1306165402 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i></p>
<p>SACHS, MELISSA R , CSW <i>Provider Gender:</i> Female <i>License number:</i> 76968 <i>NPI:</i> 1649760356 <i>Provider English Spoken:</i> Yes</p>	<p>SAMADI, ESTHER, MD <i>Provider Gender:</i> Female <i>License number:</i> A113657 <i>NPI:</i> 1396986204 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030</p>	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

SEPULVEDA, JOE, MD

Provider Gender: Male
License number: A113283
NPI: 1306165402

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

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3845 SPRING DR
SPRING VALLEY, CA
91977-1030

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)
515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for

Accessibility information

Hours: M,TU 8:30AM-5PM, W
1PM-5PM

SIMPSON, JENNIFER, CSW

Provider Gender: Female

License number: 82678

NPI: 1740765866

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035

Phone: (619) 515-2338

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After Hours Phone: (619)
515-2338

Website:

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for

Accessibility information

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

SIPIN, ELVIRA P , CSW

Provider Gender: Female

License number: LCS15308

NPI: 1477759892

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA

91977-4035

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515-2338

Website:

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

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

STEWART, ANDREA M , MFT

Provider Gender: U

License number: 45174

NPI: 1508993122

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

8788 JAMACHA RD
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J. Directorio de proveedores de salud mental

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

TAHBAZ, ASH, MFT

Provider Gender: U
License number: 87601
NPI: 1205294543
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
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Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):

Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM
**THICKSTUN, MARY SUSAN,
 CSW**
Provider Gender: Female
License number: 21573
NPI: 1437354875
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
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Fax: (619) 702-8536
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 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM
**THICKSTUN, MARY SUSAN,
 CSW**
Provider Gender: Female
License number: 21573
NPI: 1437354875

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
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 91977-1030
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Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M,TU 8:30AM-5PM, W
 1PM-5PM

THIESSEN, BRUCE L , PSY

Provider Gender: U
License number: 14259
NPI: 1841541984
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035

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J. Directorio de proveedores de salud mental

<p>Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>Hours: M,TU 8:30AM-5PM, W 1PM-5PM</p>
<p>TONG, GARRICK, MD Provider Gender: Male License number: A102192 NPI: 1831361278 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish, Yue Chinese Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>	<p>TONG, GARRICK, MD Provider Gender: Male License number: A102192 NPI: 1831361278 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish, Yue Chinese Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information</p>	<p>TORRES, LAURA, CSW Provider Gender: Female License number: 65059 NPI: 1568612943 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM</p>
<p>TRIANA, JENNIFER, CSW Provider Gender: Female License number: 88589 NPI: 1073844460 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency:</p>	<p>TRIANA, JENNIFER, CSW Provider Gender: Female License number: 88589 NPI: 1073844460 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency:</p>	

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J. Directorio de proveedores de salud mental

FAMILY HEALTH CENTERS OF
SAN DIEGO
3845 SPRING DR
SPRING VALLEY, CA
91977-1030

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

Hours: M,TU 8:30AM-5PM, W

1PM-5PM

TRIANA, JENNIFER, CSW

Provider Gender: Female

License number: 88589

NPI: 1073844460

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035

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After Hours Phone: (619)

515-2338

Website:

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

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

TROYER, EMILY, PSY

Provider Gender: Female

License number: A149101

NPI: 1326484437

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

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91977-1030

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Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

Hours: M,TU 8:30AM-5PM, W

1PM-5PM

WAUGH, BRANDON, CSW

Provider Gender: Male

License number: 83457

NPI: 1619459187

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035

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Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

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

WEAVER, JHOSMARA A , CSW

Provider Gender: Female

License number: 77233

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J. Directorio de proveedores de salud mental

NPI: 1982848594
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

WEBSTER, KRISTIN K , CSW
 Provider Gender: Female
 License number: LCSW16118
 NPI: 1902336837
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3845 SPRING DR
 SPRING VALLEY, CA
 91977-1030

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 515-2338
 Website:
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 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M,TU 8:30AM-5PM, W
 1PM-5PM

WEBSTER, KRISTIN K , CSW
 Provider Gender: Female
 License number: LCSW16118
 NPI: 1902336837
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
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 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

WITT, ANNETTE, CSW
 Provider Gender: Female
 License number: 15770
 NPI: 1912263468
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
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 Restrictions
 American Sign Language (ASL):
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J. Directorio de proveedores de salud mental

<p>WITT, ANNETTE, CSW <i>Provider Gender:</i> Female <i>License number:</i> 15770 <i>NPI:</i> 1912263468 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M,TU 8:30AM-5PM, W 1PM-5PM</p>	<p>8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>	<p><i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM</p>
<p>WOLF, CELIA C , NPA <i>Provider Gender:</i> Female <i>License number:</i> 95001899 <i>NPI:</i> 1245635564 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO</p>	<p>WOOD, KEEGAN, NPA <i>Provider Gender:</i> Male <i>License number:</i> NP95006887 <i>NPI:</i> 1417471459 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes</p>	<p>YALYSHAVA, VOLHA, CSW <i>Provider Gender:</i> Female <i>License number:</i> LCSW69810 <i>NPI:</i> 1821392002 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Russian <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

YALYSHAVA, VOLHA, CSW

Provider Gender: Female
License number: LCSW69810
NPI: 1821392002
Provider English Spoken: Yes
Provider Language(s) Spoken:
Russian
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3845 SPRING DR
SPRING VALLEY, CA
91977-1030
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:

Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M,TU 8:30AM-5PM, W
1PM-5PM

ZAYAS, GILBERTO, MD

Provider Gender: Male
License number: A136760
NPI: 1508174970
Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No

Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

VALLEY CENTER

KARP, MICHAEL, MFT

Provider Gender: Male
License number: 16939
NPI: 1376588541
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
KARP, MICHAEL
12115 MESA VERDE DR
VALLEY CENTER, CA
92082-5063

Phone: (760) 913-9003
Fax: (760) 749-1658
After Hours Phone: (760)
913-9003
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M,TU 9AM-6PM, W
2PM-6PM, TH,F 9AM-12PM

VISTA

BERENSON, LAURIE E , PSY

Provider Gender: Female
License number: 12568
NPI: 1104956556
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
BERENSON, LAURIE
450 S MELROSE DR STE 130
VISTA, CA 92081-6664
Phone: (760) 224-4333
Fax: (760) 301-0044
After Hours Phone: (760)
224-4333
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
Restrictions

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J. Directorio de proveedores de salud mental

American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M 9AM-5PM, TU 9AM-2:30PM, W,TH 9AM-4:30PM, F 1PM-4:30PM

CHAUDHRI, YASHWANT, MD

Provider Gender: Male
License number: A67679
NPI: 1043258429
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Urdu
Cultural Competency: VISTA COMMUNITY CLINIC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M 8AM-7PM, W 8AM-6:30PM, TH 8:30AM-7PM, F 8:30AM-12PM, SA 9AM-4PM

CHAUDHRI, YASHWANT, MD

Provider Gender: Male

License number: A67679
NPI: 1043258429
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Urdu
Cultural Competency: VISTA COMMUNITY CLINIC
134 GRAPEVINE RD
VISTA, CA 92083-4004
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-TH 8AM-7PM, F 8AM-5PM

CHRISTIANSON II, WARREN R , MD

Provider Gender: Male
License number: 20A9664
NPI: 1932359445
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: VISTA COMMUNITY CLINIC
1000 VALE TERRACE DR
VISTA, CA 92084-5218

Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M 8AM-7PM, W 8AM-6:30PM, TH 8:30AM-7PM, F 8:30AM-12PM, SA 9AM-4PM

CHRISTIANSON II, WARREN R , MD

Provider Gender: Male
License number: 20A9664
NPI: 1932359445
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: VISTA COMMUNITY CLINIC
134 GRAPEVINE RD
VISTA, CA 92083-4004
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Mandarin, Hindi, Khmer,

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J. Directorio de proveedores de salud mental

Spanish, Tamil, Telugu, Urdu,
Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-TH 8AM-7PM, F
8AM-5PM

CRUZ, VANESSA, CSW

Provider Gender: Female

License number: 87166

NPI: 1285170662

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

VISTA COMMUNITY CLINIC

134 GRAPEVINE RD

VISTA, CA 92083-4004

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)

631-5000

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Mandarin, Hindi, Khmer,

Spanish, Tamil, Telugu, Urdu,

Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

No

Please contact provider for
Accessibility information

Hours: M-TH 8AM-7PM, F

8AM-5PM

CRUZ, VANESSA, CSW

Provider Gender: Female

License number: 87166

NPI: 1285170662

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

VISTA COMMUNITY CLINIC

1000 VALE TERRACE DR

VISTA, CA 92084-5218

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)

631-5000

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Mandarin, Hindi, Khmer,

Spanish, Tamil, Telugu, Urdu,

Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

No

Please contact provider for
Accessibility information

Hours: M 8AM-7PM, W

8AM-6:30PM, TH 8:30AM-7PM,

F 8:30AM-12PM, SA 9AM-4PM

DEMALLIE, DIANE A , MD

Provider Gender: Female

License number: 55982

NPI: 1437162898

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

VISTA COMMUNITY CLINIC

134 GRAPEVINE RD

VISTA, CA 92083-4004

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)

631-5000

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Mandarin, Hindi, Khmer,

Spanish, Tamil, Telugu, Urdu,

Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

No

Please contact provider for
Accessibility information

Hours: M-TH 8AM-7PM, F

8AM-5PM

DEMALLIE, DIANE A , MD

Provider Gender: Female

License number: 55982

NPI: 1437162898

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

VISTA COMMUNITY CLINIC

1000 VALE TERRACE DR

VISTA, CA 92084-5218

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)

631-5000

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Mandarin, Hindi, Khmer,

Spanish, Tamil, Telugu, Urdu,

Chinese

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M 8AM-7PM, W 8AM-6:30PM, TH 8:30AM-7PM, F 8:30AM-12PM, SA 9AM-4PM</p>	<p>F 8:30AM-12PM, SA 9AM-4PM</p>	<p>134 GRAPEVINE RD VISTA, CA 92083-4004 Phone: (760) 631-5000 Fax: (760) 414-3892 After Hours Phone: (760) 631-5000 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M-TH 8AM-7PM, F 8AM-5PM</p>
<p>DESOCIO, KAREN, CSW Provider Gender: Female License number: 18451 NPI: 1497727820 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: VISTA COMMUNITY CLINIC 1000 VALE TERRACE DR VISTA, CA 92084-5218 Phone: (760) 631-5000 Fax: (760) 414-3892 After Hours Phone: (760) 631-5000 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M 8AM-7PM, W 8AM-6:30PM, TH 8:30AM-7PM,</p>	<p>DESOCIO, KAREN, CSW Provider Gender: Female License number: 18451 NPI: 1497727820 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: VISTA COMMUNITY CLINIC 134 GRAPEVINE RD VISTA, CA 92083-4004 Phone: (760) 631-5000 Fax: (760) 414-3892 After Hours Phone: (760) 631-5000 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M-TH 8AM-7PM, F 8AM-5PM</p>	<p>DOUGHERTY, CHRISTINE, CSW Provider Gender: Female License number: 26686 NPI: 1003194960 Provider English Spoken: Yes Provider Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M-TH 8AM-7PM, F 8AM-5PM</p>
<p>DOUGHERTY, CHRISTINE, CSW Provider Gender: Female License number: 26686 NPI: 1003194960 Provider English Spoken: Yes Provider Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M 8AM-7PM, W 8AM-6:30PM, TH 8:30AM-7PM,</p>	<p>DOUGHERTY, CHRISTINE, CSW Provider Gender: Female License number: 26686 NPI: 1003194960 Provider English Spoken: Yes Provider Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M-TH 8AM-7PM, F 8AM-5PM</p>	<p>DOUGHERTY, CHRISTINE, CSW Provider Gender: Female License number: 26686 NPI: 1003194960 Provider English Spoken: Yes Provider Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M-TH 8AM-7PM, F 8AM-5PM</p>

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J. Directorio de proveedores de salud mental

Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M 8AM-7PM, W
8AM-6:30PM, TH 8:30AM-7PM,
F 8:30AM-12PM, SA 9AM-4PM

GIORGIO, CHRISTINA, CSW

Provider Gender: Female
License number: 101690
NPI: 1457786774
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
VISTA COMMUNITY CLINIC
134 GRAPEVINE RD
VISTA, CA 92083-4004
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information

Hours: M-TH 8AM-7PM, F
8AM-5PM

GIORGIO, CHRISTINA, CSW

Provider Gender: Female
License number: 101690
NPI: 1457786774
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
VISTA COMMUNITY CLINIC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M 8AM-7PM, W
8AM-6:30PM, TH 8:30AM-7PM,
F 8:30AM-12PM, SA 9AM-4PM

GODINEZ, BRENDA, CSW

Provider Gender: Female
License number: 88306
NPI: 1568918647
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:

VISTA COMMUNITY CLINIC
134 GRAPEVINE RD
VISTA, CA 92083-4004
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

GODINEZ, BRENDA, CSW

Provider Gender: Female
License number: 88306
NPI: 1568918647
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
VISTA COMMUNITY CLINIC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p><i>Site Language(s) Spoken:</i> Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M 8AM-7PM, W 8AM-6:30PM, TH 8:30AM-7PM, F 8:30AM-12PM, SA 9AM-4PM</p>	<p>No Please contact provider for Accessibility information <i>Hours:</i> M 8AM-7PM, W 8AM-6:30PM, TH 8:30AM-7PM, F 8:30AM-12PM, SA 9AM-4PM</p>	<p><i>NPI:</i> 1619246907 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Mandarin, Chinese <i>Cultural Competency:</i> VISTA COMMUNITY CLINIC 134 GRAPEVINE RD VISTA, CA 92083-4004 <i>Phone:</i> (760) 631-5000 <i>Fax:</i> (760) 414-3892 <i>After Hours Phone:</i> (760) 631-5000 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-TH 8AM-7PM, F 8AM-5PM</p>
<p>GUERRERO, ADRIANA J , CSW <i>Provider Gender:</i> Female <i>License number:</i> LCSW86435 <i>NPI:</i> 1356777361 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> VISTA COMMUNITY CLINIC 1000 VALE TERRACE DR VISTA, CA 92084-5218 <i>Phone:</i> (760) 631-5000 <i>Fax:</i> (760) 414-3892 <i>After Hours Phone:</i> (760) 631-5000 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i></p>	<p>GUERRERO, ADRIANA J , CSW <i>Provider Gender:</i> Female <i>License number:</i> LCSW86435 <i>NPI:</i> 1356777361 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> VISTA COMMUNITY CLINIC 134 GRAPEVINE RD VISTA, CA 92083-4004 <i>Phone:</i> (760) 631-5000 <i>Fax:</i> (760) 414-3892 <i>After Hours Phone:</i> (760) 631-5000 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-TH 8AM-7PM, F 8AM-5PM</p>	<p>HALGEDAHL, YI TING, NPA <i>Provider Gender:</i> Female <i>License number:</i> 95006826 <i>NPI:</i> 1619246907 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Mandarin, Chinese <i>Cultural Competency:</i> VISTA COMMUNITY CLINIC 1000 VALE TERRACE DR VISTA, CA 92084-5218</p>
<p>HALGEDAHL, YI TING, NPA <i>Provider Gender:</i> Female <i>License number:</i> 95006826</p>	<p>HALGEDAHL, YI TING, NPA <i>Provider Gender:</i> Female <i>License number:</i> 95006826</p>	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<p>Phone: (760) 631-5000 Fax: (760) 414-3892 After Hours Phone: (760) 631-5000 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M 8AM-7PM, W 8AM-6:30PM, TH 8:30AM-7PM, F 8:30AM-12PM, SA 9AM-4PM</p>	<p>Spanish, Tamil, Telugu, Urdu, Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M 8AM-7PM, W 8AM-6:30PM, TH 8:30AM-7PM, F 8:30AM-12PM, SA 9AM-4PM</p>	<p>Hours: M-TH 8AM-7PM, F 8AM-5PM KONG, DARREN, CSW Provider Gender: Male License number: 88493 NPI: 1447685078 Provider English Spoken: Yes Provider Language(s) Spoken: Khmer Cultural Competency: VISTA COMMUNITY CLINIC 134 GRAPEVINE RD VISTA, CA 92083-4004 Phone: (760) 631-5000 Fax: (760) 414-3892 After Hours Phone: (760) 631-5000 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M-TH 8AM-7PM, F 8AM-5PM</p>
<p>JAGANNATH, NIRMALA, CSW Provider Gender: Female License number: 23183 NPI: 1639687726 Provider English Spoken: Yes Provider Language(s) Spoken: Hindi, Tamil, Telugu Cultural Competency: VISTA COMMUNITY CLINIC 1000 VALE TERRACE DR VISTA, CA 92084-5218 Phone: (760) 631-5000 Fax: (760) 414-3892 After Hours Phone: (760) 631-5000 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information</p>	<p>JAGANNATH, NIRMALA, CSW Provider Gender: Female License number: 23183 NPI: 1639687726 Provider English Spoken: Yes Provider Language(s) Spoken: Hindi, Tamil, Telugu Cultural Competency: VISTA COMMUNITY CLINIC 134 GRAPEVINE RD VISTA, CA 92083-4004 Phone: (760) 631-5000 Fax: (760) 414-3892 After Hours Phone: (760) 631-5000 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information</p>	<p>KONG, DARREN, CSW Provider Gender: Male License number: 88493 NPI: 1447685078 Provider English Spoken: Yes Provider Language(s) Spoken: Khmer Cultural Competency:</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

VISTA COMMUNITY CLINIC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M 8AM-7PM, W
8AM-6:30PM, TH 8:30AM-7PM,
F 8:30AM-12PM, SA 9AM-4PM

MEYERHOF, GRETA, MFT

Provider Gender: Female
License number: 32299
NPI: 1487196333
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
VISTA COMMUNITY CLINIC
134 GRAPEVINE RD
VISTA, CA 92083-4004
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

MEYERHOF, GRETA, MFT

Provider Gender: Female
License number: 32299
NPI: 1487196333
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
VISTA COMMUNITY CLINIC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information

Hours: M 8AM-7PM, W
8AM-6:30PM, TH 8:30AM-7PM,
F 8:30AM-12PM, SA 9AM-4PM

MILLS, DONNA M , MD

Provider Gender: Female
License number: A51160
NPI: 1831115658
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
VISTA COMMUNITY CLINIC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M 8AM-7PM, W
8AM-6:30PM, TH 8:30AM-7PM,
F 8:30AM-12PM, SA 9AM-4PM

MILLS, DONNA M , MD

Provider Gender: Female
License number: A51160
NPI: 1831115658
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

VISTA COMMUNITY CLINIC
134 GRAPEVINE RD
VISTA, CA 92083-4004
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

MOTAGHED, HENGAMEH, PSY

Provider Gender: Female
License number: 12707
NPI: 1366550592
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi

Cultural Competency:

MOTAGHED, HENGAMEH
550 W VISTA WAY STE 107
VISTA, CA 92083-5707
Phone: (858) 922-4959
Fax: (619) 294-8190
After Hours Phone: (858) 922-4959
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken: Farsi
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: W 8AM-8PM

NAVA, PETER B , NPA

Provider Gender: Male
License number: 95016584
NPI: 1689251571
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
VISTA COMMUNITY CLINIC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M 8AM-7PM, W
8AM-6:30PM, TH 8:30AM-7PM,
F 8:30AM-12PM, SA 9AM-4PM

NAVA, PETER B , NPA

Provider Gender: Male
License number: 95016584
NPI: 1689251571
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
VISTA COMMUNITY CLINIC
134 GRAPEVINE RD
VISTA, CA 92083-4004
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

NEVILLE, MARGARET, CSW

Provider Gender: Female
License number: 82407
NPI: 1073682407
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
VISTA COMMUNITY CLINIC
1000 VALE TERRACE DR
VISTA, CA 92084-5218

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Mandarin, Hindi, Khmer,
 Spanish, Tamil, Telugu, Urdu,
 Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M 8AM-7PM, W
 8AM-6:30PM, TH 8:30AM-7PM,
 F 8:30AM-12PM, SA 9AM-4PM

NEVILLE, MARGARET, CSW

Provider Gender: Female
 License number: 82407
 NPI: 1073682407
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 VISTA COMMUNITY CLINIC
 134 GRAPEVINE RD
 VISTA, CA 92083-4004
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760)
 631-5000
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Mandarin, Hindi, Khmer,
 Spanish, Tamil, Telugu, Urdu,

Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-TH 8AM-7PM, F
 8AM-5PM

PLACEK, KAREL, MD

Provider Gender: Male
 License number: A42838
 NPI: 1124127675
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Czech
 Cultural Competency:
 MENTAL HEALTH SYSTEMS
 INC
 550 W VISTA WAY STE 407
 VISTA, CA 92083-5714
 Phone: (760) 758-1092
 Fax: (760) 758-8481
 After Hours Phone: (760)
 758-1092
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Czech
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-4:30PM

RINGEL, BRENDA L, MD

Provider Gender: Female

License number: A65800
 NPI: 1689869976
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 EXODUS RECOVERY, INC.
 524 W VISTA WAY
 VISTA, CA 92083-5704
 Phone: (760) 758-1150
 Fax: (760) 758-1808
 After Hours Phone: (760)
 758-1150
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 9AM-5PM

SANCHEZ, ADRIANA, CSW

Provider Gender: Female
 License number: 97093
 NPI: 1609450451
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 VISTA COMMUNITY CLINIC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760)
 631-5000
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes

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J. Directorio de proveedores de salud mental

<p><i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M 8AM-7PM, W 8AM-6:30PM, TH 8:30AM-7PM, F 8:30AM-12PM, SA 9AM-4PM</p>	<p>No Please contact provider for Accessibility information <i>Hours:</i> M-TH 8AM-7PM, F 8AM-5PM</p>	<p><i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> VISTA COMMUNITY CLINIC 134 GRAPEVINE RD VISTA, CA 92083-4004 <i>Phone:</i> (760) 631-5000 <i>Fax:</i> (760) 414-3892 <i>After Hours Phone:</i> (760) 631-5000 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-TH 8AM-7PM, F 8AM-5PM</p>
<p>SANCHEZ, ADRIANA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 97093 <i>NPI:</i> 1609450451 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> VISTA COMMUNITY CLINIC 134 GRAPEVINE RD VISTA, CA 92083-4004 <i>Phone:</i> (760) 631-5000 <i>Fax:</i> (760) 414-3892 <i>After Hours Phone:</i> (760) 631-5000 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i></p>	<p>SMITH, SONYA L , CSW <i>Provider Gender:</i> Female <i>License number:</i> 82598 <i>NPI:</i> 1902070857 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> VISTA COMMUNITY CLINIC 1000 VALE TERRACE DR VISTA, CA 92084-5218 <i>Phone:</i> (760) 631-5000 <i>Fax:</i> (760) 414-3892 <i>After Hours Phone:</i> (760) 631-5000 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M 8AM-7PM, W 8AM-6:30PM, TH 8:30AM-7PM, F 8:30AM-12PM, SA 9AM-4PM</p>	<p>SWENSON, ING E , CSW <i>Provider Gender:</i> Male <i>License number:</i> 28549 <i>NPI:</i> 1063680650 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> VISTA COMMUNITY CLINIC 134 GRAPEVINE RD VISTA, CA 92083-4004 <i>Phone:</i> (760) 631-5000 <i>Fax:</i> (760) 414-3892 <i>After Hours Phone:</i> (760) 631-5000 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes</p>

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J. Directorio de proveedores de salud mental

Site English Spoken: Yes
Site Language(s) Spoken:
 Mandarin, Hindi, Khmer,
 Spanish, Tamil, Telugu, Urdu,
 Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-TH 8AM-7PM, F
 8AM-5PM

SWENSON, ING E , CSW

Provider Gender: Male
License number: 28549
NPI: 1063680650
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 VISTA COMMUNITY CLINIC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
 631-5000
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Mandarin, Hindi, Khmer,
 Spanish, Tamil, Telugu, Urdu,
 Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for

Accessibility information
Hours: M 8AM-7PM, W
 8AM-6:30PM, TH 8:30AM-7PM,
 F 8:30AM-12PM, SA 9AM-4PM

WILSON, CARLENE, CSW

Provider Gender: Female
License number: 74685
NPI: 1508327081
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 VISTA COMMUNITY CLINIC
 134 GRAPEVINE RD
 VISTA, CA 92083-4004
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
 631-5000
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Mandarin, Hindi, Khmer,
 Spanish, Tamil, Telugu, Urdu,
 Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-TH 8AM-7PM, F
 8AM-5PM

WILSON, CARLENE, CSW

Provider Gender: Female
License number: 74685
NPI: 1508327081
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

VISTA COMMUNITY CLINIC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
 631-5000
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Mandarin, Hindi, Khmer,
 Spanish, Tamil, Telugu, Urdu,
 Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M 8AM-7PM, W
 8AM-6:30PM, TH 8:30AM-7PM,
 F 8:30AM-12PM, SA 9AM-4PM

ZAPPONE, ALIDA, CSW

Provider Gender: Female
License number: 26061
NPI: 1154705598
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 VISTA COMMUNITY CLINIC
 134 GRAPEVINE RD
 VISTA, CA 92083-4004
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
 631-5000
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes

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J. Directorio de proveedores de salud mental

Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

ZAPPONE, ALIDA, CSW

Provider Gender: Female
License number: 26061
NPI: 1154705598
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
VISTA COMMUNITY CLINIC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

ALPINE

AOTO, KIM N , OD

Provider Gender: Female
License number: 14524
NPI: 1780935650
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: Yes
WEST COAST EYE CARE
1620 ALPINE BLVD STE 117
ALPINE, CA 91901-1103
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M,W 9AM-5PM, TU 10AM-6PM, TH 8AM-5PM, F 9AM-4PM

AVALLONE, THOMAS, MD

Provider Gender: Male
License number: A147199
NPI: 1679865950
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
WEST COAST EYE CARE
1620 ALPINE BLVD STE 117
ALPINE, CA 91901-1103

Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M,W 9AM-5PM, TU 10AM-6PM, TH 8AM-5PM, F 9AM-4PM

BINDER, NICHOLAS, MD

Provider Gender: Male
License number: A124698
NPI: 1306076716
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
WEST COAST EYE CARE
1620 ALPINE BLVD STE 117
ALPINE, CA 91901-1103
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M,W 9AM-5PM, TU

10AM-6PM, TH 8AM-5PM, F 9AM-4PM

DEAN, MOENA, OD

Provider Gender: Female
License number: 33955
NPI: 1265927578
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
WEST COAST EYE CARE
1620 ALPINE BLVD STE 117
ALPINE, CA 91901-1103
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M,W 9AM-5PM, TU 10AM-6PM, TH 8AM-5PM, F 9AM-4PM

DYER, SHARON M , OD

Provider Gender: Female
License number: 33450
NPI: 1063866887
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
WEST COAST EYE CARE
1620 ALPINE BLVD STE 117
ALPINE, CA 91901-1103
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone:

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* No
Hours: M,W 9AM-5PM, TU
10AM-6PM, TH 8AM-5PM, F
9AM-4PM

KATZMAN, BARRY, MD
Provider Gender: Male
License number: A34834
NPI: 1760473797
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: Yes
WEST COAST EYE CARE
1620 ALPINE BLVD STE 117
ALPINE, CA 91901-1103
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* No
Hours: M,W 9AM-5PM, TU
10AM-6PM, TH 8AM-5PM, F
9AM-4PM

MCGRAW, JOSEPH, MD
Provider Gender: Male
License number: A155228
NPI: 1588624852
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
WEST COAST EYE CARE
1620 ALPINE BLVD STE 117
ALPINE, CA 91901-1103
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* No
Hours: M,W 9AM-5PM, TU
10AM-6PM, TH 8AM-5PM, F
9AM-4PM

MILLER, DOUGLAS G , MD
Provider Gender: Male
License number: G52627
NPI: 1982636031
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
WEST COAST EYE CARE
1620 ALPINE BLVD STE 117
ALPINE, CA 91901-1103
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* No
Hours: M,W 9AM-5PM, TU
10AM-6PM, TH 8AM-5PM, F
9AM-4PM

**MORRISON REYES, JOSHUA,
MD**
Provider Gender: Male
License number: A125435
NPI: 1235366782
Provider English Spoken: Yes
Provider Language(s) Spoken:
Indonesian, Spanish
Cultural Competency: Yes
WEST COAST EYE CARE
1620 ALPINE BLVD STE 117
ALPINE, CA 91901-1103
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* No
Hours: M,W 9AM-5PM, TU
10AM-6PM, TH 8AM-5PM, F
9AM-4PM

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

PATEL, GITANE, MD

Provider Gender: Male
License number: A108603
NPI: 1710171434
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
WEST COAST EYE CARE
1620 ALPINE BLVD STE 117
ALPINE, CA 91901-1103
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* No
Hours: M,W 9AM-5PM, TU
10AM-6PM, TH 8AM-5PM, F
9AM-4PM

PATEL, SARJAN H , MD

Provider Gender: Male
License number: A114976
NPI: 1316199326
Provider English Spoken: Yes
Provider Language(s) Spoken:
Gujarati, Hindi, Spanish
Cultural Competency: Yes
WEST COAST EYE CARE
1620 ALPINE BLVD STE 117
ALPINE, CA 91901-1103
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone:
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* No
Hours: M,W 9AM-5PM, TU
10AM-6PM, TH 8AM-5PM, F
9AM-4PM

PRABHU, SUJATA P , MD

Provider Gender: Female
License number: A115965
NPI: 1982872552
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: Yes
WEST COAST EYE CARE
1620 ALPINE BLVD STE 117
ALPINE, CA 91901-1103
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* No
Hours: M,W 9AM-5PM, TU
10AM-6PM, TH 8AM-5PM, F
9AM-4PM

SORIANO, CATHERINE F , OD

Provider Gender: Female
License number: 13109
NPI: 1508919085
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Tagalog
Cultural Competency: Yes
WEST COAST EYE CARE
1620 ALPINE BLVD STE 117
ALPINE, CA 91901-1103
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* No
Hours: M,W 9AM-5PM, TU
10AM-6PM, TH 8AM-5PM, F
9AM-4PM

BONITA

CHA, DANIEL D , OD

Provider Gender: Male
License number: 14779
NPI: 1386078020
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: Yes
EYECARE OF BONITA
4502 BONITA RD
BONITA, CA 91902-1427

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

Phone: (619) 479-7334
 Fax: (619) 475-3456
 After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Korean, Spanish
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Public transportation (within 1/2
 mile from Site): Yes
 Hours: M 8AM-6:30PM, W,F
 8AM-6PM, TH 12:30PM-6PM,
 SA 9AM-2PM

KIKUNAGA, HENRY E , OD

Provider Gender: Male
 License number: 13186
 NPI: 1841406394
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: Yes
 BONITA POINT FAMILY
 OPTOMETRY
 180 OTAY LAKES RD STE 201
 BONITA, CA 91902-2400
 Phone: (619) 267-9900
 Fax: (619) 267-9910
 After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Japanese, Spanish
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information

Public transportation (within 1/2
 mile from Site): Yes
 Hours: M-F 8AM-5PM, SA
 8AM-12PM

MASON, DANIEL L , OD

Provider Gender: Male
 License number: 7989
 NPI: 1841208840
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: Yes
 BONITA POINT FAMILY
 OPTOMETRY
 180 OTAY LAKES RD STE 201
 BONITA, CA 91902-2400
 Phone: (619) 267-9900
 Fax: (619) 267-9910
 After Hours Phone:

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Japanese, Spanish
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Public transportation (within 1/2
 mile from Site): Yes
 Hours: M-F 8AM-5PM, SA
 8AM-12PM

PACK, ALYSSA, OD

Provider Gender: Female
 License number: 34608
 NPI: 1750991220
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: Yes
 BONITA POINT FAMILY
 OPTOMETRY

180 OTAY LAKES RD STE 201
 BONITA, CA 91902-2400
 Phone: (619) 267-9900
 Fax: (619) 267-9910
 After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Japanese, Spanish
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Public transportation (within 1/2
 mile from Site): Yes
 Hours: M-F 8AM-5PM, SA
 8AM-12PM

TRAJANO, CHARMINE D , OD

Provider Gender: Female
 License number: 14993
 NPI: 1699183673
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Tagalog
 Cultural Competency: Yes
 BONITA POINT FAMILY
 OPTOMETRY
 180 OTAY LAKES RD STE 201
 BONITA, CA 91902-2400
 Phone: (619) 267-9900
 Fax: (619) 267-9910
 After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Japanese, Spanish
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* Yes
Hours: M-F 8AM-5PM, SA
8AM-12PM

CAMPO

YANG, HARRISON H , OD
Provider Gender: Male
License number: 33964
NPI: 1053806307
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
SAN YSIDRO HEALTH
1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906-2028
Phone: (619) 662-4100
Fax:
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Chinese

Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* Yes
Hours: M,TU,TH 8AM-5PM

CARLSBAD

SHARMA, GURU D , OD
Provider Gender: Male
License number: 13675
NPI: 1427484138
Provider English Spoken: Yes
Provider Language(s) Spoken:

Hindi
Cultural Competency: Yes
EYE STYLE OPTOMETRY
5814 VAN ALLEN WAY STE 146
CARLSBAD, CA 92008-7359
Phone: (442) 244-5227
Fax: (442) 287-8092
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* No
Hours: SA,SU 12PM-5PM, M-F
10AM-6PM

CHULA VISTA

BERGMARK, JAMIE L , OD
Provider Gender: Female
License number: 33657
NPI: 1669920757
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
PACK & BIANES VISION -
TERRA NOVA
374 E H ST STE 1708
CHULA VISTA, CA 91910-7492
Phone: (619) 425-7990
Fax: (619) 425-7992
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:

Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* Yes
Hours: M,W-F 8:30AM-5:30PM,
TU 8:30AM-5PM, SA
8:30AM-1PM

BIANES, BEVERLY P , OD
Provider Gender: Female
License number: 9841
NPI: 1285692756
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
PACK & BIANES VISION -
TERRA NOVA
374 E H ST STE 1708
CHULA VISTA, CA 91910-7492
Phone: (619) 425-7990
Fax: (619) 425-7992
After Hours Phone:

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* Yes
Hours: M,W-F 8:30AM-5:30PM,
TU 8:30AM-5PM, SA
8:30AM-1PM

BIANES, BEVERLY P , OD
Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

License number: 9841
NPI: 1285692756
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
PACK & BIANES VISION -
EASTLAKE
890 EASTLAKE PKWY STE 102
CHULA VISTA, CA 91914-4521
Phone: (619) 216-3937
Fax: (619) 216-9041
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): No
Hours: TU,W,F 9AM-6PM, TH
10AM-6PM, SA 8:30AM-1PM

CASTILLEJOS, DAVID, MD
Provider Gender: Male
License number: A44482
NPI: 1558446401
Provider English Spoken: Yes
Provider Language(s) Spoken:
French, Portuguese, Spanish,
Tagalog
Cultural Competency: Yes
CASTILLEJOS EYE INSTITUTE
MED GROUP
342 F ST
CHULA VISTA, CA 91910-2625
Phone: (619) 422-1471
Fax: (619) 271-7044
After Hours Phone:
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
French, Portuguese, Spanish,
Tagalog, Vietnamese
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): Yes
Hours: M,W,F 8AM-5PM, TU,TH
7AM-5PM

CASTILLEJOS, MARIA E , MD
Provider Gender: Female
License number: A37652
NPI: 1043395098
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: Yes
CASTILLEJOS EYE INSTITUTE
MED GROUP
342 F ST
CHULA VISTA, CA 91910-2625
Phone: (619) 422-1471
Fax: (619) 271-7044
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
French, Portuguese, Spanish,
Tagalog, Vietnamese
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): Yes

Hours: M,W,F 8AM-5PM, TU,TH
7AM-5PM

HUANG, FLORA, OD
Provider Gender: Female
License number: 34082
NPI: 1487137105
Provider English Spoken: Yes
Provider Language(s) Spoken:
Chinese
Cultural Competency: Yes
PACK & BIANES VISION -
TERRA NOVA
374 E H ST STE 1708
CHULA VISTA, CA 91910-7492
Phone: (619) 425-7990
Fax: (619) 425-7992
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): Yes
Hours: M,W-F 8:30AM-5:30PM,
TU 8:30AM-5PM, SA
8:30AM-1PM

HUANG, PETER D , OD
Provider Gender: Male
License number: 11659
NPI: 1639100522
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
PETER D HUANG OD INC
557 H ST
CHULA VISTA, CA 91910-4330

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

Phone: (619) 422-0139
 Fax: (619) 422-0066
 After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish, Vietnamese
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Public transportation (within 1/2
 mile from Site): Yes
 Hours: M,W 9AM-5PM, TU,TH
 9AM-6PM, F 8AM-4PM, SA
 9AM-2PM

KALRA, ANKUR, OD

Provider Gender: Male
 License number: 11898
 NPI: 1124195789
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Hindi
 Cultural Competency: Yes
 OTAY RANCH EYEWORKS
 OPTOMETRY
 1741 EASTLAKE PKWY STE
 101
 CHULA VISTA, CA 91915-2032
 Phone: (619) 421-6600
 Fax: (619) 421-6006
 After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi,
 Spanish
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No

Please contact provider for
 Accessibility information
 Public transportation (within 1/2
 mile from Site): No
 Hours: SU 10AM-4PM, M-F
 9AM-7PM, SA 9AM-5PM

MASCARENO, EFRAIN, OD

Provider Gender: Male
 License number: 10906
 NPI: 1457507279
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: Yes
 CLEAR VISION OPTOMETRY
 DR MASCARENO
 440 4TH AVE
 CHULA VISTA, CA 91910-4443
 Phone: (619) 427-2020
 Fax: (866) 254-5707
 After Hours Phone:

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Public transportation (within 1/2
 mile from Site): Yes
 Hours: M-TH 9AM-6PM, F
 9AM-5PM

MASCARENO, EFRAIN, OD

Provider Gender: Male
 License number: 10906
 NPI: 1457507279
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: Yes
 EASTLAKE VISION CENTER

DR MASCARENO
 2260 OTAY LAKES RD STE 111
 CHULA VISTA, CA 91915-1007
 Phone: (619) 421-5550
 Fax: (619) 421-6022
 After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Public transportation (within 1/2
 mile from Site): No
 Hours: M-F 9AM-6PM, SA
 9AM-3PM

ORDONEZ, KATHRYN, OD

Provider Gender: Female
 License number: 34167
 NPI: 1821560418
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: Yes
 CASTILLEJOS EYE INSTITUTE
 MED GROUP
 342 F ST
 CHULA VISTA, CA 91910-2625
 Phone: (619) 422-1471
 Fax: (619) 271-7044
 After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 French, Portuguese, Spanish,
 Tagalog, Vietnamese
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

<p>No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> Yes <i>Hours:</i> M,W,F 8AM-5PM, TU,TH 7AM-5PM</p>	<p><i>Cultural Competency:</i> Yes PACK & BIANES VISION - EASTLAKE 890 EASTLAKE PKWY STE 102 CHULA VISTA, CA 91914-4521 <i>Phone:</i> (619) 216-3937 <i>Fax:</i> (619) 216-9041 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> No <i>Hours:</i> TU,W,F 9AM-6PM, TH 10AM-6PM, SA 8:30AM-1PM</p>	<p>Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> Yes <i>Hours:</i> M,W-F 8:30AM-5:30PM, TU 8:30AM-5PM, SA 8:30AM-1PM</p>
<p>PACK, ALYSSA, OD <i>Provider Gender:</i> Female <i>License number:</i> 34608 <i>NPI:</i> 1750991220 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> Yes PACK & BIANES VISION - TERRA NOVA 374 E H ST STE 1708 CHULA VISTA, CA 91910-7492 <i>Phone:</i> (619) 425-7990 <i>Fax:</i> (619) 425-7992 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> Yes <i>Hours:</i> M,W-F 8:30AM-5:30PM, TU 8:30AM-5PM, SA 8:30AM-1PM</p>	<p>PACK, JOHN C , OD <i>Provider Gender:</i> Male <i>License number:</i> 9684 <i>NPI:</i> 1598723587 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> Yes PACK & BIANES VISION - TERRA NOVA 374 E H ST STE 1708 CHULA VISTA, CA 91910-7492 <i>Phone:</i> (619) 425-7990 <i>Fax:</i> (619) 425-7992 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> No <i>Hours:</i> TU,W,F 9AM-6PM, TH 10AM-6PM, SA 8:30AM-1PM</p>	<p>PACK, JOHN C , OD <i>Provider Gender:</i> Male <i>License number:</i> 9684 <i>NPI:</i> 1598723587 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> Yes PACK & BIANES VISION - EASTLAKE 890 EASTLAKE PKWY STE 102 CHULA VISTA, CA 91914-4521 <i>Phone:</i> (619) 216-3937 <i>Fax:</i> (619) 216-9041 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> No <i>Hours:</i> TU,W,F 9AM-6PM, TH 10AM-6PM, SA 8:30AM-1PM</p>
<p>PACK, ALYSSA, OD <i>Provider Gender:</i> Female <i>License number:</i> 34608 <i>NPI:</i> 1750991220 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i></p>	<p><i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender</p>	<p>PEREZ, JUDI A , OD <i>Provider Gender:</i> Female <i>License number:</i> 13210</p>

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

<p>NPI: 1477616746 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> Yes PACK & BIANES VISION - TERRA NOVA 374 E H ST STE 1708 CHULA VISTA, CA 91910-7492 <i>Phone:</i> (619) 425-7990 <i>Fax:</i> (619) 425-7992 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> Yes <i>Hours:</i> M,W-F 8:30AM-5:30PM, TU 8:30AM-5PM, SA 8:30AM-1PM</p>	<p><i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> No <i>Hours:</i> TU,W,F 9AM-6PM, TH 10AM-6PM, SA 8:30AM-1PM</p>	<p>7AM-5PM TAN, JOCELYN, OD <i>Provider Gender:</i> Female <i>License number:</i> 33985 <i>NPI:</i> 1053724112 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> Yes OTAY RANCH EYEWORKS OPTOMETRY 1741 EASTLAKE PKWY STE 101 CHULA VISTA, CA 91915-2032 <i>Phone:</i> (619) 421-6600 <i>Fax:</i> (619) 421-6006 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Spanish <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> No <i>Hours:</i> SU 10AM-4PM, M-F 9AM-7PM, SA 9AM-5PM</p>
<p>PEREZ, JUDI A , OD <i>Provider Gender:</i> Female <i>License number:</i> 13210 <i>NPI:</i> 1477616746 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> Yes PACK & BIANES VISION - EASTLAKE 890 EASTLAKE PKWY STE 102 CHULA VISTA, CA 91914-4521 <i>Phone:</i> (619) 216-3937 <i>Fax:</i> (619) 216-9041 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes</p>	<p>SCOVILL, ALEXANDRA, OD <i>Provider Gender:</i> Female <i>License number:</i> 33711 <i>NPI:</i> 1184146094 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> Yes CASTILLEJOS EYE INSTITUTE MED GROUP 342 F ST CHULA VISTA, CA 91910-2625 <i>Phone:</i> (619) 422-1471 <i>Fax:</i> (619) 271-7044 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> French, Portuguese, Spanish, Tagalog, Vietnamese <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> Yes <i>Hours:</i> M,W,F 8AM-5PM, TU,TH</p>	<p>THACH, QUEEN, OD <i>Provider Gender:</i> Female <i>License number:</i> 33685 <i>NPI:</i> 1053841478 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> Yes PACK & BIANES VISION - TERRA NOVA 374 E H ST STE 1708 CHULA VISTA, CA 91910-7492</p>

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

Phone: (619) 425-7990
 Fax: (619) 425-7992
 After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Public transportation (within 1/2
 mile from Site): Yes
 Hours: M,W-F 8:30AM-5:30PM,
 TU 8:30AM-5PM, SA
 8:30AM-1PM

THAI, EMILY, OD

Provider Gender: Female
 License number: 34649
 NPI: 1720699432
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: Yes
 OTAY RANCH EYEWORKS
 OPTOMETRY
 1741 EASTLAKE PKWY STE
 101
 CHULA VISTA, CA 91915-2032
 Phone: (619) 421-6600
 Fax: (619) 421-6006
 After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi,
 Spanish
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for

Accessibility information
 Public transportation (within 1/2
 mile from Site): No
 Hours: SU 10AM-4PM, M-F
 9AM-7PM, SA 9AM-5PM

TOUBIA, ELIAS, OD

Provider Gender: Male
 License number: 33758
 NPI: 1740701481
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Arabic
 Cultural Competency: Yes
 OTAY RANCH EYEWORKS
 OPTOMETRY
 1741 EASTLAKE PKWY STE
 101
 CHULA VISTA, CA 91915-2032
 Phone: (619) 421-6600
 Fax: (619) 421-6006

After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi,
 Spanish
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Public transportation (within 1/2
 mile from Site): No
 Hours: SU 10AM-4PM, M-F
 9AM-7PM, SA 9AM-5PM

TRAJANO, CHARMINE D , OD

Provider Gender: Female
 License number: 14993
 NPI: 1699183673
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Tagalog

Cultural Competency: Yes
 PACK & BIANES VISION -
 EASTLAKE
 890 EASTLAKE PKWY STE 102
 CHULA VISTA, CA 91914-4521
 Phone: (619) 216-3937
 Fax: (619) 216-9041
 After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Public transportation (within 1/2
 mile from Site): No
 Hours: TU,W,F 9AM-6PM, TH
 10AM-6PM, SA 8:30AM-1PM

TRAJANO, CHARMINE D , OD

Provider Gender: Female
 License number: 14993
 NPI: 1699183673
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Tagalog
 Cultural Competency: Yes
 PACK & BIANES VISION -
 TERRA NOVA
 374 E H ST STE 1708
 CHULA VISTA, CA 91910-7492
 Phone: (619) 425-7990
 Fax: (619) 425-7992
 After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish
 Min/Max Age:
 Gender Restriction: No Gender

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
*Public transportation (within 1/2
 mile from Site):* Yes
Hours: M,W-F 8:30AM-5:30PM,
 TU 8:30AM-5PM, SA
 8:30AM-1PM

VILLA, ANGELICA M , OD
Provider Gender: Female
License number: 10561
NPI: 1962544965
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: Yes
 VILLA OPTOMETRY INC
 531 TELEGRAPH CANYON RD
 CHULA VISTA, CA 91910-6436
Phone: (619) 482-2020
Fax: (619) 482-2671
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
*Public transportation (within 1/2
 mile from Site):* Yes
Hours: M-F 9AM-6PM, SA
 9AM-1PM

CORONADO

KATZMAN, LEE R , MD
Provider Gender: Male

License number: A135673
NPI: 1912297284
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
 ALVARADO EYE ASSOCIATES
 MED CLINIC INC
 801 ORANGE AVE STE 204
 CORONADO, CA 92118-2663
Phone: (619) 437-4406
Fax: (619) 522-7983
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
*Public transportation (within 1/2
 mile from Site):* No
Hours: M,W,TH 9AM-4:30PM, TU
 9AM-3PM

EL CAJON

AOTO, KIM N , OD
Provider Gender: Female
License number: 14524
NPI: 1780935650
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish, Vietnamese
Cultural Competency: Yes
 WEST COAST EYE CARE
 450 FLETCHER PKWY STE 112
 EL CAJON, CA 92020-2520
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
*Public transportation (within 1/2
 mile from Site):* No
Hours: M-F 8:30AM-6PM

AVALLONE, THOMAS, MD
Provider Gender: Male
License number: A147199
NPI: 1679865950
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
 ACUITY EYE GROUP
 225 W MADISON AVE STE 1
 EL CAJON, CA 92020-3454
Phone: (619) 442-0844
Fax: (619) 442-7399
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
*Public transportation (within 1/2
 mile from Site):* Yes
Hours: M-F 8AM-5PM

AVALLONE, THOMAS, MD
Provider Gender: Male
License number: A147199
NPI: 1679865950
Provider English Spoken: Yes

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

Provider Language(s) Spoken: WEST COAST EYE CARE
Cultural Competency: Yes
450 FLETCHER PKWY STE 112
EL CAJON, CA 92020-2520
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8:30AM-6PM

BERGMARK, JAMIE L , OD
Provider Gender: Female
License number: 33657
NPI: 1669920757
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
MAIN STREET OPTOMETRY
303 E MAIN ST
EL CAJON, CA 92020-3913
Phone: (619) 444-1153
Fax: (619) 444-1154
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information

Public transportation (within 1/2 mile from Site): Yes
Hours:
BINDER, NICHOLAS, MD
Provider Gender: Male
License number: A124698
NPI: 1306076716
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
WEST COAST EYE CARE
450 FLETCHER PKWY STE 112
EL CAJON, CA 92020-2520
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8:30AM-6PM

BUTLER, KIM J , OD
Provider Gender: Male
License number: 6405
NPI: 1467444844
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
KIM J BUTLER OD
1273 BROADWAY
EL CAJON, CA 92021-4902
Phone: (619) 579-2345
Fax: (619) 579-0876
After Hours Phone:
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 9AM-5PM, SA 9AM-12PM

CHANG, TOM S , MD
Provider Gender: Male
License number: A69909
NPI: 1609848969
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
ACUITY EYE GROUP
225 W MADISON AVE STE 1
EL CAJON, CA 92020-3454
Phone: (619) 442-0844
Fax: (619) 442-7399
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 8AM-5PM

DEAN, MOENA, OD
Provider Gender: Female
License number: 33955

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

NPI: 1265927578
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: Yes
 ACUITY EYE GROUP
 225 W MADISON AVE STE 1
 EL CAJON, CA 92020-3454
 Phone: (619) 442-0844
 Fax: (619) 442-7399
 After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Public transportation (within 1/2
 mile from Site): Yes
 Hours: M-F 8AM-5PM

DEAN, MOENA, OD
 Provider Gender: Female
 License number: 33955
 NPI: 1265927578
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: Yes
 WEST COAST EYE CARE
 450 FLETCHER PKWY STE 112
 EL CAJON, CA 92020-2520
 Phone: (619) 440-5400
 Fax: (619) 440-0239
 After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):

No
 Please contact provider for
 Accessibility information
 Public transportation (within 1/2
 mile from Site): No
 Hours: M-F 8:30AM-6PM

DYER, SHARON M , OD
 Provider Gender: Female
 License number: 33450
 NPI: 1063866887
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: Yes
 WEST COAST EYE CARE
 450 FLETCHER PKWY STE 112
 EL CAJON, CA 92020-2520
 Phone: (619) 440-5400
 Fax: (619) 440-0239
 After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Public transportation (within 1/2
 mile from Site): No
 Hours: M-F 8:30AM-6PM

HSU, CHRISTOPHER, MD
 Provider Gender: Male
 License number: A65973
 NPI: 1336167618
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: Yes
 ACUITY EYE GROUP
 225 W MADISON AVE STE 1
 EL CAJON, CA 92020-3454

Phone: (619) 442-0844
 Fax: (619) 442-7399
 After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Public transportation (within 1/2
 mile from Site): Yes
 Hours: M-F 8AM-5PM

KATZMAN, BARRY, MD
 Provider Gender: Male
 License number: A34834
 NPI: 1760473797
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: Yes
 WEST COAST EYE CARE
 450 FLETCHER PKWY STE 112
 EL CAJON, CA 92020-2520
 Phone: (619) 440-5400
 Fax: (619) 440-0239
 After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Public transportation (within 1/2
 mile from Site): No
 Hours: M-F 8:30AM-6PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

LEARN, RICHARD N , MD

Provider Gender: Male
License number: A19818
NPI: 1801804653
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
ACUITY EYE GROUP
225 W MADISON AVE STE 1
EL CAJON, CA 92020-3454
Phone: (619) 442-0844
Fax: (619) 442-7399
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* Yes
Hours: M-F 8AM-5PM

MCGRAW, JOSEPH, MD

Provider Gender: Male
License number: A155228
NPI: 1588624852
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
WEST COAST EYE CARE
450 FLETCHER PKWY STE 112
EL CAJON, CA 92020-2520
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

Min/Max Age:

Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* No
Hours: M-F 8:30AM-6PM

MCMURREN, BRITTANY J , OD

Provider Gender: Female
License number: 14824
NPI: 1104243815
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
WERNER OPTOMETRY
2650 JAMACHA RD STE 155
EL CAJON, CA 92019-4319
Phone: (619) 670-6296
Fax: (619) 670-8852
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Italian,
Spanish
Min/Max Age:

Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* Yes
Hours: M,W,TH 9AM-5PM, TU
10AM-5PM, F 8AM-2PM

MILLER, DOUGLAS G , MD

Provider Gender: Male
License number: G52627
NPI: 1982636031
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: Yes
WEST COAST EYE CARE
450 FLETCHER PKWY STE 112
EL CAJON, CA 92020-2520
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* No
Hours: M-F 8:30AM-6PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male
License number: A125435
NPI: 1235366782
Provider English Spoken: Yes
Provider Language(s) Spoken:
Indonesian, Spanish
Cultural Competency: Yes
WEST COAST EYE CARE
450 FLETCHER PKWY STE 112
EL CAJON, CA 92020-2520
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* No
Hours: M-F 8:30AM-6PM

NASTASOIU, ANDREEA, OD

Provider Gender: Female
License number: 34292
NPI: 1487209268
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
EYESTYLES OF RANCHO SAN
DIEGO

2907 JAMACHA RD STE A
EL CAJON, CA 92019-4342
Phone: (619) 660-0272

Fax: (619) 660-0310

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Arabic, Spanish

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* No
Hours: M-F 9AM-6PM, SA
9AM-5PM

PATEL, GITANE, MD

Provider Gender: Male

License number: A108603

NPI: 1710171434

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: Yes

WEST COAST EYE CARE

450 FLETCHER PKWY STE 112

EL CAJON, CA 92020-2520

Phone: (619) 440-5400

Fax: (619) 440-0239

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for

Accessibility information

*Public transportation (within 1/2
mile from Site):* No

Hours: M-F 8:30AM-6PM

PATEL, SARJAN H , MD

Provider Gender: Male

License number: A114976

NPI: 1316199326

Provider English Spoken: Yes

Provider Language(s) Spoken:

Gujarati, Hindi, Spanish

Cultural Competency: Yes

WEST COAST EYE CARE

450 FLETCHER PKWY STE 112

EL CAJON, CA 92020-2520

Phone: (619) 440-5400

Fax: (619) 440-0239

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for

Accessibility information

*Public transportation (within 1/2
mile from Site):* No

Hours: M-F 8:30AM-6PM

PRABHU, SUJATA P , MD

Provider Gender: Female

License number: A115965

NPI: 1982872552

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: Yes

WEST COAST EYE CARE

450 FLETCHER PKWY STE 112

EL CAJON, CA 92020-2520

Phone: (619) 440-5400

Fax: (619) 440-0239

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

*Public transportation (within 1/2
mile from Site):* No

Hours: M-F 8:30AM-6PM

SORIANO, CATHERINE F , OD

Provider Gender: Female

License number: 13109

NPI: 1508919085

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Tagalog

Cultural Competency: Yes

WEST COAST EYE CARE

450 FLETCHER PKWY STE 112

EL CAJON, CA 92020-2520

Phone: (619) 440-5400

Fax: (619) 440-0239

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8:30AM-6PM

WEISS, LISA M , OD

Provider Gender: Female
License number: 11405
NPI: 1790867091
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: Yes
 MAIN STREET OPTOMETRY
 303 E MAIN ST
 EL CAJON, CA 92020-3913
Phone: (619) 444-1153
Fax: (619) 444-1154
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours:

WERNER, R AARON, OD

Provider Gender: Male
License number: 13478
NPI: 1821259458
Provider English Spoken: Yes
Provider Language(s) Spoken:

Spanish
Cultural Competency: Yes
 WERNER OPTOMETRY
 2650 JAMACHA RD STE 155
 EL CAJON, CA 92019-4319
Phone: (619) 670-6296
Fax: (619) 670-8852
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Italian, Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M,W,TH 9AM-5PM, TU 10AM-5PM, F 8AM-2PM

WERNER, REX A , OD

Provider Gender: Male
License number: 9378
NPI: 1891760716
Provider English Spoken: Yes
Provider Language(s) Spoken: Italian, Spanish
Cultural Competency: Yes
 WERNER OPTOMETRY
 2650 JAMACHA RD STE 155
 EL CAJON, CA 92019-4319
Phone: (619) 670-6296
Fax: (619) 670-8852
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Italian, Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M,W,TH 9AM-5PM, TU 10AM-5PM, F 8AM-2PM

ZVANUT, DONALD R , OD

Provider Gender: Male
License number: 8642
NPI: 1336211804
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: Yes
 ACUITY EYE GROUP
 225 W MADISON AVE STE 1
 EL CAJON, CA 92020-3454
Phone: (619) 442-0844
Fax: (619) 442-7399
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 8AM-5PM

ENCINITAS

ADAMS, MONA N , OD

Provider Gender: Female
License number: 14457
NPI: 1942564521
Provider English Spoken: Yes
Provider Language(s) Spoken:

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

Cultural Competency: Yes
**RADY CHILDRENS HOSPITAL
 ENCINITAS**
 477 N EL CAMINO REAL STE
 D302
 ENCINITAS, CA 92024-1374
Phone: (858) 309-7702
Fax: (858) 966-7403
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
*Public transportation (within 1/2
 mile from Site):* No
Hours: M-F 8AM-5PM

AOTO, KIM N , OD

Provider Gender: Female
License number: 14524
NPI: 1780935650
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish, Vietnamese
Cultural Competency: Yes
ACUITY EYE GROUP
 320 SANTA FE DR STE 104
 ENCINITAS, CA 92024-5139
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):

No
 Please contact provider for
 Accessibility information
*Public transportation (within 1/2
 mile from Site):* Yes
Hours: M-F 8AM-5PM

AVALLONE, THOMAS, MD

Provider Gender: Male
License number: A147199
NPI: 1679865950
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
ACUITY EYE GROUP
 320 SANTA FE DR STE 104
 ENCINITAS, CA 92024-5139
Phone: (760) 943-7141
Fax: (760) 943-0371

After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
*Public transportation (within 1/2
 mile from Site):* Yes
Hours: M-F 8AM-5PM

BANSAL, PREETI, MD

Provider Gender: Female
License number: A90890
NPI: 1871664631
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: Yes
**RADY CHILDRENS HOSPITAL
 ENCINITAS**

477 N EL CAMINO REAL STE
 D302
 ENCINITAS, CA 92024-1374
Phone: (858) 309-7702
Fax: (858) 966-7403
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
*Public transportation (within 1/2
 mile from Site):* No
Hours: M-F 8AM-5PM

BHATIA, SHAGUN, MD

Provider Gender: Female
License number: A154902
NPI: 1104237353
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
**RADY CHILDRENS HOSPITAL
 ENCINITAS**
 477 N EL CAMINO REAL STE
 D302
 ENCINITAS, CA 92024-1374
Phone: (858) 309-7702
Fax: (858) 966-7403
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

Public transportation (within 1/2 mile from Site): No
Hours: M-F 8AM-5PM

CHANG, TOM S , MD

Provider Gender: Male
License number: A69909
NPI: 1609848969
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: Yes
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024-5139
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 8AM-5PM

DEAN, MOENA, OD

Provider Gender: Female
License number: 33955
NPI: 1265927578
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: Yes
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024-5139
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone:

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 8AM-5PM

DUONG, KIM S , OD

Provider Gender: Female
License number: 34222
NPI: 1114448651
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Yes
RADY CHILDRENS HOSPITAL
ENCINITAS
477 N EL CAMINO REAL STE D302
ENCINITAS, CA 92024-1374
Phone: (858) 309-7702
Fax: (858) 966-7403
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8AM-5PM

DYER, SHARON M , OD

Provider Gender: Female
License number: 33450
NPI: 1063866887
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: Yes
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024-5139
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 8AM-5PM

HUDSON, HENRY L , MD

Provider Gender: Male
License number: G76091
NPI: 1851349195
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: Yes
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024-5139
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

Spanish <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> Yes <i>Hours:</i> M-F 8AM-5PM	<i>NPI:</i> 1588624852 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: Yes ACUITY EYE GROUP 320 SANTA FE DR STE 104 ENCINITAS, CA 92024-5139 <i>Phone:</i> (760) 943-7141 <i>Fax:</i> (760) 943-0371 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> Yes <i>Hours:</i> M-F 8AM-5PM	Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> No <i>Hours:</i> M-F 8AM-5PM
LEE, JASON, OD <i>Provider Gender:</i> Male <i>License number:</i> 14881 <i>NPI:</i> 1679985584 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> Yes RADY CHILDRENS HOSPITAL ENCINITAS 477 N EL CAMINO REAL STE D302 ENCINITAS, CA 92024-1374 <i>Phone:</i> (858) 309-7702 <i>Fax:</i> (858) 966-7403 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> No <i>Hours:</i> M-F 8AM-5PM	MOLL, ANGELA, MD <i>Provider Gender:</i> Female <i>License number:</i> A105472 <i>NPI:</i> 1861648602 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: Yes RADY CHILDRENS HOSPITAL ENCINITAS 477 N EL CAMINO REAL STE D302 ENCINITAS, CA 92024-1374 <i>Phone:</i> (858) 309-7702 <i>Fax:</i> (858) 966-7403 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender	MORRISON REYES, JOSHUA, MD <i>Provider Gender:</i> Male <i>License number:</i> A125435 <i>NPI:</i> 1235366782 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Indonesian, Spanish <i>Cultural Competency:</i> Yes ACUITY EYE GROUP 320 SANTA FE DR STE 104 ENCINITAS, CA 92024-5139 <i>Phone:</i> (760) 943-7141 <i>Fax:</i> (760) 943-0371 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> Yes <i>Hours:</i> M-F 8AM-5PM
MCGRAW, JOSEPH, MD <i>Provider Gender:</i> Male <i>License number:</i> A155228	<i>Gender Restriction:</i> No Gender	O HALLORAN, HENRY, MD <i>Provider Gender:</i> Male <i>License number:</i> A73282 <i>NPI:</i> 1235287947 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

<p>German, Spanish <i>Cultural Competency:</i> Yes RADY CHILDRENS HOSPITAL ENCINITAS 477 N EL CAMINO REAL STE D302 ENCINITAS, CA 92024-1374 <i>Phone:</i> (858) 309-7702 <i>Fax:</i> (858) 966-7403 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> No <i>Hours:</i> M-F 8AM-5PM</p>	<p>No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> Yes <i>Hours:</i> M-F 8AM-5PM</p> <p>SCHER, COLIN A , MD <i>Provider Gender:</i> Male <i>License number:</i> A42700 <i>NPI:</i> 1396816153 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> Yes RADY CHILDRENS HOSPITAL ENCINITAS 477 N EL CAMINO REAL STE D302 ENCINITAS, CA 92024-1374 <i>Phone:</i> (858) 309-7702 <i>Fax:</i> (858) 966-7403 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> No <i>Hours:</i> M-F 8AM-5PM</p>	<p>320 SANTA FE DR STE 104 ENCINITAS, CA 92024-5139 <i>Phone:</i> (760) 943-7141 <i>Fax:</i> (760) 943-0371 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> Yes <i>Hours:</i> M-F 8AM-5PM</p> <p>SORIANO, CATHERINE F , OD <i>Provider Gender:</i> Female <i>License number:</i> 13109 <i>NPI:</i> 1508919085 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Tagalog <i>Cultural Competency:</i> Yes ACUITY EYE GROUP 320 SANTA FE DR STE 104 ENCINITAS, CA 92024-5139 <i>Phone:</i> (760) 943-7141 <i>Fax:</i> (760) 943-0371 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information</p>
<p>SAMUEL, MICHAEL A , MD <i>Provider Gender:</i> Male <i>License number:</i> A83237 <i>NPI:</i> 1730175670 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> Yes ACUITY EYE GROUP 320 SANTA FE DR STE 104 ENCINITAS, CA 92024-5139 <i>Phone:</i> (760) 943-7141 <i>Fax:</i> (760) 943-0371 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i></p>	<p>SCOTTI, FRANK A , MD <i>Provider Gender:</i> Male <i>License number:</i> G40698 <i>NPI:</i> 1801824313 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> Yes ACUITY EYE GROUP</p>	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 8AM-5PM

TRAN, THAO P , OD

Provider Gender: Female
License number: 12867
NPI: 1962581421
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Yes
KINDERSPECS-GOOD EYES OPTOMETRY
267 N EL CAMINO REAL STE D ENCINITAS, CA 92024-5366
Phone: (760) 753-3665
Fax: (408) 969-1653
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Vietnamese
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-TH 10AM-4:30PM, F 11AM-4PM

VINH, JOHN B , OD

Provider Gender: Male
License number: 14177
NPI: 1003102724
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Yes
ACUITY EYE GROUP
320 SANTA FE DR STE 104 ENCINITAS, CA 92024-5139

Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 8AM-5PM

ESCONDIDO

ADAMS, MONA N , OD

Provider Gender: Female
License number: 14457
NPI: 1942564521
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: Yes
RADY CHILDRENS SPECIALISTS
2125 CITRACADO PKWY STE 200 ESCONDIDO, CA 92029-4159
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information

Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 8:30AM-4:30PM

AOTO, KIM N , OD

Provider Gender: Female
License number: 14524
NPI: 1780935650
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: Yes
WEST COAST EYE CARE
830 W VALLEY PKWY STE 300 ESCONDIDO, CA 92025-2529
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Vietnamese
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M 8:30AM-5PM, TU,TH 9AM-5PM, W 10AM-6PM, F 7:30AM-3:30PM

AVALLONE, THOMAS, MD

Provider Gender: Male
License number: A147199
NPI: 1679865950
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: Yes
WEST COAST EYE CARE
830 W VALLEY PKWY STE 300 ESCONDIDO, CA 92025-2529

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): No
Hours: M 8:30AM-5PM, TU,TH
9AM-5PM, W 10AM-6PM, F
7:30AM-3:30PM

BANSAL, PREETI, MD
Provider Gender: Female
License number: A90890
NPI: 1871664631
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: Yes
RADY CHILDRENS
SPECIALISTS
2125 CITRACADO PKWY STE
200
ESCONDIDO, CA 92029-4159
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information

Public transportation (within 1/2
mile from Site): Yes
Hours: M-F 8:30AM-4:30PM

BHATIA, SHAGUN, MD
Provider Gender: Female
License number: A154902
NPI: 1104237353
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
RADY CHILDRENS
SPECIALISTS
2125 CITRACADO PKWY STE
200
ESCONDIDO, CA 92029-4159
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): Yes
Hours: M-F 8:30AM-4:30PM

BINDER, NICHOLAS, MD
Provider Gender: Male
License number: A124698
NPI: 1306076716
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
WEST COAST EYE CARE
830 W VALLEY PKWY STE 300
ESCONDIDO, CA 92025-2529

Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): No
Hours: M 8:30AM-5PM, TU,TH
9AM-5PM, W 10AM-6PM, F
7:30AM-3:30PM

DEAN, MOENA, OD
Provider Gender: Female
License number: 33955
NPI: 1265927578
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
WEST COAST EYE CARE
830 W VALLEY PKWY STE 300
ESCONDIDO, CA 92025-2529
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): No
Hours: M 8:30AM-5PM, TU,TH

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

9AM-5PM, W 10AM-6PM, F
7:30AM-3:30PM

DUONG, KIM S , OD

Provider Gender: Female
License number: 34222
NPI: 1114448651
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Yes
RADY CHILDRENS
SPECIALISTS
2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029-4159
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 8:30AM-4:30PM

DYER, SHARON M , OD

Provider Gender: Female
License number: 33450
NPI: 1063866887
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
WEST COAST EYE CARE
830 W VALLEY PKWY STE 300
ESCONDIDO, CA 92025-2529

Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M 8:30AM-5PM, TU,TH 9AM-5PM, W 10AM-6PM, F 7:30AM-3:30PM

HUDSON, HENRY L , MD

Provider Gender: Male
License number: G76091
NPI: 1851349195
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
WEST COAST EYE CARE
830 W VALLEY PKWY STE 300
ESCONDIDO, CA 92025-2529
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M 8:30AM-5PM, TU,TH

9AM-5PM, W 10AM-6PM, F
7:30AM-3:30PM

KATZMAN, BARRY, MD

Provider Gender: Male
License number: A34834
NPI: 1760473797
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: Yes
WEST COAST EYE CARE
830 W VALLEY PKWY STE 300
ESCONDIDO, CA 92025-2529
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M 8:30AM-5PM, TU,TH 9AM-5PM, W 10AM-6PM, F 7:30AM-3:30PM

LEE, JASON, OD

Provider Gender: Male
License number: 14881
NPI: 1679985584
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: Yes
RADY CHILDRENS
SPECIALISTS
2125 CITRACADO PKWY STE 200

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

ESCONDIDO, CA 92029-4159
Phone: (760) 755-7600
Fax: (760) 755-7699

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Public transportation (within 1/2 mile from Site): Yes

Hours: M-F 8:30AM-4:30PM

LE, TAM T , OD

Provider Gender: Female

License number: 12951

NPI: 1235268707

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Vietnamese

Cultural Competency: Yes

TAM T LE OD INC

1711 E VALLEY PKWY STE 109

ESCONDIDO, CA 92027-2521

Phone: (760) 737-6064

Fax: (760) 737-6064

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Vietnamese

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Public transportation (within 1/2 mile from Site): Yes

Hours: M-F 9AM-5:30PM, SA 10AM-2PM

MCGRAW, JOSEPH, MD

Provider Gender: Male

License number: A155228

NPI: 1588624852

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: Yes

WEST COAST EYE CARE

830 W VALLEY PKWY STE 300

ESCONDIDO, CA 92025-2529

Phone: (760) 743-5872

Fax: (760) 743-5879

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Public transportation (within 1/2 mile from Site): No

Hours: M 8:30AM-5PM, TU,TH 9AM-5PM, W 10AM-6PM, F 7:30AM-3:30PM

MILLER, DOUGLAS G , MD

Provider Gender: Male

License number: G52627

NPI: 1982636031

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: Yes

WEST COAST EYE CARE

830 W VALLEY PKWY STE 300

ESCONDIDO, CA 92025-2529

Phone: (760) 743-5872

Fax: (760) 743-5879

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Public transportation (within 1/2 mile from Site): No

Hours: M 8:30AM-5PM, TU,TH 9AM-5PM, W 10AM-6PM, F 7:30AM-3:30PM

MOLL, ANGELA, MD

Provider Gender: Female

License number: A105472

NPI: 1861648602

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: Yes

RADY CHILDRENS

SPECIALISTS

2125 CITRACADO PKWY STE 200

ESCONDIDO, CA 92029-4159

Phone: (760) 755-7600

Fax: (760) 755-7699

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Public transportation (within 1/2 mile from Site): Yes

Hours: M-F 8:30AM-4:30PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

MORRISON REYES, JOSHUA, MD

Provider Gender: Male
License number: A125435
NPI: 1235366782
Provider English Spoken: Yes
Provider Language(s) Spoken: Indonesian, Spanish
Cultural Competency: Yes
WEST COAST EYE CARE
830 W VALLEY PKWY STE 300
ESCONDIDO, CA 92025-2529
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M 8:30AM-5PM, TU,TH 9AM-5PM, W 10AM-6PM, F 7:30AM-3:30PM

MOVAGHAR, MANSOOR, MD

Provider Gender: Male
License number: A100897
NPI: 1497792220
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
RADY CHILDRENS SPECIALISTS
2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029-4159

Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 8:30AM-4:30PM

O HALLORAN, HENRY, MD

Provider Gender: Male
License number: A73282
NPI: 1235287947
Provider English Spoken: Yes
Provider Language(s) Spoken: German, Spanish
Cultural Competency: Yes
RADY CHILDRENS SPECIALISTS
2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029-4159
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes

Hours: M-F 8:30AM-4:30PM

PATEL, GITANE, MD

Provider Gender: Male
License number: A108603
NPI: 1710171434
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
WEST COAST EYE CARE
830 W VALLEY PKWY STE 300
ESCONDIDO, CA 92025-2529
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M 8:30AM-5PM, TU,TH 9AM-5PM, W 10AM-6PM, F 7:30AM-3:30PM

PATEL, SARJAN H, MD

Provider Gender: Male
License number: A114976
NPI: 1316199326
Provider English Spoken: Yes
Provider Language(s) Spoken: Gujarati, Hindi, Spanish
Cultural Competency: Yes
WEST COAST EYE CARE
830 W VALLEY PKWY STE 300
ESCONDIDO, CA 92025-2529
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone:

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M 8:30AM-5PM, TU,TH 9AM-5PM, W 10AM-6PM, F 7:30AM-3:30PM

PRABHU, SUJATA P , MD
Provider Gender: Female
License number: A115965
NPI: 1982872552
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: Yes
 WEST COAST EYE CARE
 830 W VALLEY PKWY STE 300
 ESCONDIDO, CA 92025-2529
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M 8:30AM-5PM, TU,TH 9AM-5PM, W 10AM-6PM, F 7:30AM-3:30PM

SCHER, COLIN A , MD
Provider Gender: Male
License number: A42700
NPI: 1396816153
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: Yes
 RADY CHILDRENS SPECIALISTS
 2125 CITRACADO PKWY STE 200
 ESCONDIDO, CA 92029-4159
Phone: (760) 755-7600
Fax: (760) 755-7699

After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 8:30AM-4:30PM

SORIANO, CATHERINE F , OD
Provider Gender: Female
License number: 13109
NPI: 1508919085
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: Yes
 WEST COAST EYE CARE
 830 W VALLEY PKWY STE 300
 ESCONDIDO, CA 92025-2529
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone:

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M 8:30AM-5PM, TU,TH 9AM-5PM, W 10AM-6PM, F 7:30AM-3:30PM

THACH, TERILYN T , OD
Provider Gender: Female
License number: 11456
NPI: 1710030861
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Yes
 INSIGHT VISION OPTOMETRY
 2419 E VALLEY PKWY
 ESCONDIDO, CA 92027-2932
Phone: (760) 738-9931
Fax: (760) 738-9933
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Vietnamese
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M,TU,F 9:30AM-5PM, TH 10AM-5:30PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

TONNU, ANH T , OD

Provider Gender: Female
License number: 11318
NPI: 1679521280
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Yes
WEST COAST EYE CARE
830 W VALLEY PKWY STE 300
ESCONDIDO, CA 92025-2529
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M 8:30AM-5PM, TU,TH 9AM-5PM, W 10AM-6PM, F 7:30AM-3:30PM

VERRET, ERIC, OD

Provider Gender: Male
License number: 11401
NPI: 1194891853
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish
Cultural Competency: Yes
ESCONDIDO EYECARE
613 E GRAND AVE
ESCONDIDO, CA 92025-4402
Phone: (760) 747-7979
Fax: (760) 747-7799
After Hours Phone:

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Arabic, French, Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-TH 9AM-6PM

WILLEY, MELISSA M , OD

Provider Gender: Female
License number: 14415
NPI: 1679836928
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
WEST COAST EYE CARE
830 W VALLEY PKWY STE 300
ESCONDIDO, CA 92025-2529
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M 8:30AM-5PM, TU,TH 9AM-5PM, W 10AM-6PM, F 7:30AM-3:30PM

CLEMENTS, DOUGLAS H , MD

Provider Gender: Male
License number: G19289
NPI: 1750358784
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: Yes
INLAND EYE SPECIALISTS
521 E ELDER ST STE 102
FALLBROOK, CA 92028-3082
Phone: (760) 728-5728
Fax: (760) 728-5934
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8AM-5PM

COLEMAN, BROOKE A , OD

Provider Gender: Female
License number: 13551
NPI: 1700040748
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
INLAND EYE SPECIALISTS
521 E ELDER ST STE 102
FALLBROOK, CA 92028-3082
Phone: (760) 728-5728
Fax: (760) 728-5934
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

FALLBROOK

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

Spanish
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Public transportation (within 1/2 mile from Site): No
 Hours: M-F 8AM-5PM

CONNOR, JEFFREY, OD

Provider Gender: Male
 License number: 33683
 NPI: 1063968980
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: Yes
 INLAND EYE SPECIALISTS
 521 E ELDER ST STE 102
 FALLBROOK, CA 92028-3082
 Phone: (760) 728-5728
 Fax: (760) 728-5934
 After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Public transportation (within 1/2 mile from Site): No
 Hours: M-F 8AM-5PM

COOPER, MICHAEL J , OD

Provider Gender: Male
 License number: 10476
 NPI: 1164586244

Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: Yes
 INLAND EYE SPECIALISTS
 521 E ELDER ST STE 102
 FALLBROOK, CA 92028-3082
 Phone: (760) 728-5728
 Fax: (760) 728-5934
 After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Public transportation (within 1/2 mile from Site): No
 Hours: M-F 8AM-5PM

GEORGE, BRUCE D , OD

Provider Gender: Male
 License number: 7696
 NPI: 1356414551
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Korean, Spanish
 Cultural Competency: Yes
 BRUCE D GEORGE OD
 1102 S MAIN AVE
 FALLBROOK, CA 92028-3325
 Phone: (760) 723-8417
 Fax: (760) 867-2222
 After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish
 Min/Max Age:
 Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Public transportation (within 1/2 mile from Site): Yes
 Hours: M,TH,F 9AM-5PM, TU,W 9AM-6PM, SA 9AM-1PM

TEW, JOHN G , MD

Provider Gender: Male
 License number: A83206
 NPI: 1174593354
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Portuguese
 Cultural Competency: Yes
 INLAND EYE SPECIALISTS
 521 E ELDER ST STE 102
 FALLBROOK, CA 92028-3082
 Phone: (760) 728-5728
 Fax: (760) 728-5934
 After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Public transportation (within 1/2 mile from Site): No
 Hours: M-F 8AM-5PM

IMPERIAL BEACH

HANONO, ABRAHAM, OD

Provider Gender: Male
 License number: 14900
 NPI: 1356754741
 Provider English Spoken: Yes

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

Provider Language(s) Spoken: Hebrew, Spanish
Cultural Competency: Yes
IMPERIAL BEACH OPTOMETRY INC APC
 894 PALM AVE STE B
 IMPERIAL BEACH, CA
 91932-1573
Phone: (619) 424-9333
Fax: (619) 424-3356
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 9AM-6PM

HANONO, HELFON, OD
Provider Gender: Male
License number: 6681
NPI: 1619942034
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: Yes
IMPERIAL BEACH OPTOMETRY INC APC
 894 PALM AVE STE B
 IMPERIAL BEACH, CA
 91932-1573
Phone: (619) 424-9333
Fax: (619) 424-3356
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 9AM-6PM

LA JOLLA

AVALLONE, THOMAS, MD
Provider Gender: Male
License number: A147199
NPI: 1679865950
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: Yes
ACUITY EYE GROUP
 9850 GENESEE AVE STE 310
 LA JOLLA, CA 92037-1208
Phone: (858) 457-3010
Fax: (858) 457-0028
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Tagalog
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8AM-4:30PM

CODEN, DANIEL J , MD
Provider Gender: Male
License number: G57587

NPI: 1942317508
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: Yes
ACUITY EYE GROUP
 9850 GENESEE AVE STE 310
 LA JOLLA, CA 92037-1208
Phone: (858) 457-3010
Fax: (858) 457-0028
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Tagalog
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8AM-4:30PM

DEAN, MOENA, OD
Provider Gender: Female
License number: 33955
NPI: 1265927578
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: Yes
ACUITY EYE GROUP
 9850 GENESEE AVE STE 310
 LA JOLLA, CA 92037-1208
Phone: (858) 457-3010
Fax: (858) 457-0028
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Tagalog
Min/Max Age:
Gender Restriction: No Gender Restrictions

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8AM-4:30PM

DYER, SHARON M , OD

Provider Gender: Female
License number: 33450
NPI: 1063866887
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: Yes
ACUITY EYE GROUP
 9850 GENESEE AVE STE 310
 LA JOLLA, CA 92037-1208
Phone: (858) 457-3010
Fax: (858) 457-0028

After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Tagalog
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8AM-4:30PM

HOO, PAMELA A , OD

Provider Gender: Female
License number: 11033
NPI: 1275566010
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: Yes
UCSD SHILEY EYE CENTER

9415 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
Phone: (858) 534-6290
Fax: (858) 822-2948
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 7:30AM-5PM, SA 8AM-2PM

HUDSON, HENRY L , MD

Provider Gender: Male
License number: G76091
NPI: 1851349195
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: Yes
ACUITY EYE GROUP
 9850 GENESEE AVE STE 310
 LA JOLLA, CA 92037-1208
Phone: (858) 457-3010
Fax: (858) 457-0028

After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Tagalog
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2

mile from Site): No
Hours: M-F 8AM-4:30PM

HUSTANA, LARA, OD

Provider Gender: Female
License number: 11472
NPI: 1235161597
Provider English Spoken: Yes
Provider Language(s) Spoken: French
Cultural Competency: Yes
UCSD SHILEY EYE CENTER
 9415 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
Phone: (858) 534-6290
Fax: (858) 822-2948
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 7:30AM-5PM, SA 8AM-2PM

KULISCHAK, JOHN F , OD

Provider Gender: Male
License number: 9279
NPI: 1740205236
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: Yes
UCSD SHILEY EYE CENTER
 9415 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
Phone: (858) 534-6290
Fax: (858) 822-2948
After Hours Phone:

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Public transportation (within 1/2
 mile from Site): No
 Hours: M-F 7:30AM-5PM, SA
 8AM-2PM

LAM, ANNE B , OD

Provider Gender: Female
 License number: 12810
 NPI: 1174550768
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: Yes
 UCSD SHILEY EYE CENTER
 9415 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
 Phone: (858) 534-6290
 Fax: (858) 822-2948
 After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Public transportation (within 1/2
 mile from Site): No
 Hours: M-F 7:30AM-5PM, SA
 8AM-2PM

LEE, SALLY S , DO

Provider Gender: Female

License number: A8088
 NPI: 1457468514
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish, Chinese
 Cultural Competency: Yes
 SAN DIEGO EYE
 PROFESSIONALS
 9834 GENESEE AVE STE 427
 LA JOLLA, CA 92037-1264
 Phone: (858) 276-1013
 Fax: (619) 583-4288
 After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 German, Chinese
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Public transportation (within 1/2
 mile from Site): No
 Hours: M-F 10AM-5PM

LUSBY, FRANKLIN W , MD

Provider Gender: Male
 License number: G41830
 NPI: 1265526180
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: Yes
 LUSBY VISION INSTITUTE
 9850 GENESEE AVE STE 220
 LA JOLLA, CA 92037-1208
 Phone: (858) 459-6200
 Fax: (858) 459-2025
 After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Min/Max Age:

Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Public transportation (within 1/2
 mile from Site): Yes
 Hours: M-F 9AM-5PM

MIZOGUCHI, LIANNE T , OD

Provider Gender: Female
 License number: 10104
 NPI: 1619900313
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: Yes
 UCSD SHILEY EYE CENTER
 9415 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
 Phone: (858) 534-6290
 Fax: (858) 822-2948
 After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Public transportation (within 1/2
 mile from Site): No
 Hours: M-F 7:30AM-5PM, SA
 8AM-2PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male
 License number: A125435
 NPI: 1235366782
 Provider English Spoken: Yes
 Provider Language(s) Spoken:

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

Indonesian, Spanish
Cultural Competency: Yes
ACUITY EYE GROUP
 9850 GENESEE AVE STE 310
 LA JOLLA, CA 92037-1208
Phone: (858) 457-3010
Fax: (858) 457-0028
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Tagalog
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
*Public transportation (within 1/2
 mile from Site):* No
Hours: M-F 8AM-4:30PM

PERRY, ARTHUR C , MD
Provider Gender: Male
License number: C37934
NPI: 1194832725
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: Yes
ACUITY EYE GROUP
 9850 GENESEE AVE STE 310
 LA JOLLA, CA 92037-1208
Phone: (858) 457-3010
Fax: (858) 457-0028
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Tagalog
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):

No
 Please contact provider for
 Accessibility information
*Public transportation (within 1/2
 mile from Site):* No
Hours: M-F 8AM-4:30PM

PRATT, STEVEN G , MD
Provider Gender: Male
License number: G32379
NPI: 1407963044
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: Yes
ACUITY EYE GROUP
 9850 GENESEE AVE STE 310
 LA JOLLA, CA 92037-1208
Phone: (858) 457-3010
Fax: (858) 457-0028
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Tagalog
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
*Public transportation (within 1/2
 mile from Site):* No
Hours: M-F 8AM-4:30PM

SORIANO, CATHERINE F , OD
Provider Gender: Female
License number: 13109
NPI: 1508919085
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish, Tagalog
Cultural Competency: Yes
ACUITY EYE GROUP

9850 GENESEE AVE STE 310
 LA JOLLA, CA 92037-1208
Phone: (858) 457-3010
Fax: (858) 457-0028
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Tagalog
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
*Public transportation (within 1/2
 mile from Site):* No
Hours: M-F 8AM-4:30PM

TONNU, ANH T , OD
Provider Gender: Female
License number: 11318
NPI: 1679521280
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Vietnamese
Cultural Competency: Yes
ACUITY EYE GROUP
 9850 GENESEE AVE STE 310
 LA JOLLA, CA 92037-1208
Phone: (858) 457-3010
Fax: (858) 457-0028
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Tagalog
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

Public transportation (within 1/2 mile from Site): No
Hours: M-F 8AM-4:30PM

VINH, JOHN B , OD

Provider Gender: Male
License number: 14177
NPI: 1003102724
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: Yes
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037-1208
Phone: (858) 457-3010
Fax: (858) 457-0028
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Tagalog
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8AM-4:30PM

VO, ANDREW MINH, OD

Provider Gender: Male
License number: 33869
NPI: 1790291565
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Yes
UCSD SHILEY EYE CENTER
9415 CAMPUS POINT DR
LA JOLLA, CA 92093-1350

Phone: (858) 534-6290
Fax: (858) 822-2948
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 7:30AM-5PM, SA 8AM-2PM

YU, CAROL, OD

Provider Gender: Female
License number: 34047
NPI: 1639697451
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Chinese
Cultural Competency: Yes
UCSD SHILEY EYE CENTER
9415 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (858) 534-6290
Fax: (858) 822-2948
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 7:30AM-5PM, SA

8AM-2PM

LA MESA

AVALLONE, THOMAS, MD

Provider Gender: Male
License number: A147199
NPI: 1679865950
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: Yes
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GRSMNT CTR DR STE 551
LA MESA, CA 91942-3078
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8AM-5PM

CAUCHI, CAROLINE GUERRERO, OD

Provider Gender: Female
License number: 6882
NPI: 1831268903
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: Yes
JAMIE STARR PETERS OD
8235 UNIVERSITY AVE

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

LA MESA, CA 91942-9326
Phone: (619) 461-4913
Fax: (888) 509-6483
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
*Public transportation (within 1/2
 mile from Site):* Yes
Hours: M,TU 9AM-5:30PM, W
 8AM-5PM, TH 9AM-6PM, F
 8AM-1PM

CHANG, TOM S , MD
Provider Gender: Male
License number: A69909
NPI: 1609848969
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency: Yes
 EYE ASSOCIATES OF SAN
 DIEGO/ACUITY EYE GROUP
 5565 GRSMNT CTR DR STE
 551
 LA MESA, CA 91942-3078
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No

Please contact provider for
 Accessibility information
*Public transportation (within 1/2
 mile from Site):* No
Hours: M-F 8AM-5PM

CONRAD, RANDALL E , OD
Provider Gender: Male
License number: 6423
NPI: 1962617464
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: Yes
 ALVARADO EYE ASSOCIATES
 MED CLINIC INC
 7877 PARKWAY DR STE 100
 LA MESA, CA 91942-2000
Phone: (619) 460-3711
Fax: (619) 460-2184
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
*Public transportation (within 1/2
 mile from Site):* No
Hours: M-F 8AM-5PM

COOK, GLENN B , MD
Provider Gender: Male
License number: G63727
NPI: 1013078427
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: Yes
 ALVARADO EYE ASSOCIATES
 MED CLINIC INC

COOK, GLENN B , MD
Provider Gender: Male
License number: G63727
NPI: 1013078427
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: Yes
 ALVARADO EYE ASSOCIATES
 MED CLINIC INC

7877 PARKWAY DR STE 100
 LA MESA, CA 91942-2000
Phone: (619) 460-3711
Fax: (619) 460-2184
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
*Public transportation (within 1/2
 mile from Site):* No
Hours: M-F 8AM-5PM

DEAN, MOENA, OD
Provider Gender: Female
License number: 33955
NPI: 1265927578
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency: Yes
 EYE ASSOCIATES OF SAN
 DIEGO/ACUITY EYE GROUP
 5565 GRSMNT CTR DR STE
 551
 LA MESA, CA 91942-3078
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

Public transportation (within 1/2 mile from Site): No
Hours: M-F 8AM-5PM

DYER, SHARON M , OD

Provider Gender: Female
License number: 33450
NPI: 1063866887
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GRSMNT CTR DR STE 551
LA MESA, CA 91942-3078
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8AM-5PM

GILES, GREGORY E , OD

Provider Gender: Male
License number: 11362
NPI: 1114931250
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
LA MESA VISION CARE
8007 LA MESA BLVD
LA MESA, CA 91942-6434

Phone: (619) 466-5665
Fax: (619) 466-5688
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M 8AM-4PM, TU,TH 9AM-6PM, W 7AM-4PM, F 9AM-5PM, SA 8AM-1PM

GOLLOGLY, HEIDRUN, MD

Provider Gender: Female
License number: A134761
NPI: 1477879823
Provider English Spoken: Yes
Provider Language(s) Spoken: German, French, Spanish
Cultural Competency: Yes
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GRSMNT CTR DR STE 551
LA MESA, CA 91942-3078
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for

Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8AM-5PM

HAIGHT, BRUCE T , MD

Provider Gender: Male
License number: G41117
NPI: 1427029628
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GRSMNT CTR DR STE 551
LA MESA, CA 91942-3078
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8AM-5PM

HIXSON, THOMAS M , OD

Provider Gender: Male
License number: 7490
NPI: 1528072683
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
LA MESA VISION CARE
8007 LA MESA BLVD
LA MESA, CA 91942-6434

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

Phone: (619) 466-5665
Fax: (619) 466-5688
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): No
Hours: M 8AM-4PM, TU,TH
9AM-6PM, W 7AM-4PM, F
9AM-5PM, SA 8AM-1PM

HO, JOSEPH, MD

Provider Gender: Male
License number: A137389
NPI: 1962766451
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP
5565 GRSMNT CTR DR STE
551
LA MESA, CA 91942-3078
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information

Public transportation (within 1/2
mile from Site): No
Hours: M-F 8AM-5PM

HUDSON, HENRY L , MD

Provider Gender: Male
License number: G76091
NPI: 1851349195
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP
5565 GRSMNT CTR DR STE
551
LA MESA, CA 91942-3078
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): No
Hours: M-F 8AM-5PM

JOHNSON, BRANDON, MD

Provider Gender: Male
License number: C166066
NPI: 1386806693
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP
5565 GRSMNT CTR DR STE
551

LA MESA, CA 91942-3078
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): No
Hours: M-F 8AM-5PM

KATZMAN, LEE R , MD

Provider Gender: Male
License number: A135673
NPI: 1912297284
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
ALVARADO EYE ASSOCIATES
MED CLINIC INC
7877 PARKWAY DR STE 100
LA MESA, CA 91942-2000
Phone: (619) 460-3711
Fax: (619) 460-2184
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): No

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

Hours: M-F 8AM-5PM

KOWNACKI, JOHN J , MD

Provider Gender: Male
License number: G84672
NPI: 1225189418
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP
5565 GRSMNT CTR DR STE
551

LA MESA, CA 91942-3078

Phone: (619) 465-2020

Fax: (619) 698-1189

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Public transportation (within 1/2
mile from Site): No

Hours: M-F 8AM-5PM

LEE, SALLY S , DO

Provider Gender: Female

License number: A8088

NPI: 1457468514

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Chinese

Cultural Competency: Yes

SAN DIEGO EYE
PROFESSIONALS

5965 SEVERIN DR

LA MESA, CA 91942-3806

Phone: (619) 583-4295

Fax: (619) 825-7300

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Public transportation (within 1/2
mile from Site): Yes

Hours: M-TH 10AM-5PM, F
10AM-6PM

LEVY, PHILLIP A , OD

Provider Gender: Male

License number: 4884

NPI: 1528189115

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: Yes

PHILLIP A LEVY OD

5020 BALTIMORE DR STE B

LA MESA, CA 91942-0692

Phone: (619) 464-8303

Fax: (619) 464-4971

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Public transportation (within 1/2
mile from Site): No

Hours: M,F 10AM-5PM, TU-TH

9AM-6PM

MCGRAW, JOSEPH, MD

Provider Gender: Male

License number: A155228

NPI: 1588624852

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: Yes

EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP

5565 GRSMNT CTR DR STE
551

LA MESA, CA 91942-3078

Phone: (619) 465-2020

Fax: (619) 698-1189

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Public transportation (within 1/2
mile from Site): No

Hours: M-F 8AM-5PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male

License number: A125435

NPI: 1235366782

Provider English Spoken: Yes

Provider Language(s) Spoken:

Indonesian, Spanish

Cultural Competency: Yes

EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP

5565 GRSMNT CTR DR STE
551

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

<p>LA MESA, CA 91942-3078 <i>Phone:</i> (619) 465-2020 <i>Fax:</i> (619) 698-1189 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> No <i>Hours:</i> M-F 8AM-5PM</p>	<p>10AM-5PM</p> <p>OU, JOCELYN, OD <i>Provider Gender:</i> Female <i>License number:</i> 34063 <i>NPI:</i> 1225518996 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: Yes ALVARADO EYE ASSOCIATES MED CLINIC INC 7877 PARKWAY DR STE 100 LA MESA, CA 91942-2000 <i>Phone:</i> (619) 460-3711 <i>Fax:</i> (619) 460-2184 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> No <i>Hours:</i> M-F 8AM-5PM</p>	<p><i>Site Language(s) Spoken:</i> Spanish <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> Yes <i>Hours:</i> M,F 9AM-6PM, TU,TH 9AM-7PM, W 8AM-5PM, SA 9AM-12:30PM</p>
<p>NEWMAN, DAVID M , OD <i>Provider Gender:</i> Male <i>License number:</i> 7296 <i>NPI:</i> 1508856378 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: Yes DAVID M NEWMAN OD 5642 LAKE MURRAY BLVD LA MESA, CA 91942-1929 <i>Phone:</i> (619) 589-6263 <i>Fax:</i> (619) 589-6264 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> Yes <i>Hours:</i> M-F 9AM-6PM, SA</p>	<p>PETERSON, STEVEN G , OD <i>Provider Gender:</i> Male <i>License number:</i> 7554 <i>NPI:</i> 1659331320 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: Yes 20/20 VISION 7090 PARKWAY DR STE A LA MESA, CA 91942-1596 <i>Phone:</i> (619) 460-2020 <i>Fax:</i> (619) 713-0369 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes</p>	<p>PETERS, JAMIE S , OD <i>Provider Gender:</i> Female <i>License number:</i> 10724 <i>NPI:</i> 1073691077 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish Cultural Competency: Yes JAMIE STARR PETERS OD 8235 UNIVERSITY AVE LA MESA, CA 91942-9326 <i>Phone:</i> (619) 461-4913 <i>Fax:</i> (888) 509-6483 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> Yes <i>Hours:</i> M,TU 9AM-5:30PM, W 8AM-5PM, TH 9AM-6PM, F 8AM-1PM</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

PRABHU, SUJATA P , MD

Provider Gender: Female
License number: A115965
NPI: 1982872552
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish

Cultural Competency: Yes
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GRSMNT CTR DR STE 551

LA MESA, CA 91942-3078

Phone: (619) 465-2020

Fax: (619) 698-1189

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Public transportation (within 1/2 mile from Site): No

Hours: M-F 8AM-5PM

RICE, LAWRENCE S , MD

Provider Gender: Male

License number: C31021

NPI: 1922060805

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: Yes
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GRSMNT CTR DR STE 551

LA MESA, CA 91942-3078

Phone: (619) 465-2020

Fax: (619) 698-1189

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Public transportation (within 1/2 mile from Site): No

Hours: M-F 8AM-5PM

SAMUEL, MICHAEL A , MD

Provider Gender: Male

License number: A83237

NPI: 1730175670

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: Yes
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GRSMNT CTR DR STE 551

LA MESA, CA 91942-3078

Phone: (619) 465-2020

Fax: (619) 698-1189

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Public transportation (within 1/2

mile from Site): No

Hours: M-F 8AM-5PM

SORIANO, CATHERINE F , OD

Provider Gender: Female

License number: 13109

NPI: 1508919085

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish, Tagalog

Cultural Competency: Yes
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GRSMNT CTR DR STE 551

LA MESA, CA 91942-3078

Phone: (619) 465-2020

Fax: (619) 698-1189

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Public transportation (within 1/2 mile from Site): No

Hours: M-F 8AM-5PM

VINH, JOHN B , OD

Provider Gender: Male

License number: 14177

NPI: 1003102724

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: Yes
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GRSMNT CTR DR STE 551

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

LA MESA, CA 91942-3078
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
*Public transportation (within 1/2
 mile from Site):* No
Hours: M-F 8AM-5PM

WASSERSTROM, JEFFREY P , MD

Provider Gender: Male
License number: G54813
NPI: 1710922687
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency: Yes
 EYE ASSOCIATES OF SAN
 DIEGO/ACUITY EYE GROUP
 5565 GRSMNT CTR DR STE
 551
 LA MESA, CA 91942-3078
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for

Accessibility information
*Public transportation (within 1/2
 mile from Site):* No
Hours: M-F 8AM-5PM

YEGHIAZARIAN, MARK, OD

Provider Gender: Male
License number: 34021
NPI: 1356829691
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: Yes
 20/20 VISION
 7090 PARKWAY DR STE A
 LA MESA, CA 91942-1596
Phone: (619) 460-2020
Fax: (619) 713-0369
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
*Public transportation (within 1/2
 mile from Site):* Yes
Hours: M,F 9AM-6PM, TU,TH
 9AM-7PM, W 8AM-5PM, SA
 9AM-12:30PM

LAKESIDE

FLEMING, JOHN C , OD

Provider Gender: Male
License number: 8461
NPI: 1033192133
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency: Yes

JOHN C FLEMING OD
 9710 WINTER GARDENS BLVD
 STE A
 LAKESIDE, CA 92040-3866
Phone: (619) 443-1075
Fax: (619) 443-9382
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
*Public transportation (within 1/2
 mile from Site):* No
Hours: M,TU,TH 9AM-5PM, W
 9AM-6PM, F 8:30AM-4PM

JOHNSON, CHRISTOPHER, OD

Provider Gender: Male
License number: 15100
NPI: 1568861425
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency: Yes
 JOHN C FLEMING OD
 9710 WINTER GARDENS BLVD
 STE A
 LAKESIDE, CA 92040-3866
Phone: (619) 443-1075
Fax: (619) 443-9382
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M,TU,TH 9AM-5PM, W 9AM-6PM, F 8:30AM-4PM

LEMON GROVE

HUANG, FLORA, OD

Provider Gender: Female
License number: 34082
NPI: 1487137105
Provider English Spoken: Yes
Provider Language(s) Spoken: Chinese
Cultural Competency: Yes
LEMON GROVE OPTOMETRY
7850 BROADWAY
LEMON GROVE, CA
91945-1801

Phone: (619) 697-2020
Fax: (619) 697-0728
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: TU,TH 9AM-6PM, W,F 8AM-5PM, SA 8AM-1PM

NATIONAL CITY

AOTO, KIM N , OD

Provider Gender: Female
License number: 14524
NPI: 1780935650

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: Yes
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA
91950-5164
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8:30AM-5PM, SA 8:30AM-3PM

AVALLONE, THOMAS, MD

Provider Gender: Male
License number: A147199
NPI: 1679865950
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA
91950-5164
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender

Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8:30AM-5PM, SA 8:30AM-3PM

AVALLONE, THOMAS, MD

Provider Gender: Male
License number: A147199
NPI: 1679865950
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA
91950-2973
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Arabic, Spanish, Tagalog
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M,TU,TH 8AM-6PM, W 8:30AM-5PM, F 8AM-5PM

BINDER, NICHOLAS, MD

Provider Gender: Male
License number: A124698
NPI: 1306076716
Provider English Spoken: Yes

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

<p><i>Provider Language(s) Spoken:</i> No <i>Cultural Competency:</i> Yes WEST COAST EYE CARE 2240 E PLAZA BLVD STE FG NATIONAL CITY, CA 91950-5164 <i>Phone:</i> (619) 470-2700 <i>Fax:</i> (619) 267-8221 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> No <i>Hours:</i> M-F 8:30AM-5PM, SA 8:30AM-3PM</p>	<p>No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> No <i>Hours:</i> M-F 8:30AM-5PM, SA 8:30AM-3PM</p>	<p>WEST COAST EYE CARE 2240 E PLAZA BLVD STE FG NATIONAL CITY, CA 91950-5164 <i>Phone:</i> (619) 470-2700 <i>Fax:</i> (619) 267-8221 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> No <i>Hours:</i> M-F 8:30AM-5PM, SA 8:30AM-3PM</p>
<p>DEAN, MOENA, OD <i>Provider Gender:</i> Female <i>License number:</i> 33955 <i>NPI:</i> 1265927578 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> Yes WEST COAST EYE CARE 2240 E PLAZA BLVD STE FG NATIONAL CITY, CA 91950-5164 <i>Phone:</i> (619) 470-2700 <i>Fax:</i> (619) 267-8221 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i></p>	<p>DEAN, MOENA, OD <i>Provider Gender:</i> Female <i>License number:</i> 33955 <i>NPI:</i> 1265927578 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> Yes ACUITY EYE GROUP 655 EUCLID AVE STE 302 NATIONAL CITY, CA 91950-2973 <i>Phone:</i> (619) 472-1010 <i>Fax:</i> (619) 479-5233 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Arabic, Spanish, Tagalog <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> Yes <i>Hours:</i> M,TU,TH 8AM-6PM, W 8:30AM-5PM, F 8AM-5PM</p>	<p>DYER, SHARON M , OD <i>Provider Gender:</i> Female <i>License number:</i> 33450 <i>NPI:</i> 1063866887 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> Yes ACUITY EYE GROUP 655 EUCLID AVE STE 302 NATIONAL CITY, CA 91950-2973 <i>Phone:</i> (619) 472-1010 <i>Fax:</i> (619) 479-5233 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Arabic, Spanish, Tagalog <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No</p>

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* Yes
Hours: M,TU,TH 8AM-6PM, W
8:30AM-5PM, F 8AM-5PM

GOLLOGLY, HEIDRUN, MD

Provider Gender: Female
License number: A134761
NPI: 1477879823
Provider English Spoken: Yes
Provider Language(s) Spoken:
German, French, Spanish

Cultural Competency: Yes

ACUITY EYE GROUP

655 EUCLID AVE STE 302
NATIONAL CITY, CA

91950-2973

Phone: (619) 472-1010

Fax: (619) 479-5233

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Arabic, Spanish, Tagalog

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

*Public transportation (within 1/2
mile from Site):* Yes

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

HAIGHT, BRUCE T , MD

Provider Gender: Male

License number: G41117

NPI: 1427029628

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: Yes

ACUITY EYE GROUP

655 EUCLID AVE STE 302

NATIONAL CITY, CA

91950-2973

Phone: (619) 472-1010

Fax: (619) 479-5233

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Arabic, Spanish, Tagalog

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

*Public transportation (within 1/2
mile from Site):* Yes

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

HUDSON, HENRY L , MD

Provider Gender: Male

License number: G76091

NPI: 1851349195

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: Yes

ACUITY EYE GROUP

655 EUCLID AVE STE 302

NATIONAL CITY, CA

91950-2973

Phone: (619) 472-1010

Fax: (619) 479-5233

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Arabic, Spanish, Tagalog

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

*Public transportation (within 1/2
mile from Site):* Yes

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

HUNG, JANICE, OD

Provider Gender: Female

License number: 34296

NPI: 1750917936

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: Yes

WEST COAST EYE CARE

2240 E PLAZA BLVD STE FG

NATIONAL CITY, CA

91950-5164

Phone: (619) 470-2700

Fax: (619) 267-8221

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

*Public transportation (within 1/2
mile from Site):* No

Hours: M-F 8:30AM-5PM, SA
8:30AM-3PM

KALRA, ANKUR, OD

Provider Gender: Male

License number: 11898

NPI: 1124195789

Provider English Spoken: Yes

Provider Language(s) Spoken:

Hindi

Cultural Competency: Yes

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

<p>KEDDINGTON & KALRA OPTOMETRISTS APC 1481 E PLAZA BLVD NATIONAL CITY, CA 91950-3613 Phone: (619) 477-2159 Fax: (619) 477-2128 After Hours Phone: Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Arabic, Japanese, Spanish Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Public transportation (within 1/2 mile from Site): Yes Hours: SU 10AM-4PM, M-F 9AM-6PM, SA 9AM-5PM</p>	<p>American Sign Language (ASL): No Please contact provider for Accessibility information Public transportation (within 1/2 mile from Site): No Hours: M-F 8:30AM-5PM, SA 8:30AM-3PM</p>	<p>Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: Yes ACUITY EYE GROUP 655 EUCLID AVE STE 302 NATIONAL CITY, CA 91950-2973 Phone: (619) 472-1010 Fax: (619) 479-5233 After Hours Phone:</p>
<p>KATZMAN, BARRY, MD Provider Gender: Male License number: A34834 NPI: 1760473797 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: Yes WEST COAST EYE CARE 2240 E PLAZA BLVD STE FG NATIONAL CITY, CA 91950-5164 Phone: (619) 470-2700 Fax: (619) 267-8221 After Hours Phone: Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Min/Max Age: Gender Restriction: No Gender Restrictions</p>	<p>KEDDINGTON, JOAN, OD Provider Gender: Female License number: 6263 NPI: 1992872691 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: Yes KEDDINGTON & KALRA OPTOMETRISTS APC 1481 E PLAZA BLVD NATIONAL CITY, CA 91950-3613 Phone: (619) 477-2159 Fax: (619) 477-2128 After Hours Phone: Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Arabic, Japanese, Spanish Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Public transportation (within 1/2 mile from Site): Yes Hours: SU 10AM-4PM, M-F 9AM-6PM, SA 9AM-5PM</p>	<p>Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Arabic, Spanish, Tagalog Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Public transportation (within 1/2 mile from Site): Yes Hours: M,TU,TH 8AM-6PM, W 8:30AM-5PM, F 8AM-5PM</p>
	<p>KOWNACKI, JOHN J , MD Provider Gender: Male License number: G84672 NPI: 1225189418</p>	<p>LEE, AUSTIN T , OD Provider Gender: Male License number: 14519 NPI: 1922356914 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: Yes VIVE OPTOMETRY 1033 HIGHLAND AVE NATIONAL CITY, CA 91950-3515 Phone: (619) 477-2771 Fax: (619) 477-1680 After Hours Phone: Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Spanish, Tagalog Min/Max Age:</p>

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M,TU 10AM-5PM, W-F 9:30AM-5PM

MARLAY, GREG L , OD

Provider Gender: Male
License number: 6998
NPI: 1306903083
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: Yes
MARLAY ENTERPRISES
1132 E PLAZA BLVD STE 201
NATIONAL CITY, CA
91950-3560
Phone: (619) 477-4166
Fax:
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M,W,F 10AM-6PM, SA 10AM-2PM

MCGRAW, JOSEPH, MD

Provider Gender: Male
License number: A155228
NPI: 1588624852

Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: Yes
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA
91950-2973
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Arabic, Spanish, Tagalog
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M,TU,TH 8AM-6PM, W 8:30AM-5PM, F 8AM-5PM

MCGRAW, JOSEPH, MD

Provider Gender: Male
License number: A155228
NPI: 1588624852
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: Yes
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA
91950-5164
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender

Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8:30AM-5PM, SA 8:30AM-3PM

MENDOZA, RAYMUNDO G , OD

Provider Gender: Male
License number: 8150
NPI: 1306837760
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: Yes
NATIONAL CITY EYECARE
2403 E PLAZA BLVD
NATIONAL CITY, CA
91950-5101
Phone: (619) 475-2184
Fax: (619) 475-3917
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Tagalog
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M,TU,TH,F 10AM-5PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male
License number: A125435

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

NPI: 1235366782
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Indonesian, Spanish
 Cultural Competency: Yes
 WEST COAST EYE CARE
 2240 E PLAZA BLVD STE FG
 NATIONAL CITY, CA
 91950-5164
 Phone: (619) 470-2700
 Fax: (619) 267-8221
 After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Public transportation (within 1/2 mile from Site): No
 Hours: M-F 8:30AM-5PM, SA 8:30AM-3PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male
 License number: A125435
 NPI: 1235366782
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Indonesian, Spanish
 Cultural Competency: Yes
 ACUITY EYE GROUP
 655 EUCLID AVE STE 302
 NATIONAL CITY, CA
 91950-2973
 Phone: (619) 472-1010
 Fax: (619) 479-5233
 After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes

Site Language(s) Spoken: Arabic, Spanish, Tagalog
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Public transportation (within 1/2 mile from Site): Yes
 Hours: M,TU,TH 8AM-6PM, W 8:30AM-5PM, F 8AM-5PM

PATEL, GITANE, MD

Provider Gender: Male
 License number: A108603
 NPI: 1710171434
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: Yes
 WEST COAST EYE CARE
 2240 E PLAZA BLVD STE FG
 NATIONAL CITY, CA
 91950-5164
 Phone: (619) 470-2700
 Fax: (619) 267-8221
 After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Public transportation (within 1/2 mile from Site): No
 Hours: M-F 8:30AM-5PM, SA 8:30AM-3PM

PATEL, SARJAN H , MD

Provider Gender: Male

License number: A114976
 NPI: 1316199326
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Gujarati, Hindi, Spanish
 Cultural Competency: Yes
 WEST COAST EYE CARE
 2240 E PLAZA BLVD STE FG
 NATIONAL CITY, CA
 91950-5164
 Phone: (619) 470-2700
 Fax: (619) 267-8221
 After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Public transportation (within 1/2 mile from Site): No
 Hours: M-F 8:30AM-5PM, SA 8:30AM-3PM

PRABHU, SUJATA P , MD

Provider Gender: Female
 License number: A115965
 NPI: 1982872552
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: Yes
 WEST COAST EYE CARE
 2240 E PLAZA BLVD STE FG
 NATIONAL CITY, CA
 91950-5164
 Phone: (619) 470-2700
 Fax: (619) 267-8221
 After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8:30AM-5PM, SA 8:30AM-3PM

RICE, LAWRENCE S , MD

Provider Gender: Male
License number: C31021
NPI: 1922060805
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA
91950-2973
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Arabic, Spanish, Tagalog
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M,TU,TH 8AM-6PM, W 8:30AM-5PM, F 8AM-5PM

SORIANO, CATHERINE F , OD

Provider Gender: Female

License number: 13109
NPI: 1508919085
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: Yes
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA
91950-2973
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Arabic, Spanish, Tagalog
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M,TU,TH 8AM-6PM, W 8:30AM-5PM, F 8AM-5PM

SORIANO, CATHERINE F , OD

Provider Gender: Female
License number: 13109
NPI: 1508919085
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: Yes
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA
91950-5164
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone:
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8:30AM-5PM, SA 8:30AM-3PM

TAN, JOCELYN, OD

Provider Gender: Female
License number: 33985
NPI: 1053724112
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
KEDDINGTON & KALRA
OPTOMETRISTS APC
1481 E PLAZA BLVD
NATIONAL CITY, CA
91950-3613
Phone: (619) 477-2159
Fax: (619) 477-2128
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Arabic, Japanese, Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: SU 10AM-4PM, M-F 9AM-6PM, SA 9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

THAI, EMILY, OD

Provider Gender: Female
License number: 34649
NPI: 1720699432
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
KEDDINGTON & KALRA
OPTOMETRISTS APC
1481 E PLAZA BLVD
NATIONAL CITY, CA
91950-3613
Phone: (619) 477-2159
Fax: (619) 477-2128
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Arabic, Japanese, Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* Yes
Hours: SU 10AM-4PM, M-F
9AM-6PM, SA 9AM-5PM

TOUBIA, ELIAS, OD

Provider Gender: Male
License number: 33758
NPI: 1740701481
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic
Cultural Competency: Yes
KEDDINGTON & KALRA
OPTOMETRISTS APC
1481 E PLAZA BLVD
NATIONAL CITY, CA
91950-3613

Phone: (619) 477-2159
Fax: (619) 477-2128
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Arabic, Japanese, Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* Yes
Hours: SU 10AM-4PM, M-F
9AM-6PM, SA 9AM-5PM

VINH, JOHN B , OD

Provider Gender: Male
License number: 14177
NPI: 1003102724
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA
91950-2973
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Arabic, Spanish, Tagalog
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2

mile from Site): Yes
Hours: M,TU,TH 8AM-6PM, W
8:30AM-5PM, F 8AM-5PM

VINH, JOHN B , OD

Provider Gender: Male
License number: 14177
NPI: 1003102724
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA
91950-5164
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* No
Hours: M-F 8:30AM-5PM, SA
8:30AM-3PM

WASSERSTROM, JEFFREY P , MD

Provider Gender: Male
License number: G54813
NPI: 1710922687
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA
91950-2973

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

Phone: (619) 472-1010
 Fax: (619) 479-5233
 After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Arabic, Spanish, Tagalog
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Public transportation (within 1/2
 mile from Site): Yes
 Hours: M,TU,TH 8AM-6PM, W
 8:30AM-5PM, F 8AM-5PM

WU, EVA Y , OD

Provider Gender: Female
 License number: 14743
 NPI: 1073954442
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish, Chinese
 Cultural Competency: Yes
 VIVE OPTOMETRY
 1033 HIGHLAND AVE
 NATIONAL CITY, CA
 91950-3515
 Phone: (619) 477-2771
 Fax: (619) 477-1680
 After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish, Tagalog
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information

Public transportation (within 1/2
 mile from Site): Yes
 Hours: M,TU 10AM-5PM, W-F
 9:30AM-5PM

OCEANSIDE

RING, ROBERT A , OD

Provider Gender: Male
 License number: 6781
 NPI: 1336228840
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: Yes
 ROBERT A RING OD
 3998 VISTA WAY STE 204
 OCEANSIDE, CA 92056-4515
 Phone: (760) 726-9383
 Fax: (760) 726-9897
 After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Public transportation (within 1/2
 mile from Site): Yes
 Hours: M 10AM-7PM, TU-TH
 9AM-5PM, F 9AM-12PM

ROSA, ADAM, OD

Provider Gender: Male
 License number: 34093
 NPI: 1295250264
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: Yes
 NORTH COAST OPTOMETRY

3915 MISSION AVE STE 2
 OCEANSIDE, CA 92058-7801
 Phone: (760) 757-8771
 Fax:
 After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Public transportation (within 1/2
 mile from Site): Yes
 Hours: M,TU,TH 9AM-6PM, W
 10AM-7PM, F 9AM-5PM

RAMONA

HOMESLEY, SUSAN D , OD

Provider Gender: Female
 License number: 6693
 NPI: 1720068984
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: Yes
 SUSAN D HOMESLEY OD
 1516 MAIN ST STE 102
 RAMONA, CA 92065-5242
 Phone: (760) 789-0950
 Fax: (760) 789-6057
 After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* No
Hours: M-F 8AM-5PM, SA
8AM-11AM

SAN DIEGO

ADAMS, MONA N , OD

Provider Gender: Female
License number: 14457
NPI: 1942564521
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
RADY CHILDRENS
SPECIALISTS
7910 FROST ST STE 200
SAN DIEGO, CA 92123-2776
Phone: (858) 309-7702
Fax: (858) 966-8901

After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No

Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* No
Hours: M-F 7AM-5PM

AOTO, KIM N , OD

Provider Gender: Female
License number: 14524
NPI: 1780935650
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Vietnamese
Cultural Competency: Yes

WEST COAST EYE CARE
4344 CONVOY ST STE C2
SAN DIEGO, CA 92111-3737
Phone: (858) 565-8822
Fax: (858) 565-2449
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No

Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* No
Hours: M 10AM-6PM, TU
8:30AM-5PM, W 7:30AM-4PM,
TH 9:30AM-5PM, F 8AM-4PM

AOTO, KIM N , OD

Provider Gender: Female
License number: 14524
NPI: 1780935650
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Vietnamese
Cultural Competency: Yes
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115-1754
Phone: (619) 697-4600
Fax: (619) 697-2410

After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for

Accessibility information
*Public transportation (within 1/2
mile from Site):* No
Hours: M 7:30AM-4:30PM, TU
8AM-5PM, W 8:30AM-5PM, TH
8AM-6PM, F 8AM-4PM

AVALLONE, THOMAS, MD

Provider Gender: Male
License number: A147199
NPI: 1679865950
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
WEST COAST EYE CARE
4344 CONVOY ST STE C2
SAN DIEGO, CA 92111-3737
Phone: (858) 565-8822
Fax: (858) 565-2449

After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* No
Hours: M 10AM-6PM, TU
8:30AM-5PM, W 7:30AM-4PM,
TH 9:30AM-5PM, F 8AM-4PM

AVALLONE, THOMAS, MD

Provider Gender: Male
License number: A147199
NPI: 1679865950
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
WEST COAST EYE CARE
6945 EL CAJON BLVD

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

SAN DIEGO, CA 92115-1754
 Phone: (619) 697-4600
 Fax: (619) 697-2410
 After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Public transportation (within 1/2
 mile from Site): No
 Hours: M 7:30AM-4:30PM, TU
 8AM-5PM, W 8:30AM-5PM, TH
 8AM-6PM, F 8AM-4PM

BANSAL, PREETI, MD

Provider Gender: Female
 License number: A90890
 NPI: 1871664631
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: Yes
 RADY CHILDRENS
 SPECIALISTS
 7910 FROST ST STE 200
 SAN DIEGO, CA 92123-2776
 Phone: (858) 309-7702
 Fax: (858) 966-8901
 After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information

Public transportation (within 1/2
 mile from Site): No
 Hours: M-F 7AM-5PM

BHATIA, SHAGUN, MD

Provider Gender: Female
 License number: A154902
 NPI: 1104237353
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: Yes
 RADY CHILDRENS
 SPECIALISTS
 7910 FROST ST STE 200
 SAN DIEGO, CA 92123-2776
 Phone: (858) 309-7702
 Fax: (858) 966-8901
 After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Public transportation (within 1/2
 mile from Site): No
 Hours: M-F 7AM-5PM

BINDER, NICHOLAS, MD

Provider Gender: Male
 License number: A124698
 NPI: 1306076716
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: Yes
 WEST COAST EYE CARE
 6945 EL CAJON BLVD
 SAN DIEGO, CA 92115-1754
 Phone: (619) 697-4600
 Fax: (619) 697-2410
 After Hours Phone:

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Public transportation (within 1/2
 mile from Site): No
 Hours: M 7:30AM-4:30PM, TU
 8AM-5PM, W 8:30AM-5PM, TH
 8AM-6PM, F 8AM-4PM

BINDER, NICHOLAS, MD

Provider Gender: Male
 License number: A124698
 NPI: 1306076716
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: Yes
 WEST COAST EYE CARE
 4344 CONVOY ST STE C2
 SAN DIEGO, CA 92111-3737
 Phone: (858) 565-8822
 Fax: (858) 565-2449
 After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Public transportation (within 1/2
 mile from Site): No
 Hours: M 10AM-6PM, TU
 8:30AM-5PM, W 7:30AM-4PM,
 TH 9:30AM-5PM, F 8AM-4PM

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

BOECK, CARL A , OD

Provider Gender: Male
License number: 6620
NPI: 1588656151
Provider English Spoken: Yes
Provider Language(s) Spoken: German, Spanish
Cultural Competency: Yes
ACKROYD AND VAN HOOSE OPTOMETRY
7246 CLAIREMONT MESA BLVD
SAN DIEGO, CA 92111-1007
Phone: (858) 292-7193
Fax: (858) 292-8247
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M,F 8AM-5PM, TU,TH 9AM-6PM, W 9AM-5PM, SA 9AM-1PM

CHEN, LESLIE L , OD

Provider Gender: Female
License number: 12792
NPI: 1508953332
Provider English Spoken: Yes
Provider Language(s) Spoken: Chinese
Cultural Competency: Yes
EYE STUDIO OPTOMETRY
4475 UNIVERSITY AVE
SAN DIEGO, CA 92105-1731

Phone: (619) 521-2020
Fax: (619) 521-2025
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Vietnamese, Chinese
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-W,F 9AM-5PM, TH 9AM-1:30PM, SA 9AM-1PM

CHESNER, LOUIS E , OD

Provider Gender: Male
License number: 4930
NPI: 1740624402
Provider English Spoken: Yes
Provider Language(s) Spoken: LOUIS E CHESNER OD
2404 MADISON AVE
SAN DIEGO, CA 92116-2920
Phone: (619) 291-3836
Fax: (619) 291-4625
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 9AM-5PM, SA

8AM-3PM

CHINN, JENNIFER, OD

Provider Gender: Female
License number: 15407
NPI: 1073989471
Provider English Spoken: Yes
Provider Language(s) Spoken: STEPHEN CHINN OD
2856 UNIVERSITY AVE
SAN DIEGO, CA 92104-2930
Phone: (619) 280-0664
Fax: (619) 294-8100
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Lao, Spanish, Vietnamese, Chinese
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 10AM-6PM

CHINN, STEPHEN, OD

Provider Gender: Male
License number: 5373
NPI: 1912976291
Provider English Spoken: Yes
Provider Language(s) Spoken: Lao, Spanish, Vietnamese
Cultural Competency: Yes
STEPHEN CHINN OD
2856 UNIVERSITY AVE
SAN DIEGO, CA 92104-2930
Phone: (619) 280-0664
Fax: (619) 294-8100
After Hours Phone:
Accepting New Patients: Yes

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

Site English Spoken: Yes
Site Language(s) Spoken: Lao, Spanish, Vietnamese, Chinese
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 10AM-6PM

COLEMAN, BROOKE A , OD

Provider Gender: Female
License number: 13551
NPI: 1700040748
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
 EYELUX OPTOMETRY
 16615 DOVE CANYON RD STE 105
 SAN DIEGO, CA 92127-3441
Phone: (858) 487-7900
Fax: (858) 487-1896
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8AM-5PM, SA 8:30AM-2PM

COOPER, MICHAEL J , OD

Provider Gender: Male

License number: 10476
NPI: 1164586244
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
 EYELUX OPTOMETRY
 16615 DOVE CANYON RD STE 105
 SAN DIEGO, CA 92127-3441
Phone: (858) 487-7900
Fax: (858) 487-1896
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8AM-5PM, SA 8:30AM-2PM

DAVIS, JADE, OD

Provider Gender: Female
License number: 11765
NPI: 1457303398
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
 OPTOM-EYES VISION CARE OPTOMETRY
 5638 MISSION CENTER RD STE 103
 SAN DIEGO, CA 92108-4348
Phone: (619) 295-2900
Fax: (888) 210-5799
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 9AM-5:30PM, SA 9AM-3PM

DAVIS, JADE, OD

Provider Gender: Female
License number: 11765
NPI: 1457303398
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
 FASHION VALLEY EYE CARE OPTOMETR
 7007 FRIARS RD STE 351
 SAN DIEGO, CA 92108-1148
Phone: (619) 291-2020
Fax: (888) 210-5799
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-SA 10AM-7PM

DEAN, MOENA, OD

Provider Gender: Female
License number: 33955

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

NPI: 1265927578
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: Yes
 WEST COAST EYE CARE
 4344 CONVOY ST STE C2
 SAN DIEGO, CA 92111-3737
 Phone: (858) 565-8822
 Fax: (858) 565-2449
 After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Public transportation (within 1/2
 mile from Site): No
 Hours: M 10AM-6PM, TU
 8:30AM-5PM, W 7:30AM-4PM,
 TH 9:30AM-5PM, F 8AM-4PM

DUONG, KIM S , OD

Provider Gender: Female
 License number: 34222
 NPI: 1114448651
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Vietnamese
 Cultural Competency: Yes
 RADY CHILDRENS
 SPECIALISTS
 7910 FROST ST STE 200
 SAN DIEGO, CA 92123-2776
 Phone: (858) 309-7702
 Fax: (858) 966-8901
 After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Min/Max Age:

Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Public transportation (within 1/2
 mile from Site): No
 Hours: M-F 7AM-5PM

DYER, SHARON M , OD

Provider Gender: Female
 License number: 33450
 NPI: 1063866887
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: Yes
 WEST COAST EYE CARE
 4344 CONVOY ST STE C2
 SAN DIEGO, CA 92111-3737
 Phone: (858) 565-8822
 Fax: (858) 565-2449
 After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Public transportation (within 1/2
 mile from Site): No
 Hours: M 10AM-6PM, TU
 8:30AM-5PM, W 7:30AM-4PM,
 TH 9:30AM-5PM, F 8AM-4PM

DYER, SHARON M , OD

Provider Gender: Female
 License number: 33450
 NPI: 1063866887
 Provider English Spoken: Yes
 Provider Language(s) Spoken:

Cultural Competency: Yes
 WEST COAST EYE CARE
 6945 EL CAJON BLVD
 SAN DIEGO, CA 92115-1754
 Phone: (619) 697-4600
 Fax: (619) 697-2410
 After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Public transportation (within 1/2
 mile from Site): No
 Hours: M 7:30AM-4:30PM, TU
 8AM-5PM, W 8:30AM-5PM, TH
 8AM-6PM, F 8AM-4PM

FELDMAN, SANFORD G , MD

Provider Gender: Male
 License number: G45627
 NPI: 1801945357
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: Yes
 ONE TO ONE LASIK
 3737 MORAGA AVE STE A105
 SAN DIEGO, CA 92117-5458
 Phone: (858) 273-0200
 Fax: (858) 273-0619
 After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

<p>No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> Yes <i>Hours:</i> M-TH 8AM-5PM, F 8AM-4PM</p>	<p>JASMINE P NGUYEN OD INC 4029 43RD ST STE 300 SAN DIEGO, CA 92105-8537 <i>Phone:</i> (619) 284-3937 <i>Fax:</i> (619) 284-3938 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish, Vietnamese <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No</p>	<p>Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> No <i>Hours:</i> M-TH 9AM-5PM, F 9AM-4PM</p>
<p>GIANG, STEVEN, OD <i>Provider Gender:</i> Male <i>License number:</i> 34489 <i>NPI:</i> 1730710104 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Vietnamese <i>Cultural Competency:</i> Yes JASMINE P NGUYEN OD INC 4029 43RD ST STE 300 SAN DIEGO, CA 92105-8537 <i>Phone:</i> (619) 284-3937 <i>Fax:</i> (619) 284-3938 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish, Vietnamese <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> Yes <i>Hours:</i> M-F 9AM-5PM, SA 9AM-1PM</p>	<p>HOM, GREGORY G , OD <i>Provider Gender:</i> Male <i>License number:</i> 9694 <i>NPI:</i> 1154473916 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Vietnamese <i>Cultural Competency:</i> Yes GREGORY G HOM OD 11230 SORRENTO VALLEY RD STE 145 SAN DIEGO, CA 92121-1338 <i>Phone:</i> (858) 535-9835 <i>Fax:</i> (858) 535-1266 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish, Vietnamese <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No</p>	<p>HOWARD, ROBERT M , OD <i>Provider Gender:</i> Male <i>License number:</i> 6960 <i>NPI:</i> 1912977554 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> Yes ACKROYD AND VAN HOOSE OPTOMETRY 7246 CLAIREMONT MESA BLVD SAN DIEGO, CA 92111-1007 <i>Phone:</i> (858) 292-7193 <i>Fax:</i> (858) 292-8247 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> Yes <i>Hours:</i> M,F 8AM-5PM, TU,TH 9AM-6PM, W 9AM-5PM, SA 9AM-1PM</p>
<p>HOANG, KEVIN, OD <i>Provider Gender:</i> Male <i>License number:</i> 34401 <i>NPI:</i> 1790339216 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> Yes</p>	<p><i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for</p>	<p>HUANG, FLORA, OD <i>Provider Gender:</i> Female <i>License number:</i> 34082 <i>NPI:</i> 1487137105 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i></p>

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

Chinese
Cultural Competency: Yes
**GOLDEN TRIANGLE
 OPTOMETRY**
 4009 GOVERNOR DR
 SAN DIEGO, CA 92122-2522
Phone: (858) 453-0444
Fax: (858) 453-0471
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
*Public transportation (within 1/2
 mile from Site):* No
Hours: M-F 9AM-6PM

HUDSON, HENRY L , MD
Provider Gender: Male
License number: G76091
NPI: 1851349195
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
WEST COAST EYE CARE
 6945 EL CAJON BLVD
 SAN DIEGO, CA 92115-1754
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for

Accessibility information
*Public transportation (within 1/2
 mile from Site):* No
Hours: M 7:30AM-4:30PM, TU
 8AM-5PM, W 8:30AM-5PM, TH
 8AM-6PM, F 8AM-4PM

HUYNH, CHI T , OD
Provider Gender: Female
License number: 12901
NPI: 1922187426
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Vietnamese
Cultural Competency: Yes
**CRYSTAL EYESITE
 OPTOMETRY**
 9225 MIRA MESA BLVD STE
 108
 SAN DIEGO, CA 92126-4810
Phone: (858) 547-3988
Fax: (844) 367-5161
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
*Public transportation (within 1/2
 mile from Site):* No
Hours: M,W 9:30AM-6PM, TH,F
 10AM-6PM, SA 9AM-3PM

HUYNH, PAUL D , MD
Provider Gender: Male
License number: A79141
NPI: 1871577056
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Vietnamese
Cultural Competency: Yes
**ADVANCED EYE AND LASER
 CTR OF CA INC**
 10737 CAMINO RUIZ STE 100
 SAN DIEGO, CA 92126-2370
Phone: (858) 549-3200
Fax: (858) 549-3207
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Tagalog, Vietnamese
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):

HUYNH, PAUL D , MD
Provider Gender: Male
License number: A79141
NPI: 1871577056
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Vietnamese

Cultural Competency: Yes
**ADVANCED EYE AND LASER
 CTR OF CA INC**
 4844 UNIVERSITY AVE STE A
 SAN DIEGO, CA 92105-8021
Phone: (619) 283-1303
Fax: (619) 283-1666
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
*Public transportation (within 1/2
 mile from Site):* Yes
Hours: M-F 8AM-5PM

HUYNH, PAUL D , MD
Provider Gender: Male
License number: A79141
NPI: 1871577056
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Vietnamese
Cultural Competency: Yes
**ADVANCED EYE AND LASER
 CTR OF CA INC**
 10737 CAMINO RUIZ STE 100
 SAN DIEGO, CA 92126-2370
Phone: (858) 549-3200
Fax: (858) 549-3207
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Tagalog, Vietnamese
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* Yes
Hours: M-F 8AM-5PM

JOHNSON, BRANDON, MD

Provider Gender: Male
License number: C166066
NPI: 1386806693
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115-1754
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone:
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No

Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* No
Hours: M 7:30AM-4:30PM, TU
8AM-5PM, W 8:30AM-5PM, TH
8AM-6PM, F 8AM-4PM

KATZMAN, BARRY, MD

Provider Gender: Male
License number: A34834
NPI: 1760473797
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: Yes
WEST COAST EYE CARE

6945 EL CAJON BLVD
SAN DIEGO, CA 92115-1754
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:

Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* No
Hours: M 7:30AM-4:30PM, TU
8AM-5PM, W 8:30AM-5PM, TH
8AM-6PM, F 8AM-4PM

KATZMAN, BARRY, MD

Provider Gender: Male
License number: A34834
NPI: 1760473797
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: Yes
WEST COAST EYE CARE
4344 CONVOY ST STE C2
SAN DIEGO, CA 92111-3737
Phone: (858) 565-8822
Fax: (858) 565-2449
After Hours Phone:
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No

Please contact provider for
Accessibility information

*Public transportation (within 1/2
mile from Site):* No
Hours: M 10AM-6PM, TU
8:30AM-5PM, W 7:30AM-4PM,
TH 9:30AM-5PM, F 8AM-4PM

LARSEN, STEVEN R , OD

Provider Gender: Male
License number: 7687
NPI: 1629194782
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: Yes
UPTOWN OPTOMETRY
4096 PARK BLVD
SAN DIEGO, CA 92103-2620
Phone: (619) 291-5505
Fax: (619) 291-4404

After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No

Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* No
Hours: TU-F 9AM-3PM, SA
10AM-2PM

LAU, JANICE L , OD

Provider Gender: Female
License number: 13037
NPI: 1952453300
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
SABRE SPRINGS OPTOMETRY

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

12650 SABRE SPGS PKWY
STE 203
SAN DIEGO, CA 92128-4114
Phone: (858) 748-1265
Fax: (844) 269-9527
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Vietnamese
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): No
Hours: M,TU,TH 9AM-5PM, W,F
10AM-6PM

LAU, KUEN CHINE, OD

Provider Gender: Male
License number: 11166
NPI: 1821001645
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
OPTOM-EYES VISION CARE
OPTOMETRY
5638 MISSION CENTER RD
STE 103
SAN DIEGO, CA 92108-4348
Phone: (619) 295-2900
Fax: (888) 210-5799
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):

No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): No
Hours: M-F 9AM-5:30PM, SA
9AM-3PM

LEE, JASON, OD

Provider Gender: Male
License number: 14881
NPI: 1679985584
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: Yes
RADY CHILDRENS
SPECIALISTS
7910 FROST ST STE 200
SAN DIEGO, CA 92123-2776
Phone: (858) 309-7702
Fax: (858) 966-8901
After Hours Phone:

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): No
Hours: M-F 7AM-5PM

LE, JACQUELIN M , OD

Provider Gender: Female
License number: 10962
NPI: 1487610432
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Vietnamese
Cultural Competency: Yes

SAN DIEGO VISION CARE
OPTOMETRY
3807 FAIRMOUNT AVE STE
200
SAN DIEGO, CA 92105-2659
Phone: (619) 508-5678
Fax: (619) 501-0686
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Vietnamese
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): Yes
Hours: M-F 9AM-5PM

LIN, HENRY C , OD

Provider Gender: Male
License number: 11368
NPI: 1861405664
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Chinese
Cultural Competency: Yes
OPTOM-EYES VISION CARE
OPTOMETRY
5638 MISSION CENTER RD
STE 103
SAN DIEGO, CA 92108-4348
Phone: (619) 295-2900
Fax: (888) 210-5799
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

<p>Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> No <i>Hours:</i> M-F 9AM-5:30PM, SA 9AM-3PM</p> <p>LIN, HENRY C , OD <i>Provider Gender:</i> Male <i>License number:</i> 11368 <i>NPI:</i> 1861405664 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Chinese <i>Cultural Competency:</i> Yes OPTOM-EYES VISION CARE OPTOMETRY 1555 PALM AVE STE A2 SAN DIEGO, CA 92154-1012 <i>Phone:</i> (619) 297-2020 <i>Fax:</i> (888) 210-5799 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> Yes <i>Hours:</i> M-F 9:30AM-6PM, SA 9AM-3PM</p> <p>LIN, HENRY C , OD <i>Provider Gender:</i> Male <i>License number:</i> 11368 <i>NPI:</i> 1861405664 <i>Provider English Spoken:</i> Yes</p>	<p><i>Provider Language(s) Spoken:</i> Spanish, Chinese <i>Cultural Competency:</i> Yes FASHION VALLEY EYE CARE OPTOMETR 7007 FRIARS RD STE 351 SAN DIEGO, CA 92108-1148 <i>Phone:</i> (619) 291-2020 <i>Fax:</i> (888) 210-5799 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> Yes <i>Hours:</i> M-SA 10AM-7PM</p> <p>LLANES, BENJAMIN P , OD <i>Provider Gender:</i> Male <i>License number:</i> 8782 <i>NPI:</i> 1053309005 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Tagalog <i>Cultural Competency:</i> Yes SEE KLEER EYECARE CENTER 9580 BLACK MOUNTAIN RD STE J SAN DIEGO, CA 92126-4522 <i>Phone:</i> (858) 536-8952 <i>Fax:</i> (858) 536-8951 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish, Tagalog</p>	<p><i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> Yes <i>Hours:</i> M-F 11AM-6PM, SA 9AM-1PM</p> <p>MCGRAW, JOSEPH, MD <i>Provider Gender:</i> Male <i>License number:</i> A155228 <i>NPI:</i> 1588624852 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> Yes WEST COAST EYE CARE 6945 EL CAJON BLVD SAN DIEGO, CA 92115-1754 <i>Phone:</i> (619) 697-4600 <i>Fax:</i> (619) 697-2410 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> No <i>Hours:</i> M 7:30AM-4:30PM, TU 8AM-5PM, W 8:30AM-5PM, TH 8AM-6PM, F 8AM-4PM</p> <p>MCGRAW, JOSEPH, MD <i>Provider Gender:</i> Male <i>License number:</i> A155228 <i>NPI:</i> 1588624852</p>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

<p><i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> Yes WEST COAST EYE CARE 4344 CONVOY ST STE C2 SAN DIEGO, CA 92111-3737 <i>Phone:</i> (858) 565-8822 <i>Fax:</i> (858) 565-2449 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> No <i>Hours:</i> M 10AM-6PM, TU 8:30AM-5PM, W 7:30AM-4PM, TH 9:30AM-5PM, F 8AM-4PM</p>	<p>No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> No <i>Hours:</i> M 7:30AM-4:30PM, TU 8AM-5PM, W 8:30AM-5PM, TH 8AM-6PM, F 8AM-4PM</p> <p>MILLER, DOUGLAS G , MD <i>Provider Gender:</i> Male <i>License number:</i> G52627 <i>NPI:</i> 1982636031 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> Yes WEST COAST EYE CARE 4344 CONVOY ST STE C2 SAN DIEGO, CA 92111-3737 <i>Phone:</i> (858) 565-8822 <i>Fax:</i> (858) 565-2449 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> No <i>Hours:</i> M 10AM-6PM, TU 8:30AM-5PM, W 7:30AM-4PM, TH 9:30AM-5PM, F 8AM-4PM</p>	<p>RADY CHILDRENS SPECIALISTS 7910 FROST ST STE 200 SAN DIEGO, CA 92123-2776 <i>Phone:</i> (858) 309-7702 <i>Fax:</i> (858) 966-8901 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> No <i>Hours:</i> M-F 7AM-5PM</p> <p>MORRISON REYES, JOSHUA, MD <i>Provider Gender:</i> Male <i>License number:</i> A125435 <i>NPI:</i> 1235366782 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Indonesian, Spanish <i>Cultural Competency:</i> Yes WEST COAST EYE CARE 4344 CONVOY ST STE C2 SAN DIEGO, CA 92111-3737 <i>Phone:</i> (858) 565-8822 <i>Fax:</i> (858) 565-2449 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for</p>
<p>MILLER, DOUGLAS G , MD <i>Provider Gender:</i> Male <i>License number:</i> G52627 <i>NPI:</i> 1982636031 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> Yes WEST COAST EYE CARE 6945 EL CAJON BLVD SAN DIEGO, CA 92115-1754 <i>Phone:</i> (619) 697-4600 <i>Fax:</i> (619) 697-2410 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i></p>	<p>MOLL, ANGELA, MD <i>Provider Gender:</i> Female <i>License number:</i> A105472 <i>NPI:</i> 1861648602 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> Yes</p>	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M 10AM-6PM, TU 8:30AM-5PM, W 7:30AM-4PM, TH 9:30AM-5PM, F 8AM-4PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male
License number: A125435
NPI: 1235366782
Provider English Spoken: Yes
Provider Language(s) Spoken: Indonesian, Spanish
Cultural Competency: Yes
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115-1754
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M 7:30AM-4:30PM, TU 8AM-5PM, W 8:30AM-5PM, TH 8AM-6PM, F 8AM-4PM

NGUYEN, BRUCE C , OD

Provider Gender: Male
License number: 14156
NPI: 1376839019
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese

Cultural Competency: Yes
FASHION VALLEY EYE CARE
OPTOMETR
7007 FRIARS RD STE 351
SAN DIEGO, CA 92108-1148
Phone: (619) 291-2020
Fax: (888) 210-5799
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-SA 10AM-7PM

NGUYEN, BRUCE C , OD

Provider Gender: Male
License number: 14156
NPI: 1376839019
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Yes
CLAIREMONT OPTOMETRY
9353 CLRMNT MESA BLVD
STE K2
SAN DIEGO, CA 92123-1220
Phone: (858) 279-6500
Fax: (858) 225-7174
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Vietnamese
Min/Max Age:
Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 9AM-6PM, SA 9AM-3PM

NGUYEN, HOA PHUONG T , OD

Provider Gender: Female
License number: 12630
NPI: 1962439265
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Yes
COLLEGE GROVE
OPTOMETRY
4560 COLLEGE AVE
SAN DIEGO, CA 92115-4012
Phone: (619) 583-5744
Fax: (619) 582-6112
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M, TU, TH, F 10AM-6PM, W 11AM-7PM

NGUYEN, JASMINE P , OD

Provider Gender: Female
License number: 11189
NPI: 1497896922
Provider English Spoken: Yes

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

Provider Language(s) Spoken:
Vietnamese

Cultural Competency: Yes
JASMINE P NGUYEN OD INC
4029 43RD ST STE 300
SAN DIEGO, CA 92105-8537
Phone: (619) 284-3937

Fax: (619) 284-3938

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Vietnamese

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

*Public transportation (within 1/2
mile from Site):* Yes

Hours: M-F 9AM-5PM, SA
9AM-1PM

NGUYEN, KELVIN H , OD

Provider Gender: Male

License number: 11085

NPI: 1518923572

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: Yes

SAN DIEGO VISION CARE

OPTOMETRY

3807 FAIRMOUNT AVE STE
200

SAN DIEGO, CA 92105-2659

Phone: (619) 508-5678

Fax: (619) 501-0686

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Vietnamese

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

*Public transportation (within 1/2
mile from Site):* Yes

Hours: M-F 9AM-5PM

NGUYEN, THANH T , OD

Provider Gender: Female

License number: 13126

NPI: 1992813323

Provider English Spoken: Yes

Provider Language(s) Spoken:
Vietnamese

Cultural Competency: Yes

JASMINE P NGUYEN OD INC

4029 43RD ST STE 300

SAN DIEGO, CA 92105-8537

Phone: (619) 284-3937

Fax: (619) 284-3938

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Vietnamese

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

*Public transportation (within 1/2
mile from Site):* Yes

Hours: M-F 9AM-5PM, SA
9AM-1PM

NGUYEN, THANH T , OD

Provider Gender: Female

License number: 13126

NPI: 1992813323

Provider English Spoken: Yes

Provider Language(s) Spoken:
Vietnamese

Cultural Competency: Yes
SABRE SPRINGS OPTOMETRY

12650 SABRE SPGS PKWY
STE 203

SAN DIEGO, CA 92128-4114

Phone: (858) 748-1265

Fax: (844) 269-9527

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Vietnamese

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

*Public transportation (within 1/2
mile from Site):* No

Hours: M, TU, TH 9AM-5PM, W, F
10AM-6PM

NGUYEN, TRACY T , OD

Provider Gender: Female

License number: 10859

NPI: 1265596621

Provider English Spoken: Yes

Provider Language(s) Spoken:

Vietnamese

Cultural Competency: Yes

ESSENTIAL EYECARE

OPTOMETRY

7612 LINDA VISTA RD STE 105

SAN DIEGO, CA 92111-5313

Phone: (858) 467-0655

Fax:

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

<p>Vietnamese Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Public transportation (within 1/2 mile from Site): Yes Hours: M-W,F 11AM-3PM</p>	<p>Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: Yes WEST COAST EYE CARE 6945 EL CAJON BLVD SAN DIEGO, CA 92115-1754 Phone: (619) 697-4600 Fax: (619) 697-2410 After Hours Phone: Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Public transportation (within 1/2 mile from Site): No Hours: M 7:30AM-4:30PM, TU 8AM-5PM, W 8:30AM-5PM, TH 8AM-6PM, F 8AM-4PM</p>	<p>No Please contact provider for Accessibility information Public transportation (within 1/2 mile from Site): No Hours: M 10AM-6PM, TU 8:30AM-5PM, W 7:30AM-4PM, TH 9:30AM-5PM, F 8AM-4PM</p>
<p>O HALLORAN, HENRY, MD Provider Gender: Male License number: A73282 NPI: 1235287947 Provider English Spoken: Yes Provider Language(s) Spoken: German, Spanish Cultural Competency: Yes RADY CHILDRENS SPECIALISTS 7910 FROST ST STE 200 SAN DIEGO, CA 92123-2776 Phone: (858) 309-7702 Fax: (858) 966-8901 After Hours Phone: Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Public transportation (within 1/2 mile from Site): No Hours: M-F 7AM-5PM</p>	<p>PATEL, GITANE, MD Provider Gender: Male License number: A108603 NPI: 1710171434 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: Yes WEST COAST EYE CARE 4344 CONVOY ST STE C2 SAN DIEGO, CA 92111-3737 Phone: (858) 565-8822 Fax: (858) 565-2449 After Hours Phone: Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL):</p>	<p>PATEL, SARJAN H , MD Provider Gender: Male License number: A114976 NPI: 1316199326 Provider English Spoken: Yes Provider Language(s) Spoken: Gujarati, Hindi, Spanish Cultural Competency: Yes WEST COAST EYE CARE 6945 EL CAJON BLVD SAN DIEGO, CA 92115-1754 Phone: (619) 697-4600 Fax: (619) 697-2410 After Hours Phone: Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Public transportation (within 1/2 mile from Site): No Hours: M 7:30AM-4:30PM, TU 8AM-5PM, W 8:30AM-5PM, TH 8AM-6PM, F 8AM-4PM</p>
<p>PATEL, GITANE, MD Provider Gender: Male License number: A108603 NPI: 1710171434</p>	<p>PATEL, SARJAN H , MD Provider Gender: Male License number: A114976 NPI: 1316199326 Provider English Spoken: Yes Provider Language(s) Spoken:</p>	<p>PATEL, SARJAN H , MD Provider Gender: Male License number: A114976 NPI: 1316199326 Provider English Spoken: Yes Provider Language(s) Spoken:</p>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

Gujarati, Hindi, Spanish
Cultural Competency: Yes
 WEST COAST EYE CARE
 4344 CONVOY ST STE C2
 SAN DIEGO, CA 92111-3737
Phone: (858) 565-8822
Fax: (858) 565-2449
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
*Public transportation (within 1/2
 mile from Site):* No
Hours: M 10AM-6PM, TU
 8:30AM-5PM, W 7:30AM-4PM,
 TH 9:30AM-5PM, F 8AM-4PM

PHAM, TONY D , OD
Provider Gender: Male
License number: 12348
NPI: 1841271434
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish, Vietnamese
Cultural Competency: Yes
 MIRA MESA EYECARE
 6755 MIRA MESA BLVD STE
 141
 SAN DIEGO, CA 92121-4311
Phone: (858) 535-8282
Fax: (858) 535-0537
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Vietnamese
Min/Max Age:
Gender Restriction: No Gender

Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
*Public transportation (within 1/2
 mile from Site):* Yes
Hours: M-F 9AM-6PM, SA
 10AM-2PM

PHUNG, RICHARD N V, OD
Provider Gender: Male
License number: 9547
NPI: 1689661571
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Vietnamese, Chinese
Cultural Competency: Yes
 CITY HEIGHTS OPTOMETRY
 4236 UNIVERSITY AVE
 SAN DIEGO, CA 92105-1503
Phone: (619) 281-3422
Fax: (619) 281-1196
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Vietnamese
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
*Public transportation (within 1/2
 mile from Site):* No
Hours: M,W 10AM-4:30PM, TH
 10AM-5PM, F 10:30AM-5PM

PHUNG, RICHARD N V, OD
Provider Gender: Male
License number: 9547
NPI: 1689661571
Provider English Spoken: Yes

Provider Language(s) Spoken:
 Vietnamese, Chinese
Cultural Competency: Yes
 SCRIPPS RANCH OPTOMETRI
 CTR
 9880 HIBERT ST STE E1
 SAN DIEGO, CA 92131-1068
Phone: (858) 693-9044
Fax: (858) 693-0704
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Vietnamese
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
*Public transportation (within 1/2
 mile from Site):* No
Hours: M,W,TH 10AM-6PM, TU
 10AM-2PM, F,SA 9AM-2PM

POUSTI, SHEIVA L , OD
Provider Gender: Female
License number: 10403
NPI: 1730240052
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
 SAN DIEGO EYE CLINIC
 OPTOMETRY
 3560 FAIRMOUNT AVE STE A
 SAN DIEGO, CA 92105-3420
Phone: (619) 431-2020
Fax: (619) 376-2100
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish
Min/Max Age:

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-SU 9AM-6PM

PRABHU, SUJATA P , MD

Provider Gender: Female
License number: A115965
NPI: 1982872552
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: Yes
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115-1754
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M 7:30AM-4:30PM, TU 8AM-5PM, W 8:30AM-5PM, TH 8AM-6PM, F 8AM-4PM

PRABHU, SUJATA P , MD

Provider Gender: Female
License number: A115965
NPI: 1982872552
Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish
Cultural Competency: Yes
WEST COAST EYE CARE
4344 CONVOY ST STE C2
SAN DIEGO, CA 92111-3737
Phone: (858) 565-8822
Fax: (858) 565-2449
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M 10AM-6PM, TU 8:30AM-5PM, W 7:30AM-4PM, TH 9:30AM-5PM, F 8AM-4PM

ROSENBLATT, MICHELLE, OD

Provider Gender: Female
License number: 9039
NPI: 1942404488
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish
Cultural Competency: Yes
LOUIS E CHESNER OD
2404 MADISON AVE
SAN DIEGO, CA 92116-2920
Phone: (619) 291-3836
Fax: (619) 291-4625
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 9AM-5PM, SA 8AM-3PM

SAMADANI, ELLIE E , MD

Provider Gender: Female
License number: G83066
NPI: 1033268503
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish
Cultural Competency: Yes
ONE TO ONE LASIK
3737 MORAGA AVE STE A105
SAN DIEGO, CA 92117-5458
Phone: (858) 273-0200
Fax: (858) 273-0619
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-TH 8AM-5PM, F 8AM-4PM

SCHER, COLIN A , MD

Provider Gender: Male
License number: A42700
NPI: 1396816153
Provider English Spoken: Yes
Provider Language(s) Spoken:

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

Spanish
Cultural Competency: Yes
RADY CHILDRENS SPECIALISTS
 7910 FROST ST STE 200
 SAN DIEGO, CA 92123-2776
Phone: (858) 309-7702
Fax: (858) 966-8901
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 7AM-5PM

SHULKIN, MITCHELL S , OD
Provider Gender: Male
License number: 8153
NPI: 1770531865
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
NORTH COUNTY OPTOMETRY
 11835 CARMEL MTN RD STE 1313
 SAN DIEGO, CA 92128-4609
Phone: (858) 674-1276
Fax: (858) 674-5863
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Tagalog
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):

No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M 9AM-5PM, TU 7AM-5PM, W,TH 10AM-7PM, F 10AM-5PM, SA 9AM-2PM

SORIANO, CATHERINE F , OD
Provider Gender: Female
License number: 13109
NPI: 1508919085
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish, Tagalog
Cultural Competency: Yes
WEST COAST EYE CARE
 6945 EL CAJON BLVD
 SAN DIEGO, CA 92115-1754
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No

Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M 7:30AM-4:30PM, TU 8AM-5PM, W 8:30AM-5PM, TH 8AM-6PM, F 8AM-4PM

SORIANO, CATHERINE F , OD
Provider Gender: Female
License number: 13109
NPI: 1508919085
Provider English Spoken: Yes
Provider Language(s) Spoken:

Spanish, Tagalog
Cultural Competency: Yes
WEST COAST EYE CARE
 4344 CONVOY ST STE C2
 SAN DIEGO, CA 92111-3737
Phone: (858) 565-8822
Fax: (858) 565-2449
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M 10AM-6PM, TU 8:30AM-5PM, W 7:30AM-4PM, TH 9:30AM-5PM, F 8AM-4PM

STEVENS, TANIA, OD
Provider Gender: Female
License number: 12072
NPI: 1427089630
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: Yes
OPTOMETRY CABANA
 12925 EL CAMINO REAL STE AA3
 SAN DIEGO, CA 92130-1891
Phone: (858) 348-5900
Fax: (858) 617-0780
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Russian, Spanish
Min/Max Age:
Gender Restriction: No Gender

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

<p>Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> Yes <i>Hours:</i> M-F 10AM-6PM, SA 9AM-3PM</p> <p>TAM, MAY C , OD <i>Provider Gender:</i> Female <i>License number:</i> 11960 <i>NPI:</i> 1548255896 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> Yes OPTOM-EYES VISION CARE OPTOMETRY 1555 PALM AVE STE A2 SAN DIEGO, CA 92154-1012 <i>Phone:</i> (619) 297-2020 <i>Fax:</i> (888) 210-5799 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> Yes <i>Hours:</i> M-F 9:30AM-6PM, SA 9AM-3PM</p> <p>TAM, MAY C , OD <i>Provider Gender:</i> Female <i>License number:</i> 11960 <i>NPI:</i> 1548255896 <i>Provider English Spoken:</i> Yes</p>	<p><i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> Yes FASHION VALLEY EYE CARE OPTOMETR 7007 FRIARS RD STE 351 SAN DIEGO, CA 92108-1148 <i>Phone:</i> (619) 291-2020 <i>Fax:</i> (888) 210-5799 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> Yes <i>Hours:</i> M-SA 10AM-7PM</p> <p>TAM, MAY C , OD <i>Provider Gender:</i> Female <i>License number:</i> 11960 <i>NPI:</i> 1548255896 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> Yes OPTOM-EYES VISION CARE OPTOMETRY 5638 MISSION CENTER RD STE 103 SAN DIEGO, CA 92108-4348 <i>Phone:</i> (619) 295-2900 <i>Fax:</i> (888) 210-5799 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish</p>	<p><i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> No <i>Hours:</i> M-F 9AM-5:30PM, SA 9AM-3PM</p> <p>TONNU, ANH T , OD <i>Provider Gender:</i> Female <i>License number:</i> 11318 <i>NPI:</i> 1679521280 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Vietnamese <i>Cultural Competency:</i> Yes WEST COAST EYE CARE 4344 CONVOY ST STE C2 SAN DIEGO, CA 92111-3737 <i>Phone:</i> (858) 565-8822 <i>Fax:</i> (858) 565-2449 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> No <i>Hours:</i> M 10AM-6PM, TU 8:30AM-5PM, W 7:30AM-4PM, TH 9:30AM-5PM, F 8AM-4PM</p> <p>TONNU, ANH T , OD <i>Provider Gender:</i> Female <i>License number:</i> 11318</p>
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K. Directorio de proveedores de atención de la vista - Servicios de la vista

NPI: 1679521280
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Vietnamese
 Cultural Competency: Yes
 WEST COAST EYE CARE
 6945 EL CAJON BLVD
 SAN DIEGO, CA 92115-1754
 Phone: (619) 697-4600
 Fax: (619) 697-2410
 After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Public transportation (within 1/2 mile from Site): No
 Hours: M 7:30AM-4:30PM, TU 8AM-5PM, W 8:30AM-5PM, TH 8AM-6PM, F 8AM-4PM

TRANG, CHAU H , OD
 Provider Gender: Female
 License number: 9556
 NPI: 1073671087
 Provider English Spoken: Yes
 Provider Language(s) Spoken: French, Spanish, Vietnamese, Chinese
 Cultural Competency: Yes
 CHAU H TRANG OD
 6947 LINDA VISTA RD STE A
 SAN DIEGO, CA 92111-6363
 Phone: (858) 495-0592
 Fax: (858) 495-0560
 After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:

French, Spanish, Vietnamese
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Public transportation (within 1/2 mile from Site): Yes
 Hours: M,W 10AM-4PM, F 10AM-5:30PM, SA 9AM-1PM

TRAN, MICHAEL D , OD
 Provider Gender: Male
 License number: 14530
 NPI: 1649524216
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Vietnamese
 Cultural Competency: Yes
 NEW OPTIX OPTOMETRY
 4898 CONVOY ST STE 103
 SAN DIEGO, CA 92111-1633
 Phone: (858) 565-1001
 Fax: (858) 565-1004
 After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Korean, Tagalog
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Public transportation (within 1/2 mile from Site): Yes
 Hours: M 9AM-4PM, TU,TH 10AM-7PM, W,F 9AM-6PM, SA 9AM-5PM

VAN HOOSE, PATRICK, OD

Provider Gender: Male
 License number: 6576
 NPI: 1811024516
 Provider English Spoken: Yes
 Provider Language(s) Spoken: German, Spanish
 Cultural Competency: Yes
 ACKROYD AND VAN HOOSE OPTOMETRY
 7246 CLAIREMONT MESA BLVD
 SAN DIEGO, CA 92111-1007
 Phone: (858) 292-7193
 Fax: (858) 292-8247
 After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Public transportation (within 1/2 mile from Site): Yes
 Hours: M,F 8AM-5PM, TU,TH 9AM-6PM, W 9AM-5PM, SA 9AM-1PM

VIVIRITO, MARY, OD
 Provider Gender: Female
 License number: 33798
 NPI: 1477968667
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: Yes
 FASHION VALLEY EYE CARE OPTOMETR
 7007 FRIARS RD STE 351
 SAN DIEGO, CA 92108-1148

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

Phone: (619) 291-2020
 Fax: (888) 210-5799
 After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Public transportation (within 1/2
 mile from Site): Yes
 Hours: M-SA 10AM-7PM

VIVIRITO, MARY, OD

Provider Gender: Female
 License number: 33798
 NPI: 1477968667
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: Yes
 OPTOM-EYES VISION CARE
 OPTOMETRY
 5638 MISSION CENTER RD
 STE 103
 SAN DIEGO, CA 92108-4348
 Phone: (619) 295-2900
 Fax: (888) 210-5799
 After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information

Public transportation (within 1/2
 mile from Site): No
 Hours: M-F 9AM-5:30PM, SA
 9AM-3PM

YUEN, STEVEN T , OD

Provider Gender: Male
 License number: 10454
 NPI: 1447289814
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Chinese
 Cultural Competency: Yes
 DR STEVEN YUEN
 OPTOMETRIC INC APC
 7330 CLRMT MSA BLVD STE
 A102
 SAN DIEGO, CA 92111-1124
 Phone: (858) 292-4498
 Fax: (858) 292-0967
 After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Vietnamese, Chinese
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Public transportation (within 1/2
 mile from Site): Yes
 Hours: M-W,F,SU 10AM-7PM,
 SA 10AM-7:30PM

YU, JEAN D , OD

Provider Gender: Female
 License number: 11789
 NPI: 1861531535
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Tagalog, Chinese
 Cultural Competency: Yes

NEOVISION OPTOMETRY
 8137 MIRA MESA BLVD
 SAN DIEGO, CA 92126-2601
 Phone: (858) 689-9533
 Fax: (858) 689-9515
 After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Tagalog, Chinese
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Public transportation (within 1/2
 mile from Site): Yes
 Hours: TU,TH-SA 9:30AM-6PM,
 W 9:30AM-5PM

SAN MARCOS

SKAY, RICHARD M , OD

Provider Gender: Male
 License number: 7649
 NPI: 1639251945
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: Yes
 RICHARD M SKAY OD
 1903 W SAN MARCOS BLVD
 STE 130
 SAN MARCOS, CA 92078-3907
 Phone: (760) 727-2211
 Fax: (760) 727-2533
 After Hours Phone:
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* No
Hours: M-F 9AM-3PM

TA, MINI P , OD

Provider Gender: Female
License number: 15170
NPI: 1578955605
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
NEW OPTIX OPTOMETRY
640 GRAND AVE STE 101
SAN MARCOS, CA 92078-1207
Phone: (760) 736-0020
Fax: (760) 736-0019
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Vietnamese
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* Yes
Hours: TU-F 9AM-5PM, SA
9AM-2PM

TRAN, MICHAEL D , OD

Provider Gender: Male
License number: 14530
NPI: 1649524216
Provider English Spoken: Yes
Provider Language(s) Spoken:
Vietnamese
Cultural Competency: Yes
NEW OPTIX OPTOMETRY

640 GRAND AVE STE 101
SAN MARCOS, CA 92078-1207
Phone: (760) 736-0020
Fax: (760) 736-0019
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Vietnamese
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* Yes
Hours: TU-F 9AM-5PM, SA
9AM-2PM

SANTEE

BOECK, CARL A , OD

Provider Gender: Male
License number: 6620
NPI: 1588656151
Provider English Spoken: Yes
Provider Language(s) Spoken:
German, Spanish
Cultural Competency: Yes
DRS BOECK AND SCHISLER
OPTOMETRISTS
9621 MISSION GORGE RD STE
106
SANTEE, CA 92071-3802
Phone: (619) 449-2000
Fax: (619) 449-8303
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender

Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* Yes
Hours: M,TH,F 9AM-5PM, TU
2PM-6PM

SCHISLER, RONALD W , OD

Provider Gender: Male
License number: 6791
NPI: 1346378742
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
DRS BOECK AND SCHISLER
OPTOMETRISTS
9621 MISSION GORGE RD STE
106
SANTEE, CA 92071-3802
Phone: (619) 449-2000
Fax: (619) 449-8303
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* Yes
Hours: M,TH,F 9AM-5PM, TU
2PM-6PM

SPRING VALLEY

CUMMINS JR, JAMES W , OD

Provider Gender: Male

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

License number: 6016
NPI: 1568595791
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
JAMES W CUMMINS JR OD
9628 CAMPO RD STE C
SPRING VALLEY, CA
91977-1233
Phone: (619) 463-9318
Fax:
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): No
Hours: M,W,TH 9AM-5PM, TU
9AM-5:30PM, F 9AM-4PM, SA
8:30AM-12PM

CUMMINS JR, JAMES W , OD
Provider Gender: Male
License number: 6016
NPI: 1568595791
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
JOHN C FLEMING OD
9628 CAMPO RD STE C
SPRING VALLEY, CA
91977-1233
Phone: (619) 463-9318
Fax: (619) 463-9640
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): No
Hours: M,W,TH 9AM-5PM, TU
9AM-5:30PM, F 9AM-4PM, SA
9AM-12PM

FLEMING, JOHN C , OD
Provider Gender: Male
License number: 8461
NPI: 1033192133
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
JOHN C FLEMING OD
9628 CAMPO RD STE C
SPRING VALLEY, CA
91977-1233
Phone: (619) 463-9318
Fax: (619) 463-9640
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): No
Hours: M,W,TH 9AM-5PM, TU
9AM-5:30PM, F 9AM-4PM, SA
9AM-12PM

JOHNSON, CHRISTOPHER, OD
Provider Gender: Male

License number: 15100
NPI: 1568861425
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
JOHN C FLEMING OD
9628 CAMPO RD STE C
SPRING VALLEY, CA
91977-1233
Phone: (619) 463-9318
Fax: (619) 463-9640
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): No
Hours: M,W,TH 9AM-5PM, TU
9AM-5:30PM, F 9AM-4PM, SA
9AM-12PM

KALRA, ANKUR, OD
Provider Gender: Male
License number: 11898
NPI: 1124195789
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi
Cultural Competency: Yes
EYE CARE OPTOMETRY
ASSOCIATES
687 SWEETWATER RD
SPRING VALLEY, CA
91977-5628
Phone: (619) 466-9444
Fax: (619) 466-9314
After Hours Phone:
Accepting New Patients: Yes

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

<p><i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> No <i>Hours:</i> M-F 9AM-6PM, SA 9AM-5PM</p>	<p>9AM-5PM TOUBIA, ELIAS, OD <i>Provider Gender:</i> Male <i>License number:</i> 33758 <i>NPI:</i> 1740701481 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic <i>Cultural Competency:</i> Yes EYE CARE OPTOMETRY ASSOCIATES 687 SWEETWATER RD SPRING VALLEY, CA 91977-5628 <i>Phone:</i> (619) 466-9444 <i>Fax:</i> (619) 466-9314 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> No <i>Hours:</i> M-F 9AM-6PM, SA 9AM-5PM</p>	<p>29115 VALLEY CENTER RD STE E VALLEY CENTER, CA 92082-6553 <i>Phone:</i> (760) 751-8771 <i>Fax:</i> (760) 751-8772 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> No <i>Hours:</i> M 9AM-6PM, TU-F 9AM-5PM</p>
<p>KEDDINGTON, JOAN, OD <i>Provider Gender:</i> Female <i>License number:</i> 6263 <i>NPI:</i> 1992872691 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> Yes EYE CARE OPTOMETRY ASSOCIATES 687 SWEETWATER RD SPRING VALLEY, CA 91977-5628 <i>Phone:</i> (619) 466-9444 <i>Fax:</i> (619) 466-9314 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> No <i>Hours:</i> M-F 9AM-6PM, SA 9AM-5PM</p>	<p>VALLEY CENTER</p>	<p>JOYCE, ROBERT J , OD <i>Provider Gender:</i> Male <i>License number:</i> 11833 <i>NPI:</i> 1275585127 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> Yes VALLEY CENTER OPTOMETRY 29115 VALLEY CENTER RD STE E VALLEY CENTER, CA 92082-6553 <i>Phone:</i> (760) 751-8771 <i>Fax:</i> (760) 751-8772 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender</p>
<p><i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> No <i>Hours:</i> M-F 9AM-6PM, SA</p>	<p>CRUZ, MICHELLE C , OD <i>Provider Gender:</i> Female <i>License number:</i> 33482 <i>NPI:</i> 1679926646 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> American Sign Language <i>Cultural Competency:</i> Yes VALLEY CENTER OPTOMETRY</p>	

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

Restrictions
American Sign Language (ASL): No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* No
Hours: M 9AM-6PM, TU-F
9AM-5PM

License number: 7696
NPI: 1356414551
Provider English Spoken: Yes
Provider Language(s) Spoken:
Korean, Spanish
Cultural Competency: Yes
BRUCE D GEORGE OD
931 ANZA AVE STE B
VISTA, CA 92084-4531
Phone: (760) 758-2340
Fax: (760) 867-2222

VISTA

DEMLINGER, GLENN M , OD

Provider Gender: Male
License number: 8954
NPI: 1508932518
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: Yes
SHADOWRIDGE FAMILY
VISION
741 SHADOWRIDGE DR
VISTA, CA 92083-7997
Phone: (760) 727-1844
Fax: (760) 727-3044
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* Yes
Hours: M,TU,TH 9AM-6PM, W
7AM-5PM

After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* Yes
Hours: M,TH,F 9AM-5PM, TU,W
9AM-6PM

GEORGE, BRUCE D , OD

Provider Gender: Male

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